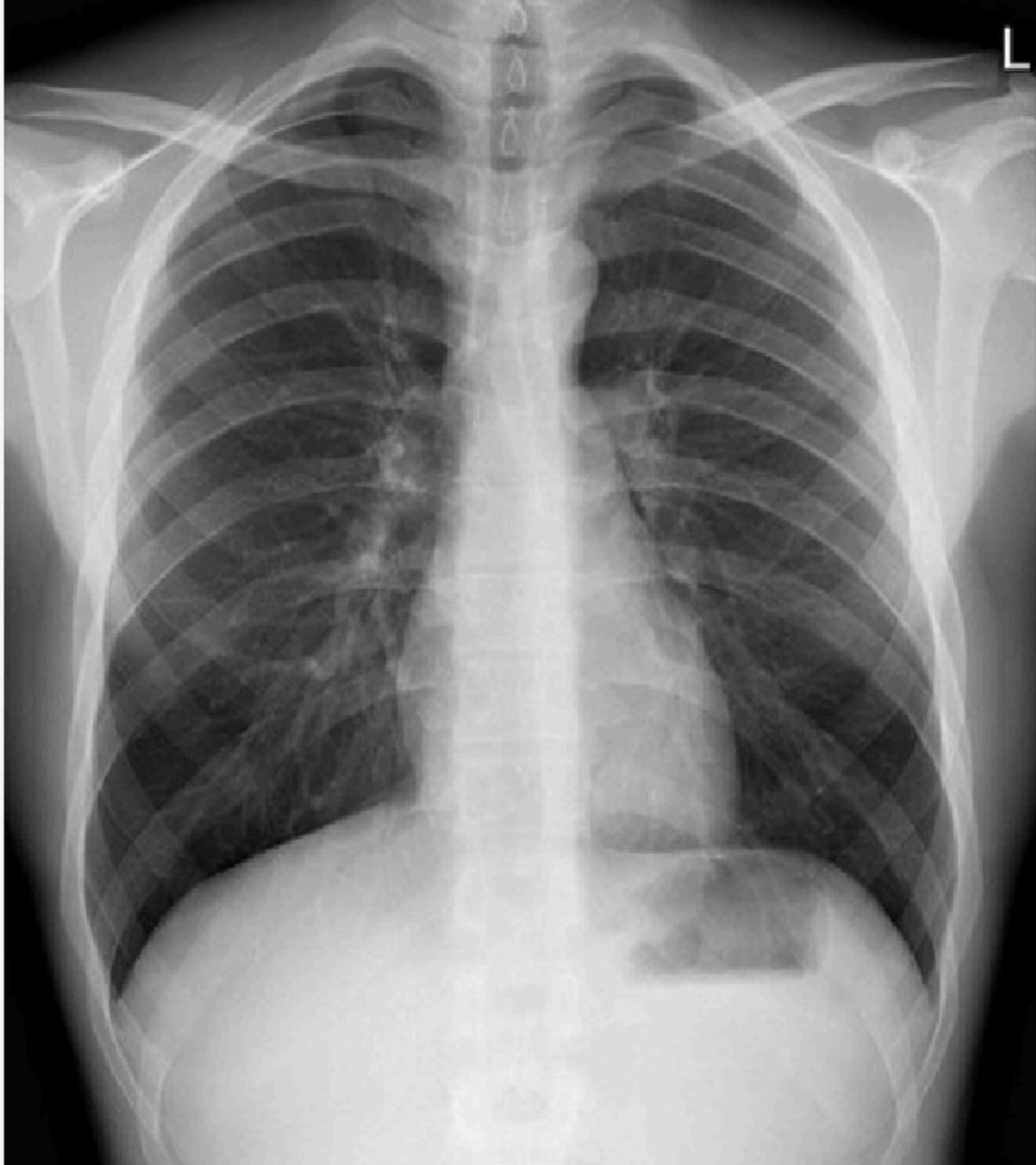


Chest 4

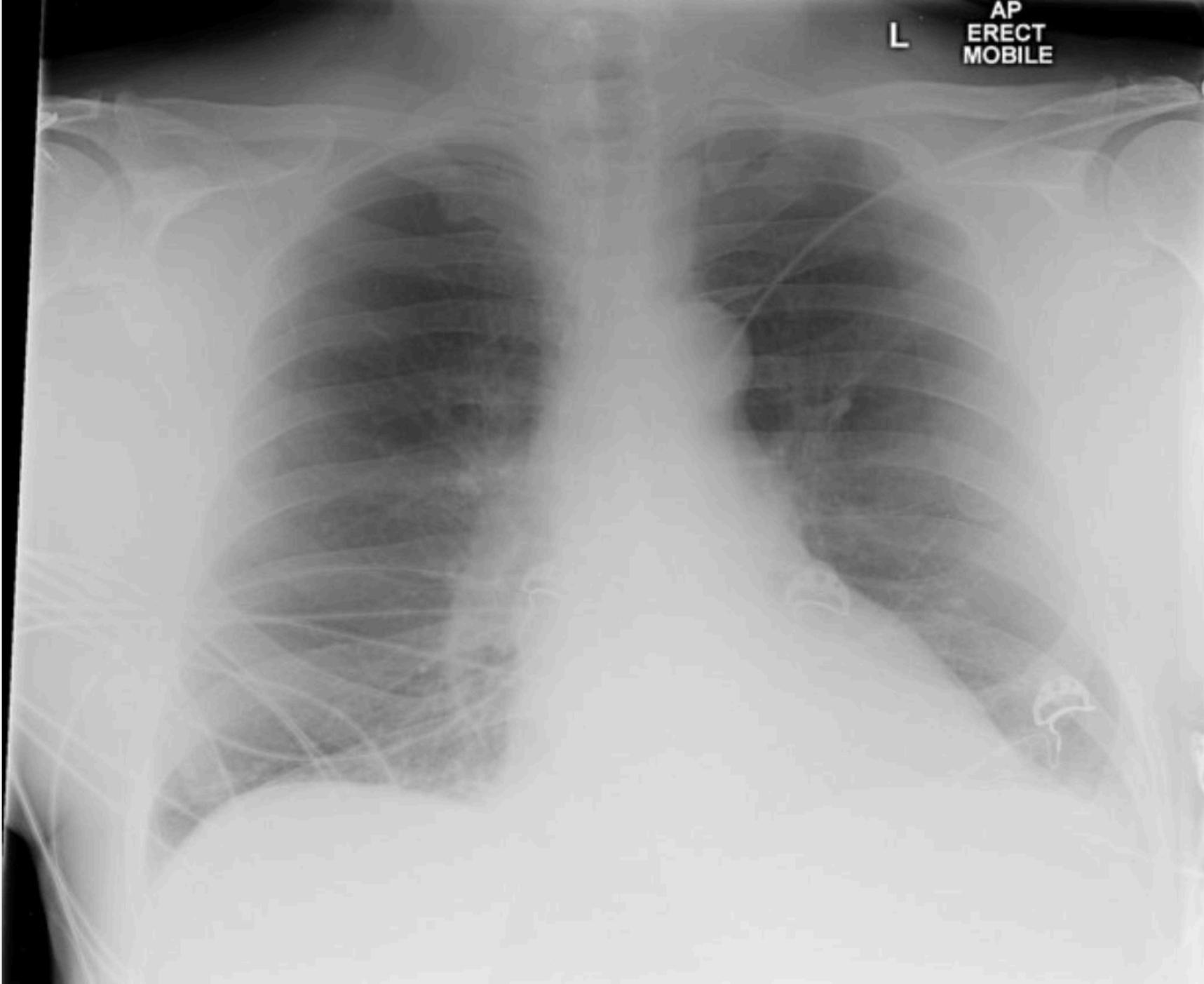
Dr.lina rawashdeh



normal CXR



