Imaging of the Respiratory System: Chest X-ray and Computed Tomography

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Chest X-ray=Chest Radiograph

- Common study in practice
 Quick
- Easily accessible
- O Cheap
- Can be performed at bedside but;
- Not very sensitive for many pathologies



Indications

• Respiratory Diseases

- O Cardiac Diseases
- O Thoracic Trauma
- Pneumoperitoneum (free air in abdomen)
- Pre-operative and post-operative imaging
- Check position of tubes and catheters (endotracheal tube, intracardiac devices, etc)
- Explore foreign bodies
- O Evaluate symptoms related to abdominal pathology

Chest X-ray=Chest Radiograph



Posteroanterior (PA) Chest X-ray

• Standard Chest Xray projection

- Patient is erect
- Facing the upright image receptor (detector)

• The chin is raised





Posteroanterior (PA) Chest X-ray

- Standard Chest Xray projection
- Shoulders are rotated anteriorly
- Hands placed on the posterior aspect of the hips or around the image receptor (in hugging position)



To move scapulae laterally out of the imaging field

Posteroanterior (PA) Chest X-ray

• Patient is erect

- Facing image receptor (detector)
- The chin is up
- O Shoulders are rotated anteriorly
- Scapulae are moved off the imaging field
- **O DEEP INSPIRATION**



LATERAL PROJECTION

 Confirm location of abnormalities detected on PA projection

• Check for abnormalities hidden on PA projection

• Prefer to use PA and lateral projection together





• Before you start;

• Check the name of the patient and the date of the examination

INTERPRETATION

- Have a systematic approach
- Check the chest wall, bones, and abdomen
- Check the mediastinum, heart and hili
- Check and compare lungs

INTERPRETATION

OLD FILMS ARE OUR BEST FRIENDSODON'T FORGET TO ASK FOR THEM

ANATOMY





Computed Tomography (CT)

- Cross sectional imaging
- O Uses X-ray!!!!
- Fast and easy method
- Excellent anatomic detail
- Patients should hold breath for a short period of time

Computed Tomography (CT)

O Heart

- O Airways
- O Lungs
- Mediastinum
- Associated bones and soft tissues can be evaluated

Indications

- O Evaluation of abnormalities identified on a chest radiograph
- O Diagnosis and staging of lung cancer
- Detection of metastasis from known extrathoracic malignancies
- Assessment of congenital anomalies of the thoracic great vessels
- Characterization of interstitial lung disease
- O Chest Trauma
- O Pulmonary embolism

Computed Tomography (CT)



Operating console



Scanner

- Patient in supine position
- Standart axial images
- With or without intravenous contrast material
- Scan from clavicles to costophrenic angles

Scout image: A radiograph to guide the technician; where to start and to stop scanning



O Patient in supine position

O Standart axial images

- With or without intravenous contrast material
- Scan from clavicles to costophrenic angles



LearningRadiology



