**Chest X-ray**

*A trained doctor is needed to collect this information.*

* The chest X-ray should be a PA view on standard 14 inch x 17 inch film.
* **Date of chest X-ray**: write the date that the chest X-ray was performed (this should be written on the chest X-ray)
* **Chest X-ray ID#:** write the number that uniquely identifies this film. Usually this is found on the film itself.
* **Type of visit:** mark the visit at which the chest X-ray was done. Chest X-rays done for clinical reasons (outside of the Schedule of Events) should be marked "Unscheduled".

**Chest X-ray results**

* Extent of disease
  + **Normal**: no lesions visible in either lung.
  + **Unilateral disease**: one lung has no visible lesions.
  + **Bilateral disease**: lesions visible in both lungs.
* Cavity size
  + A cavity is defined as a gas-containing lucent space at least 1 cm in diameter within the lung parenchyma surrounded by an infiltrate or fibrotic wall greater than 2 mm thick seen on a standard chest radiograph.
  + Aggregate cavity diameter is the sum of diameters of ALL cavities.
  + Cavity diameter should be measured on a standard 14" x 17" 6 foot posteroanterior chest x-ray.
  + **No cavities**: no cavities visible in any part of the lungs.
  + **< 5 cm**: single or multiple cavities are visible. The aggregate diameter of all cavities is less than 5 cm. For each cavity, measure at point of maximum diameter.
  + **≥ 5 cm**: Single or multiple cavities are visible. The aggregate diameter ≥ 5 cm. For each cavity, measure at point of maximum diameter)
* Presence of fibrosis
  + Fibrosis generally appears as linear or reticular densities within the lung fields on the chest x-ray. The edges of these densities should be distinct and there should be no suggestion of airspace opacification or haziness between or surrounding these densities. Calcification can be present within fibrotic lesions.
  + **None**: no fibrotic lesions are visible in any lung fields.
  + **In 1 lobe or less**: fibrotic lesions are visible in a single lobe. The right lung is divided into three lobes, an upper, middle, and a lower. The left lung is divided into two lobes, an upper and lower.
  + **In more than 1 lobe**: fibrotic lesions are visible in two or more lobes. These lobes do not need to be contiguous or in the same lung.
* Comparison with last X-ray
  + **Improved**: This chest X-ray shows less disease, smaller or resolving cavities, or less fibrosis than the previous one.
  + **Worsening**: This chest X-ray shows more or worsening disease than the previous one.
  + **Same (unchanged):** This chest X-ray is more or less similar to the previous one, in the opinion of the reader and after accounting for differences in technique.
  + **Not applicable**: There is no previous chest X-ray or it cannot be found for comparison.

**Other tests (ultrasound, CT, MRI etc.)**

List other radiographical test results here, done for any reason. Often the test results contain a lot of text. In that case, summarize the results here and attach the original results in the patient file (these can be uploaded to the EMR if necessary).