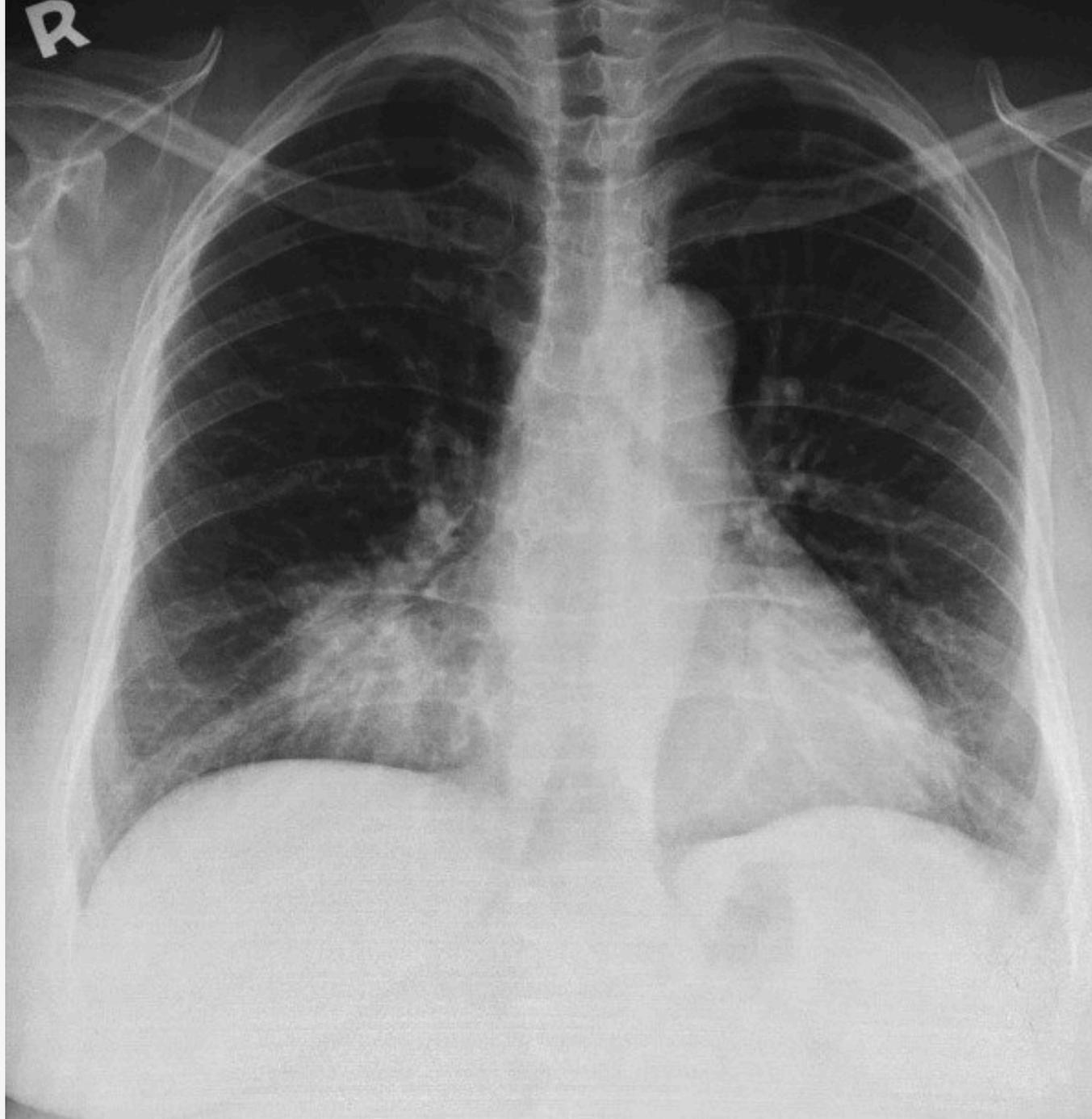
L AP
ERECT
MOBILE



Normal AP

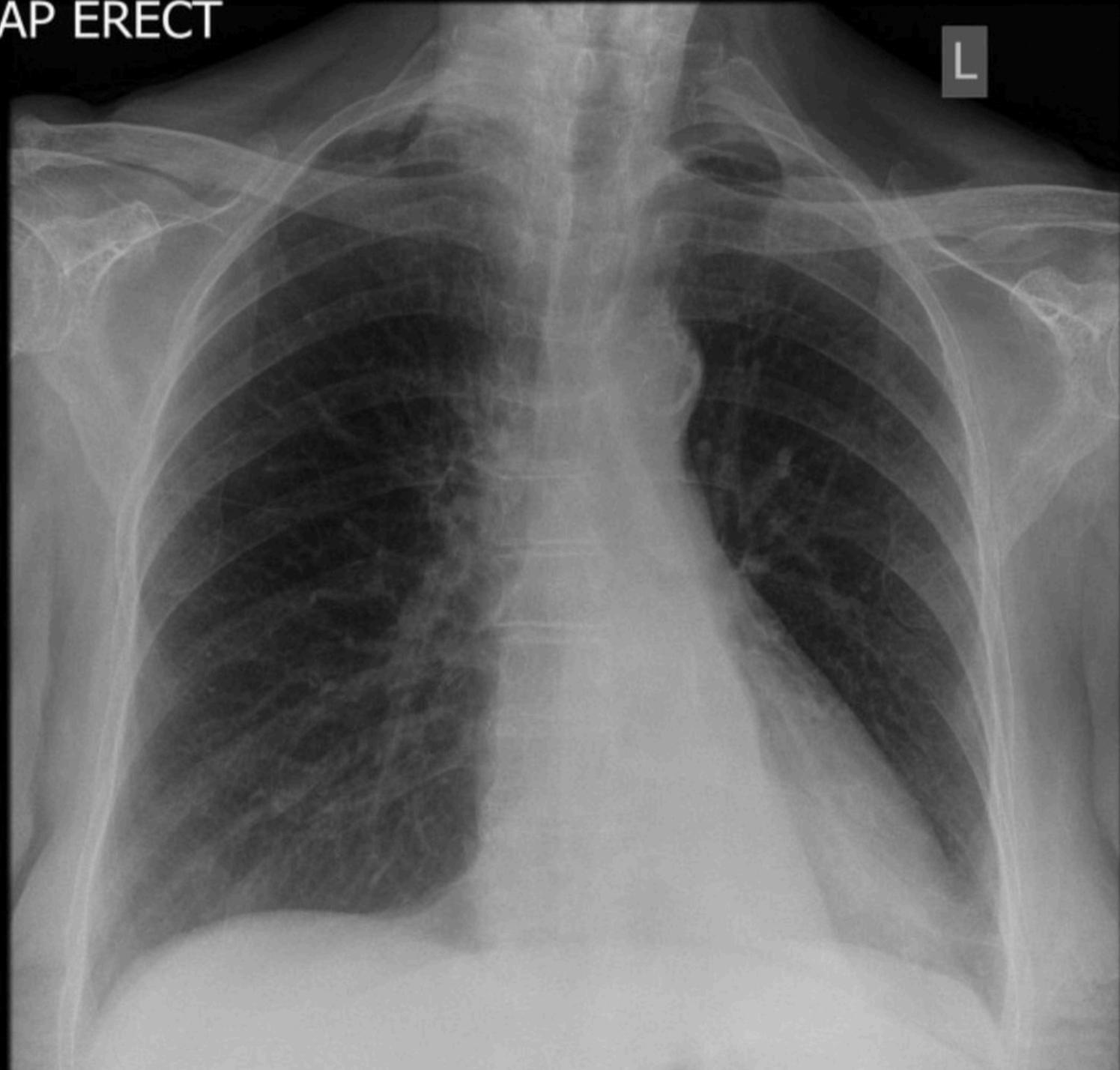


**Middle right
pneumonia**



AP ERECT

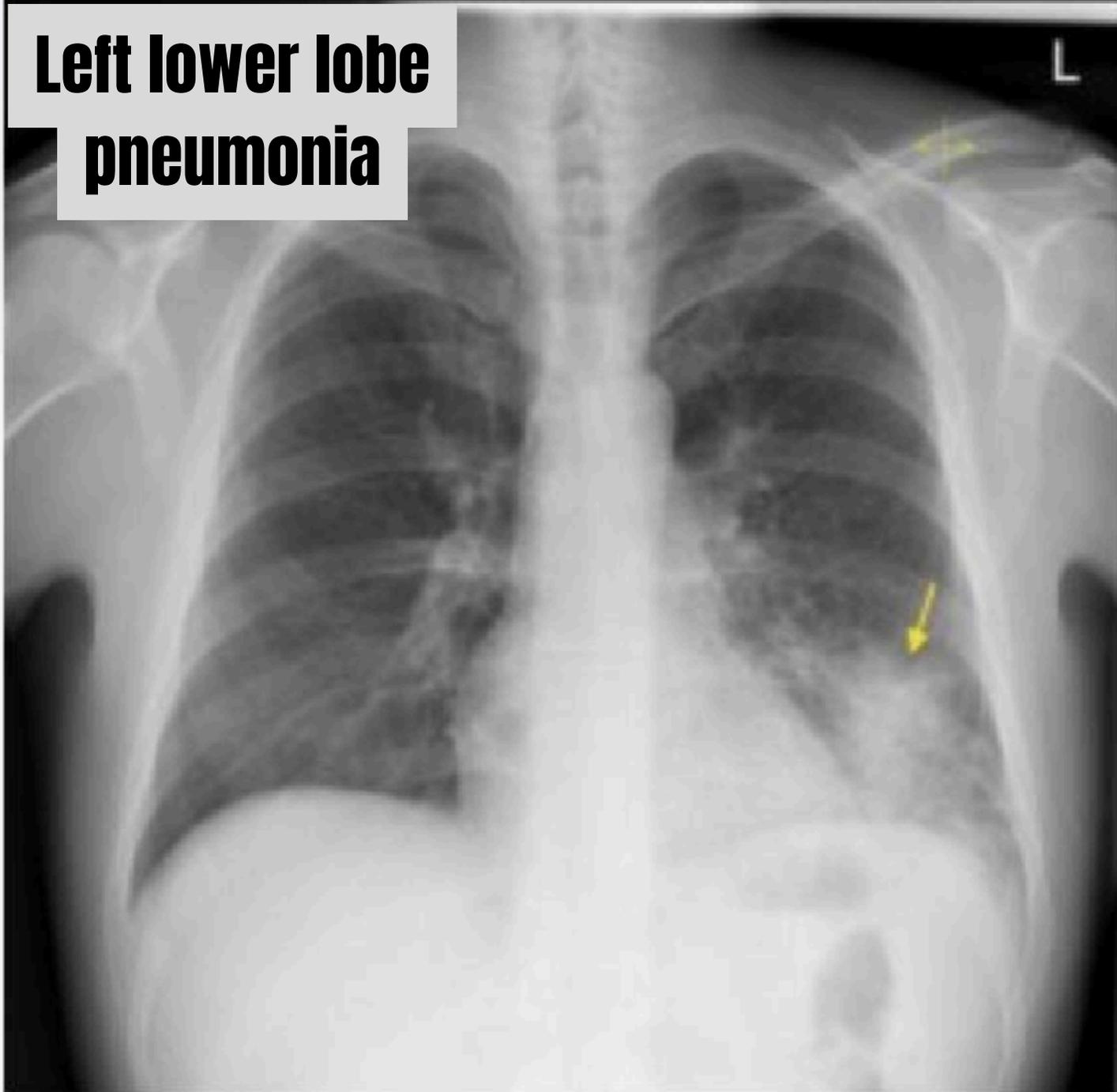
L



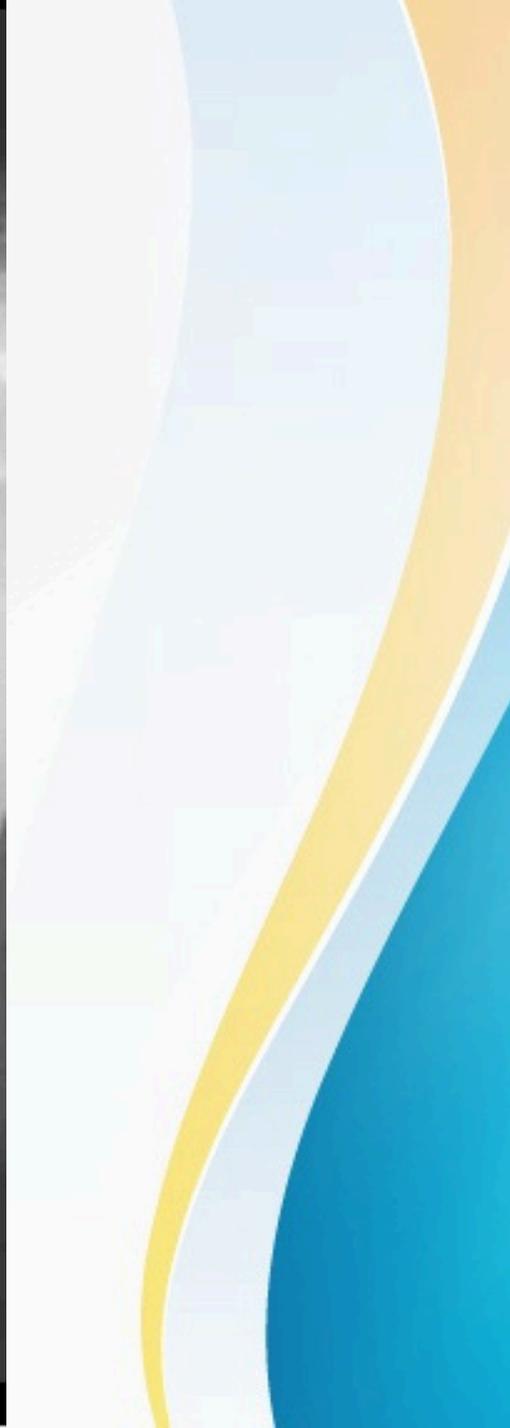
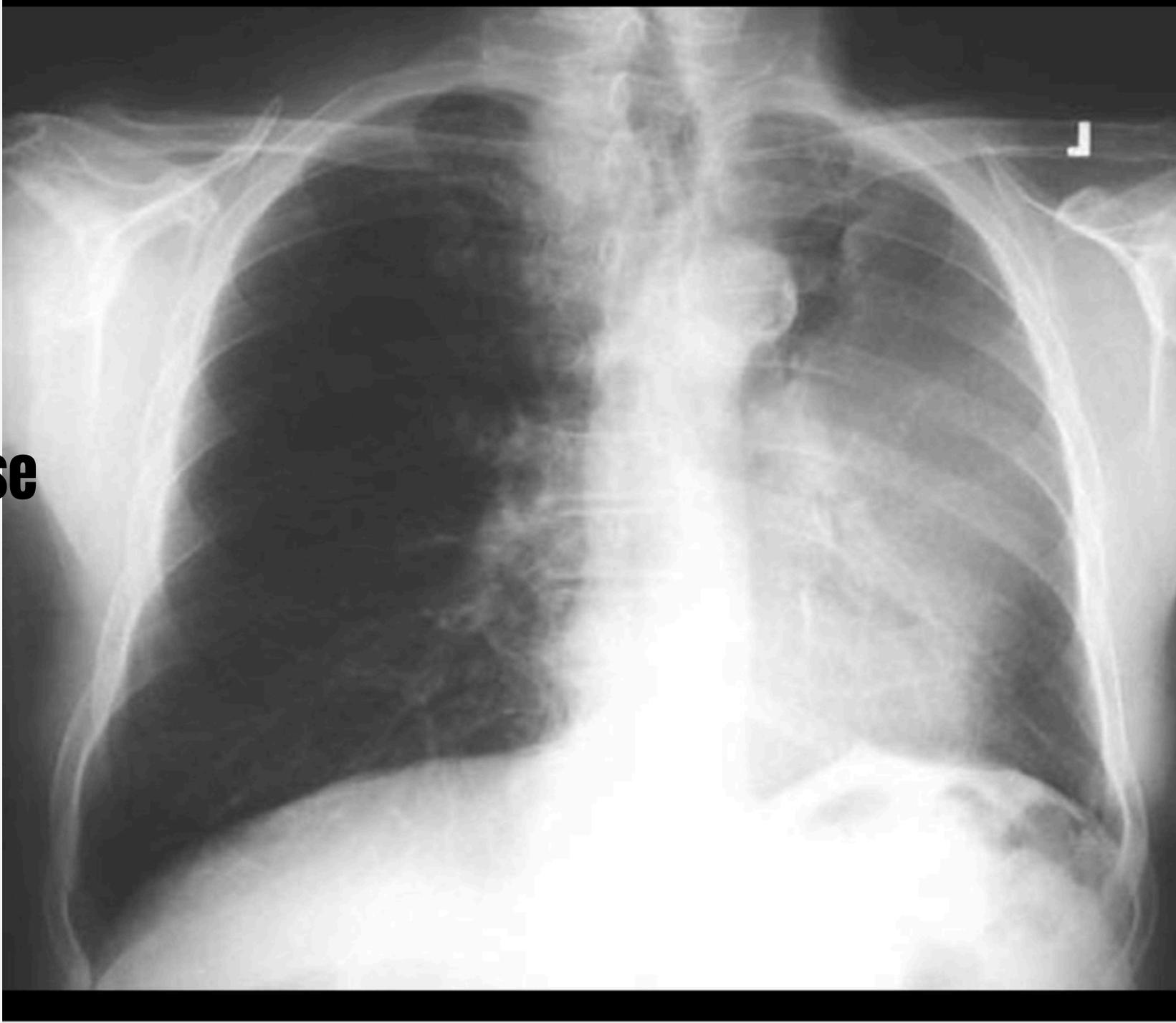
**Left lower
lobe collapse**



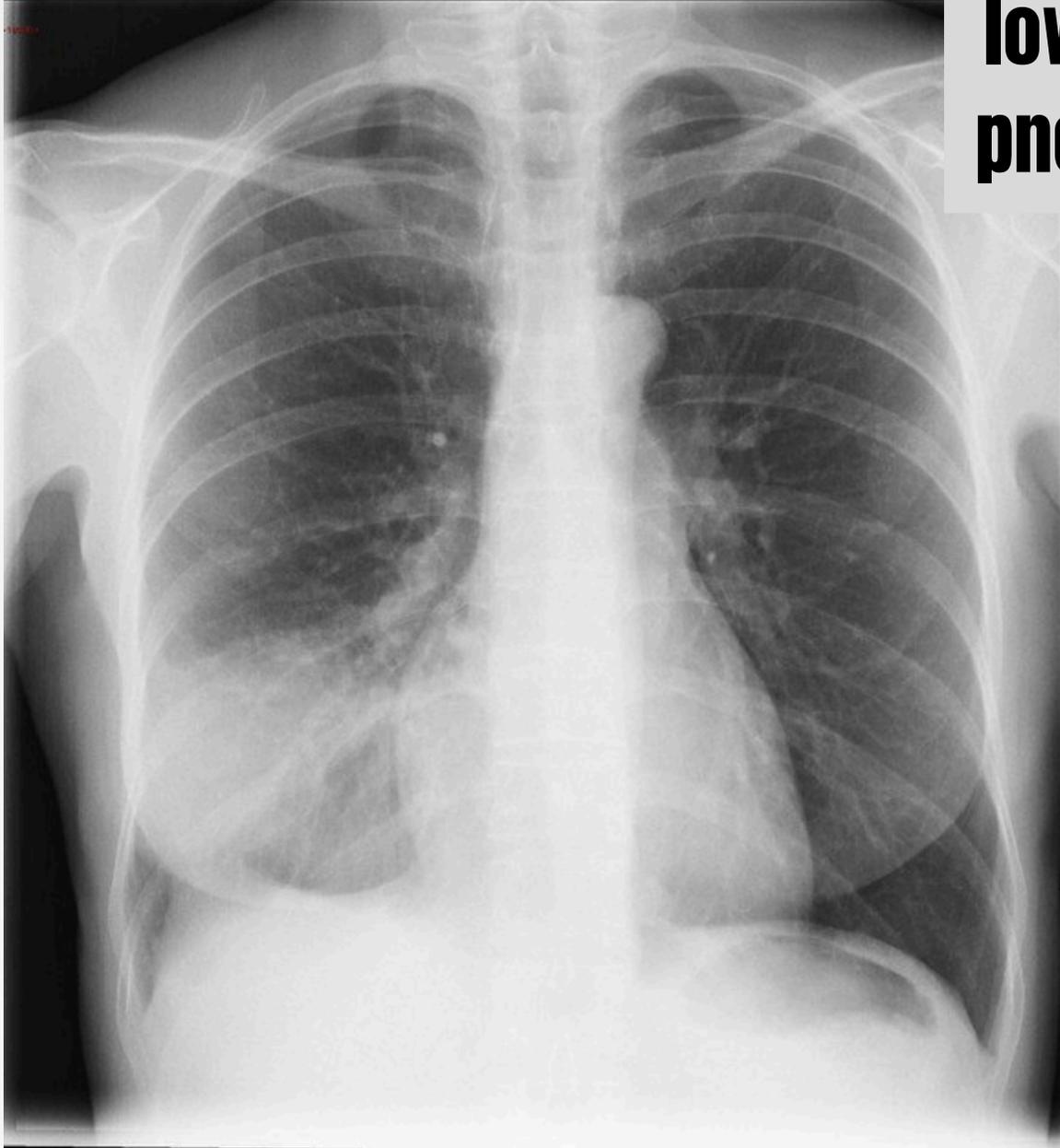
**Left lower lobe
pneumonia**



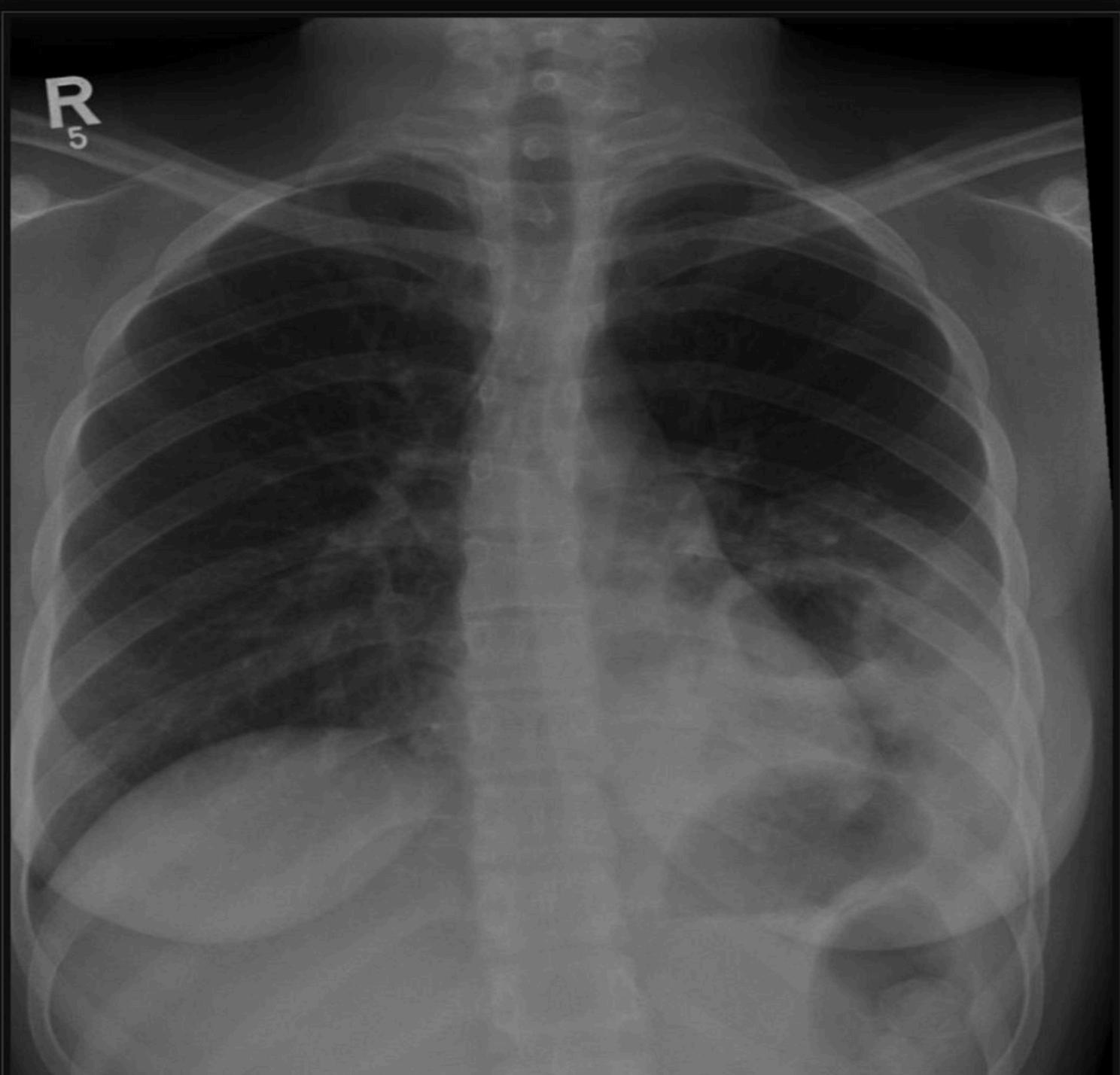
**left Upper
lobe collapse**

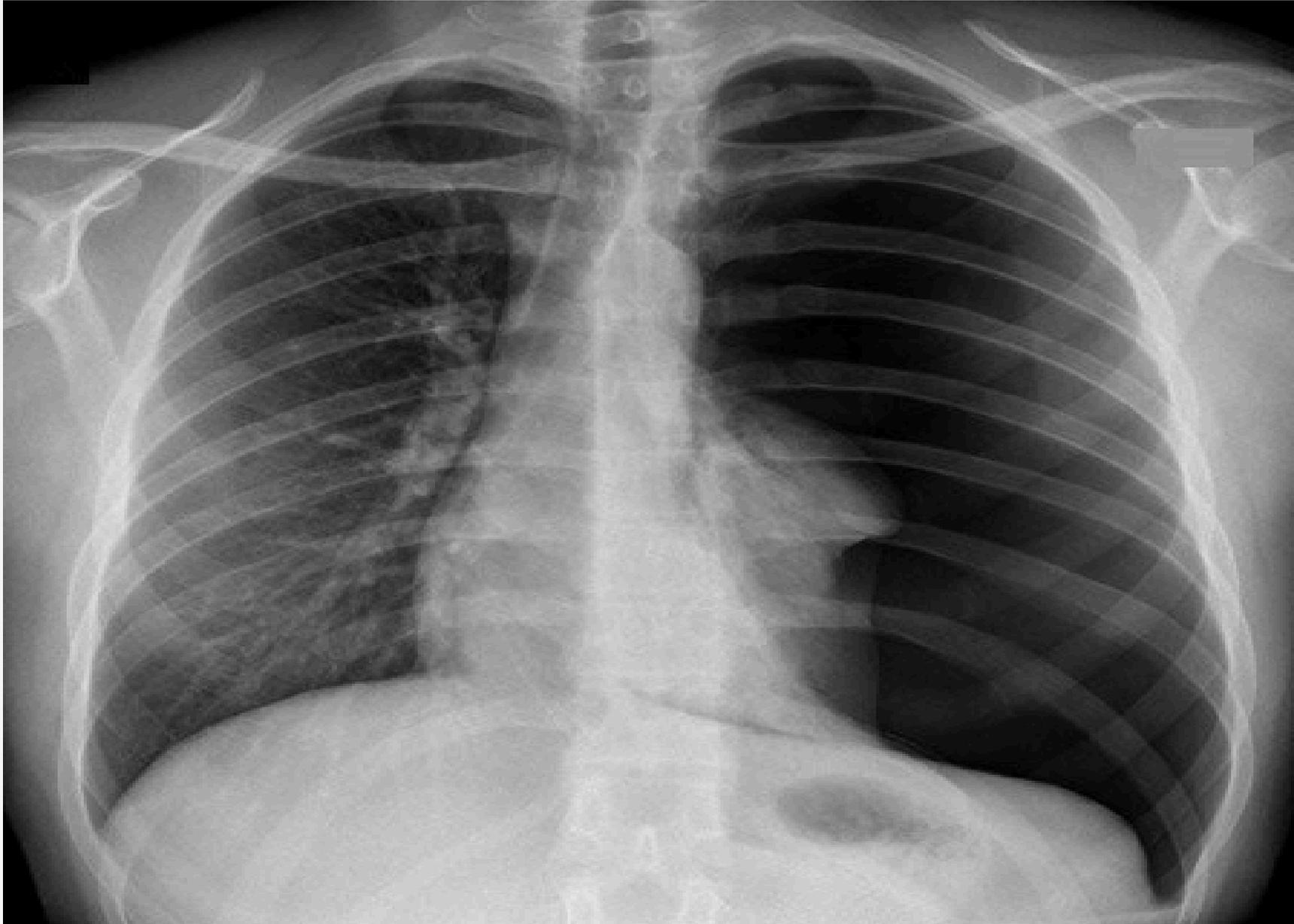


**Right
lower lobe
pneumonia**



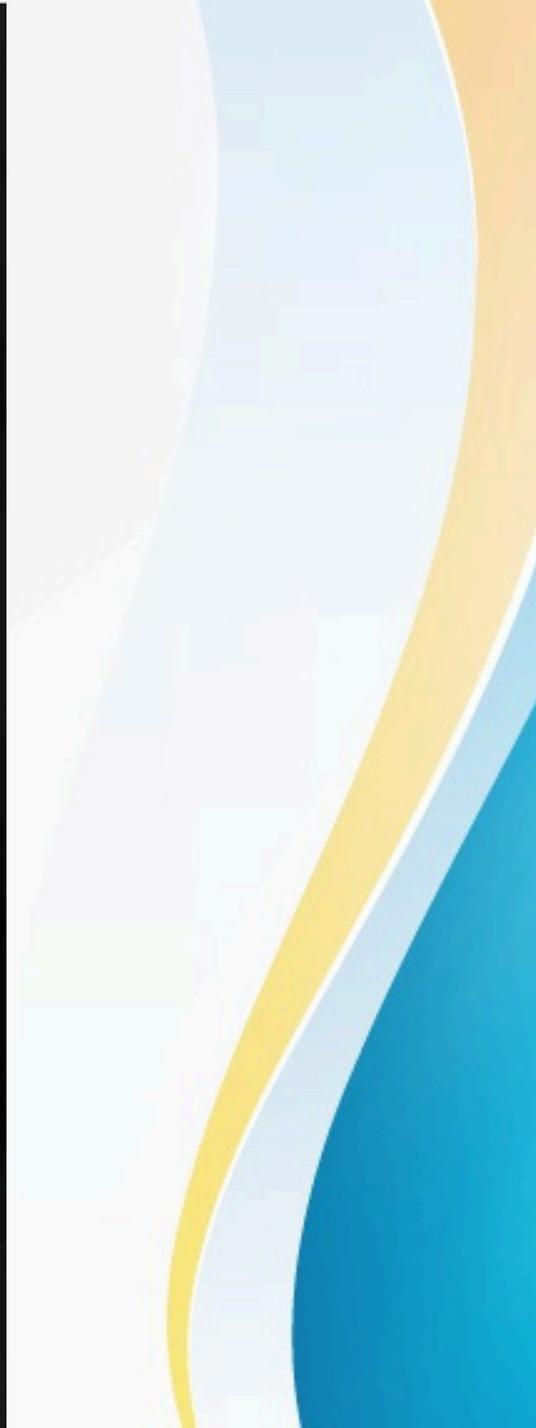
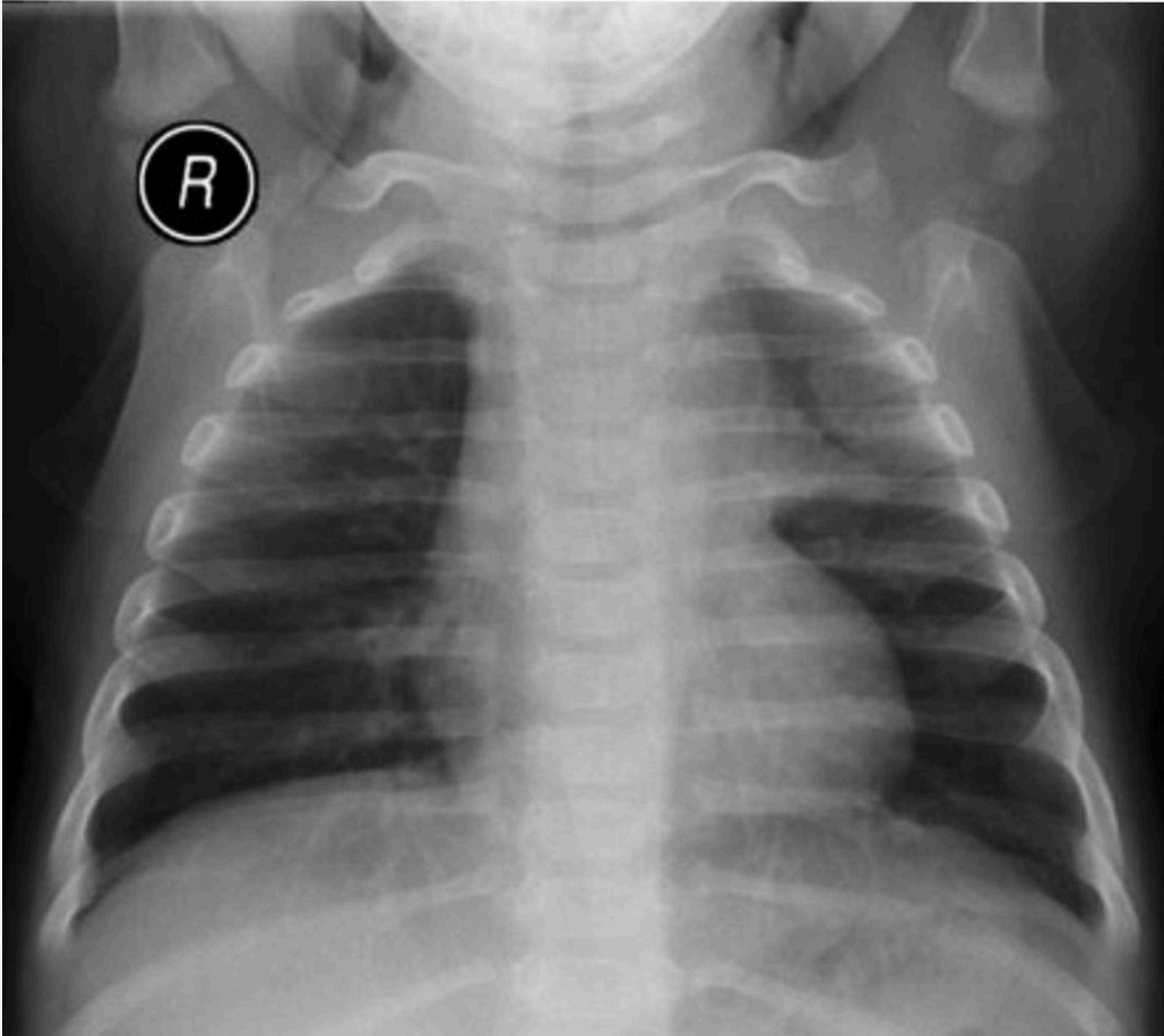
Secondary Tb

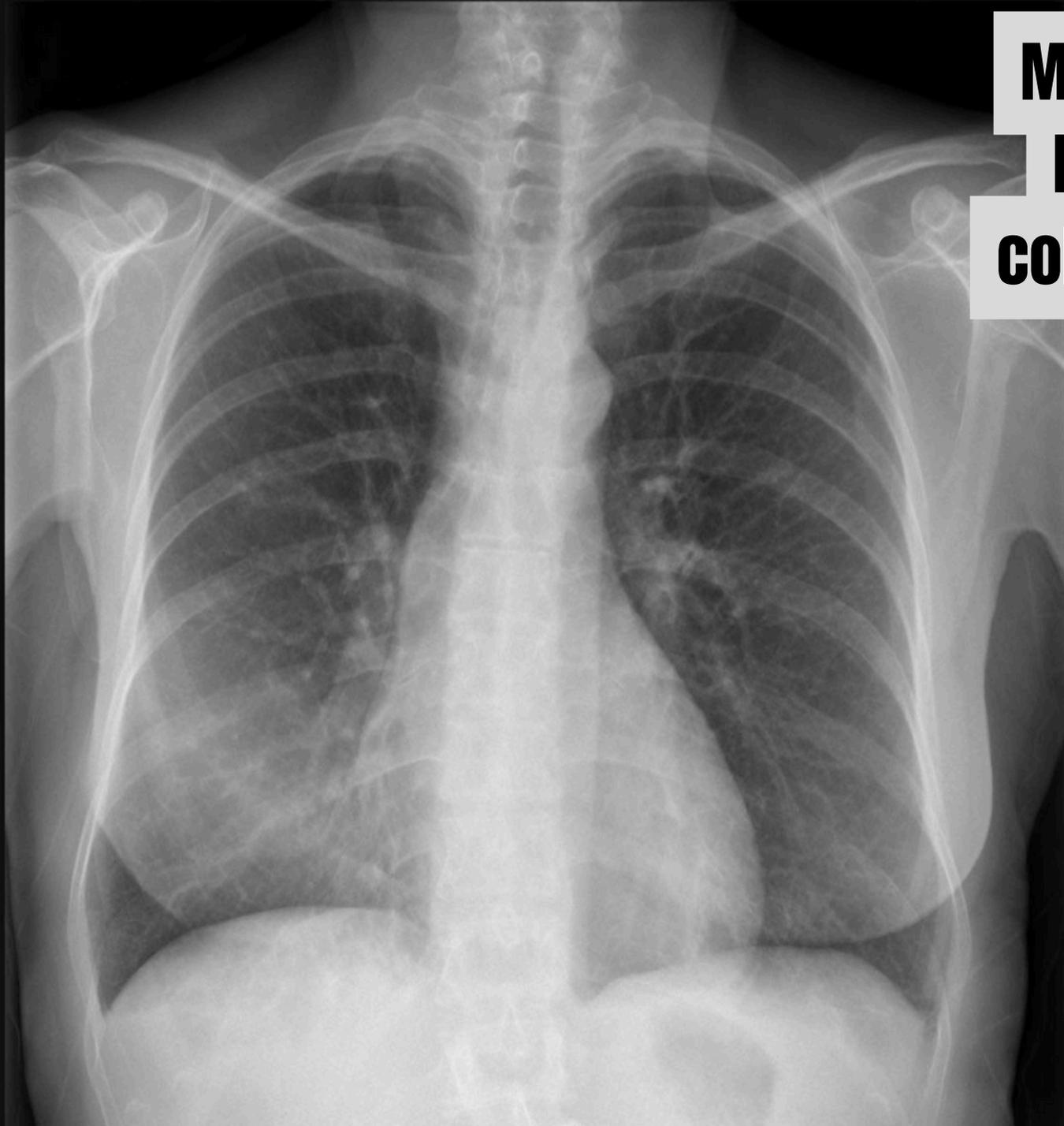




Signs of tension pneumothorax

**Thymus
sail sign in
the left
side**

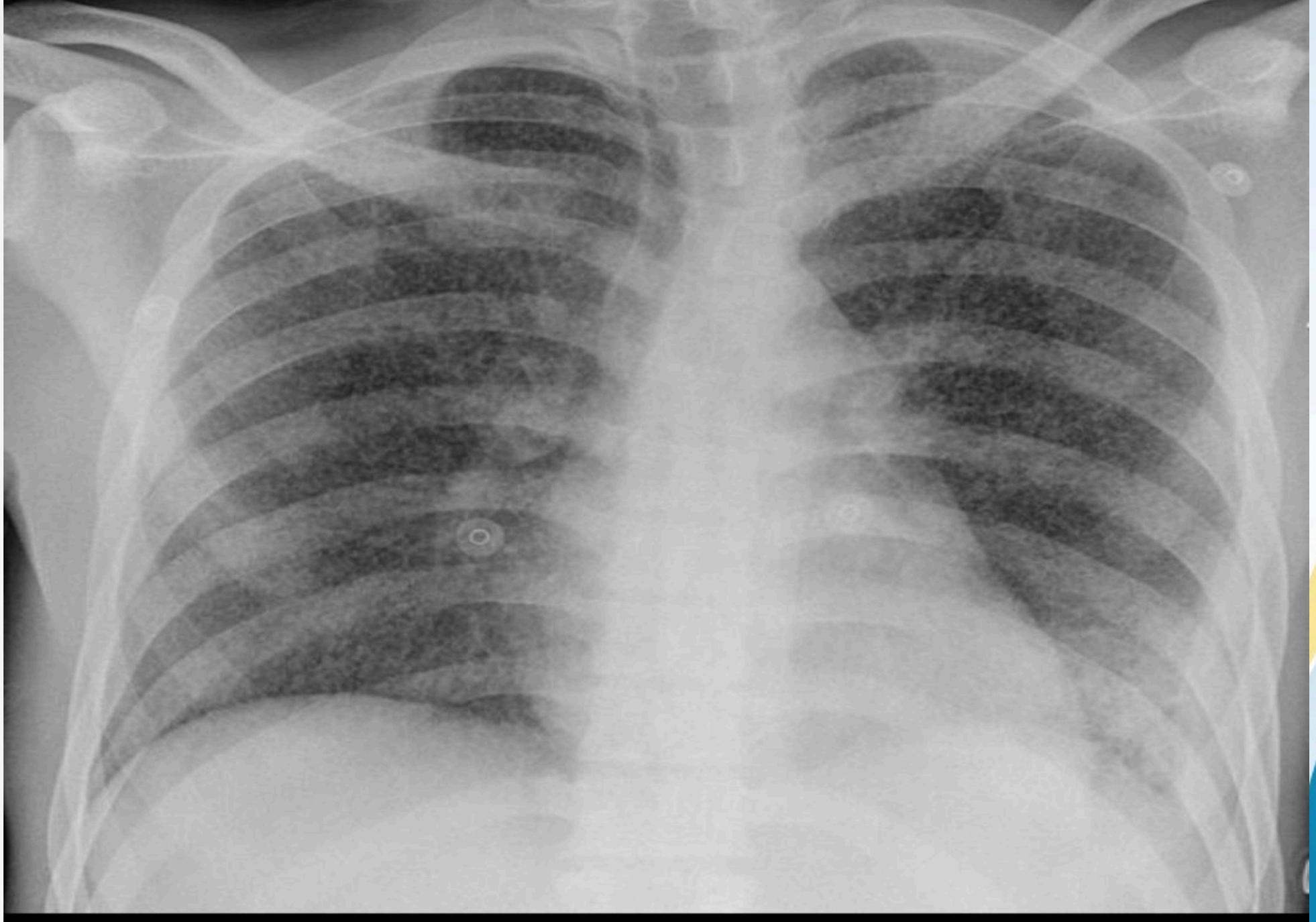




**Middle
lobe
collapse**



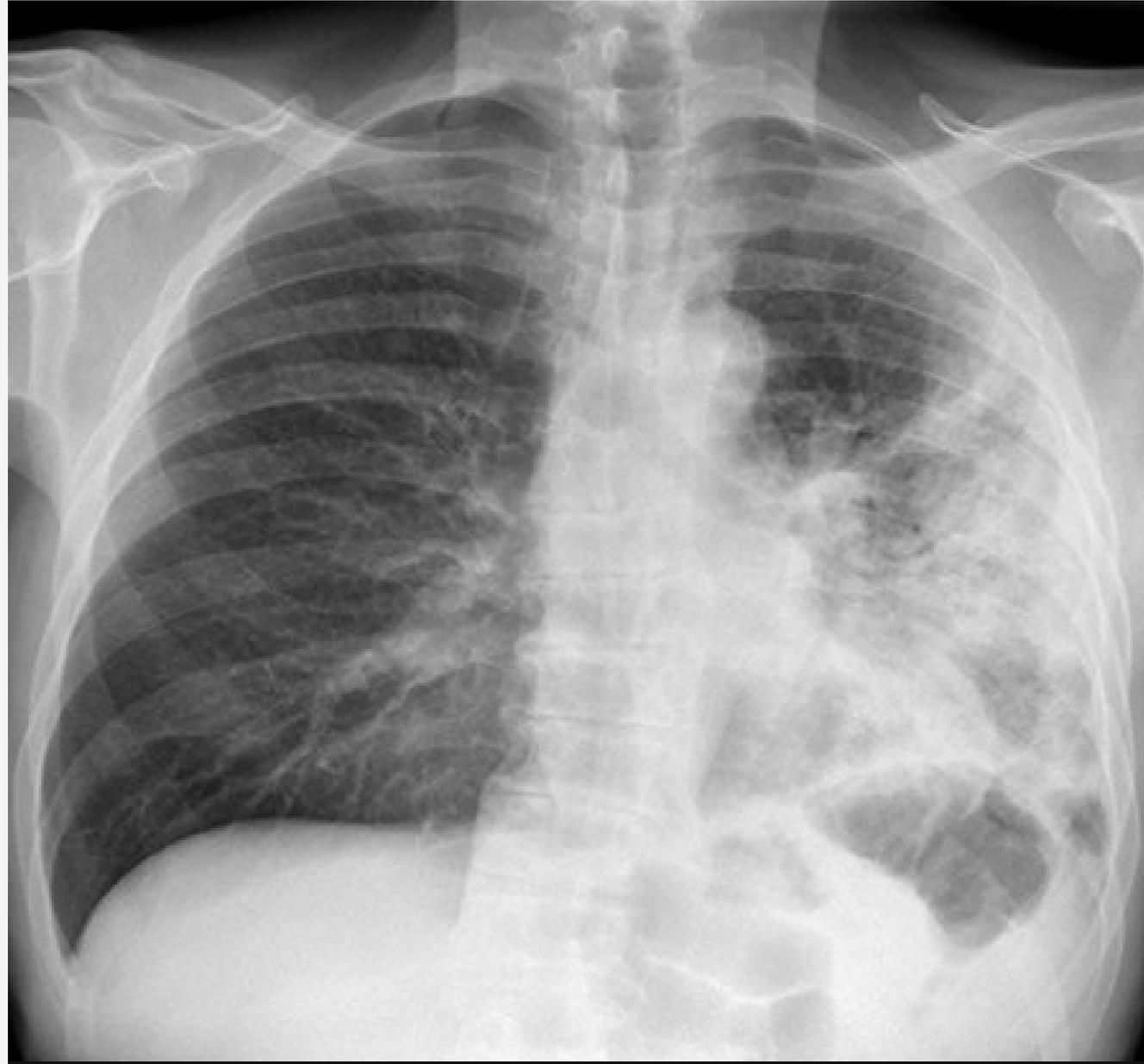
Miliary Tb



**Hiatus hernia
posterior
mediastinum**



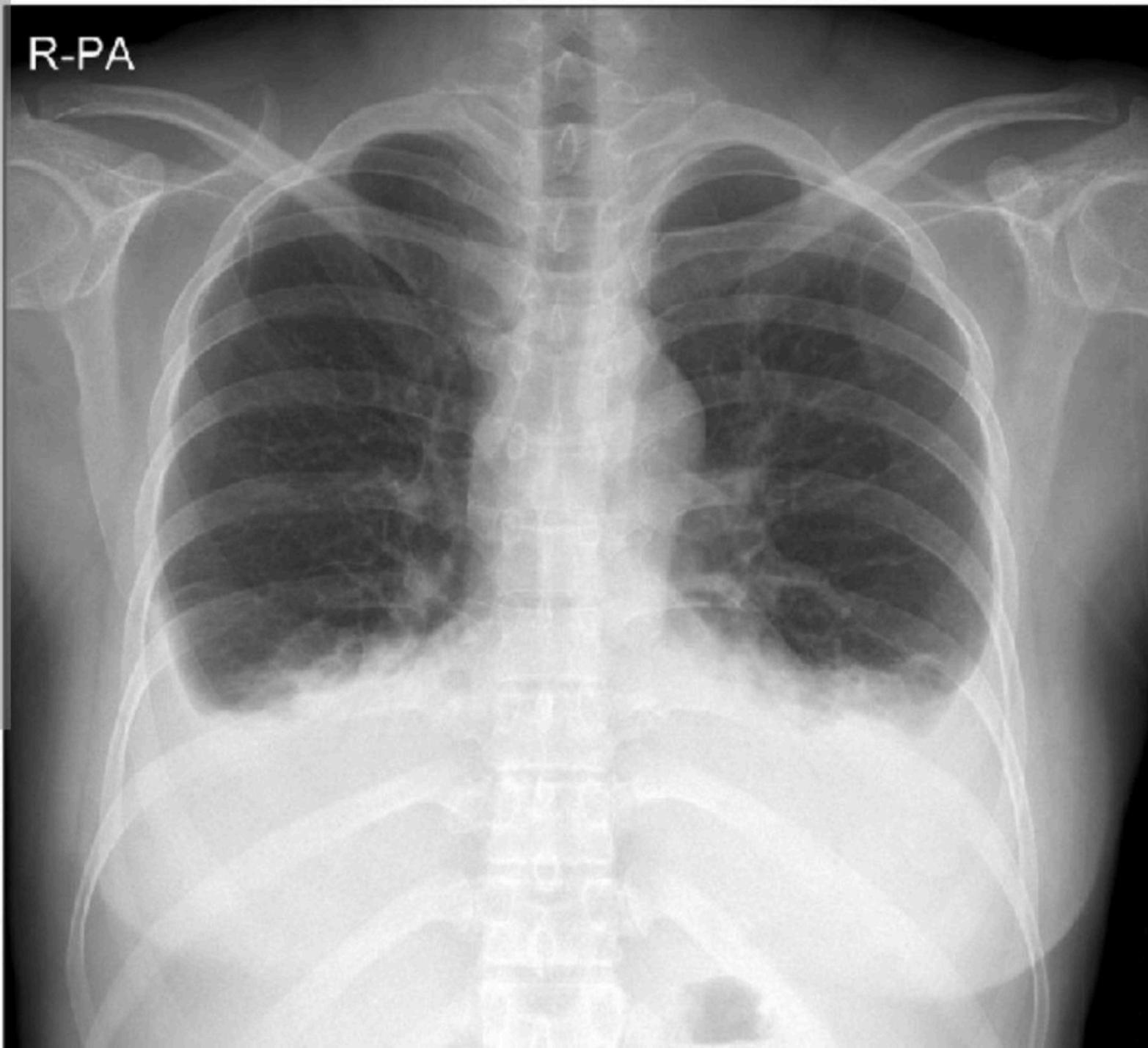
**Consolidation in
the adjacent
lingula of the left
upper lobe**

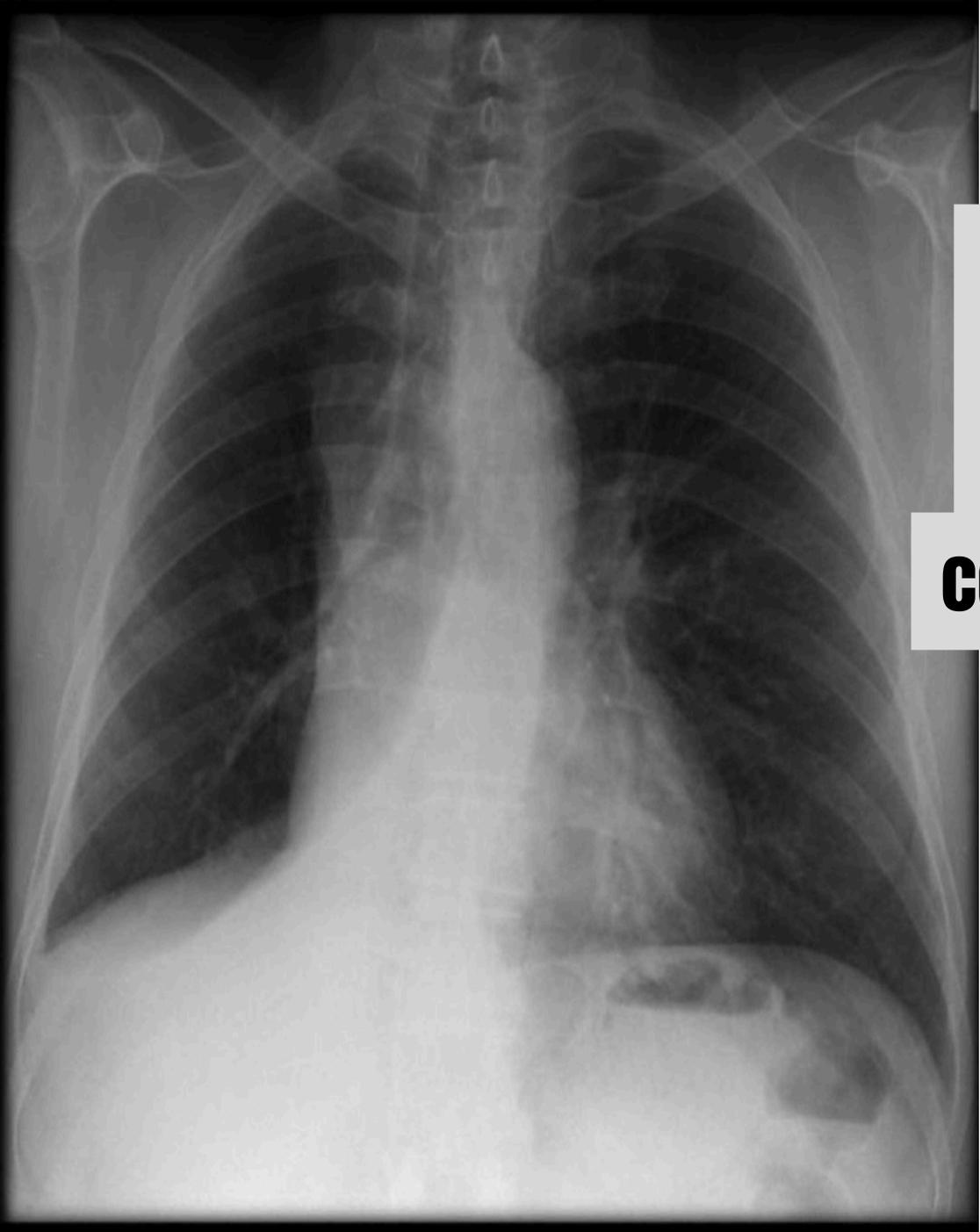


**Fungal ball and
signs of
hyperinflation**



**Bilateral
pleural
effusion**





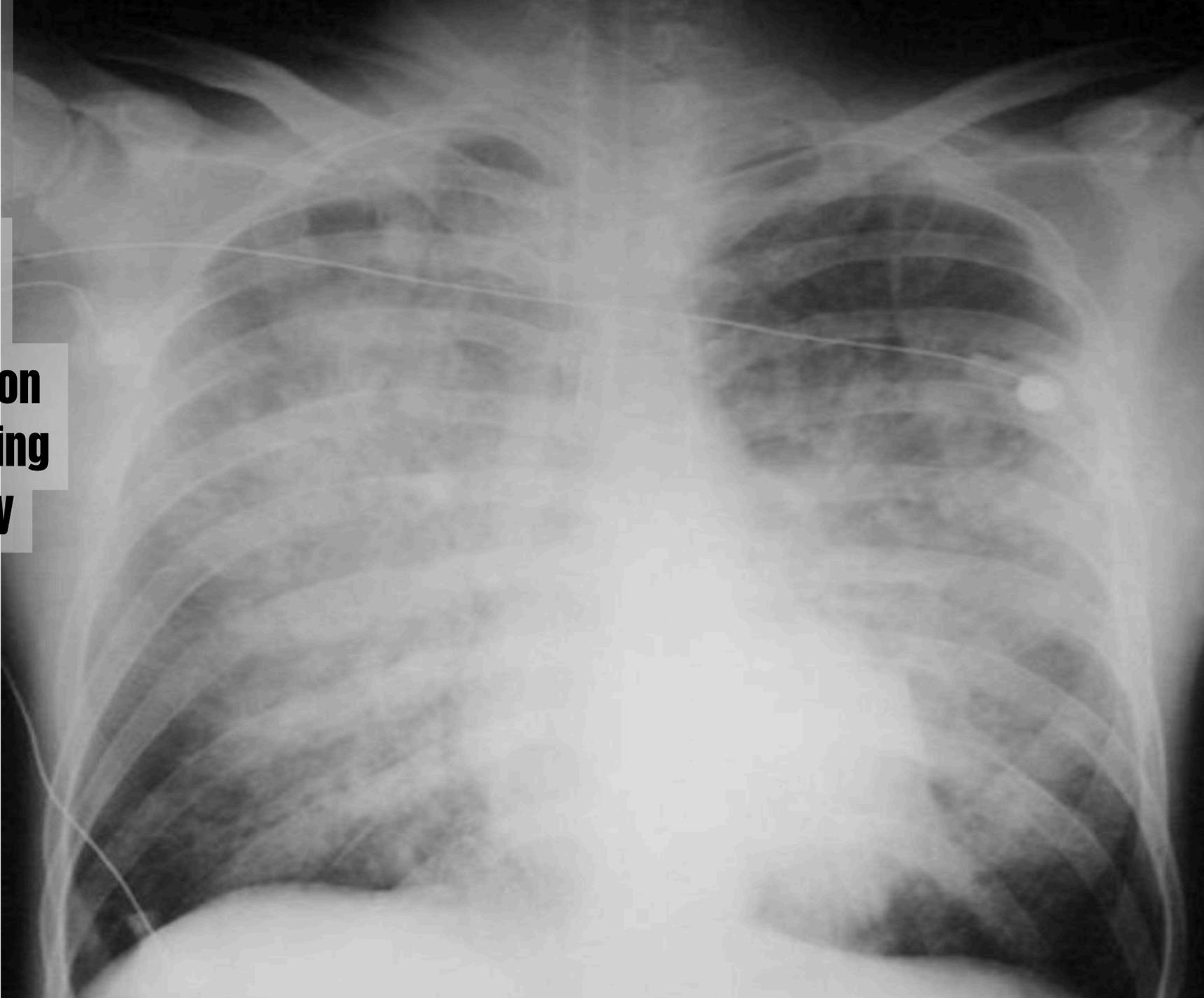
**Right
lower
lobe
collapse**



Garland triad



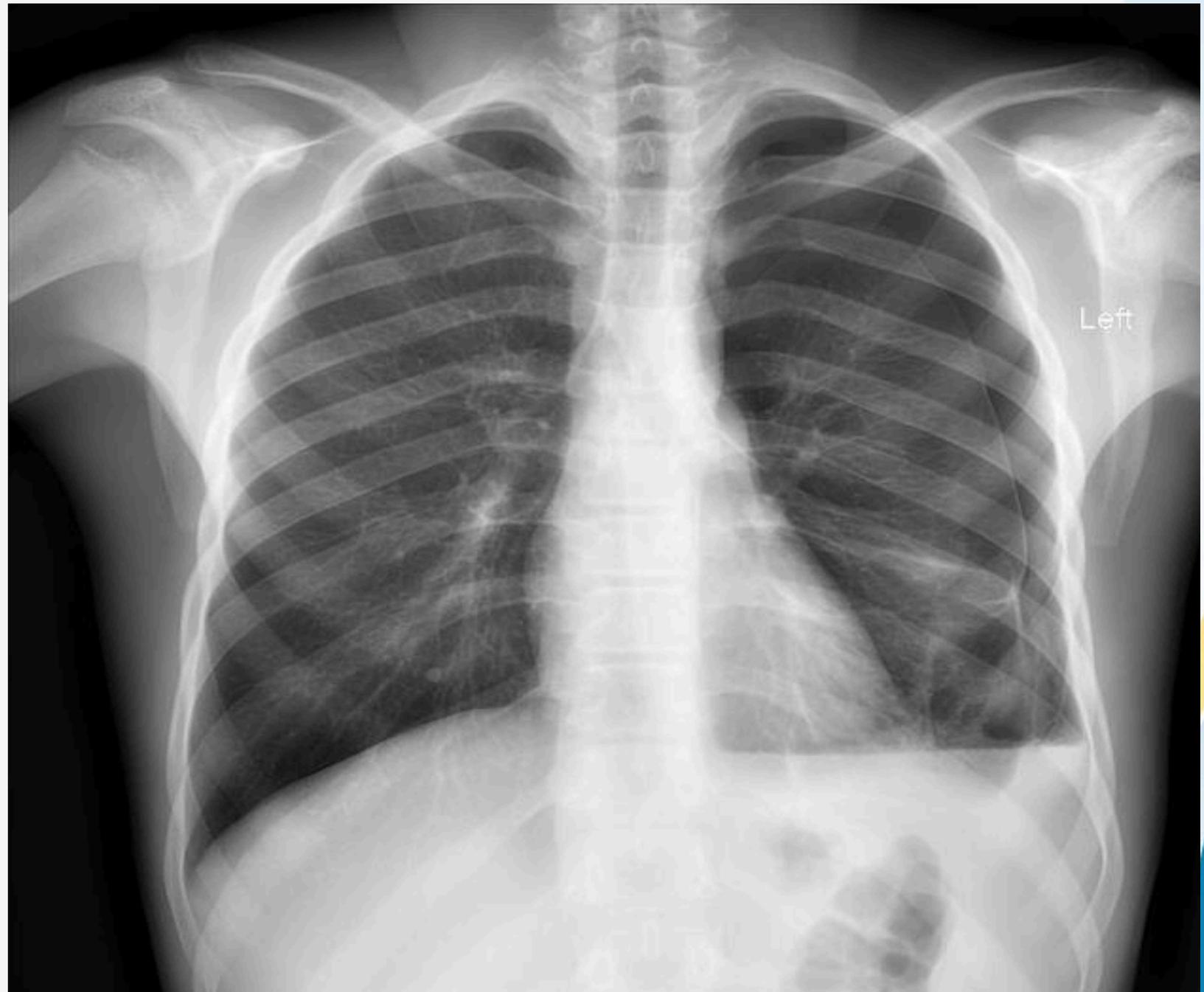
**Bilateral
perihilar
consolidation
in a bat's wing
pulmonary
edema**



Cardiomegaly



**Hyperpneumothorax
(air fluid level)**



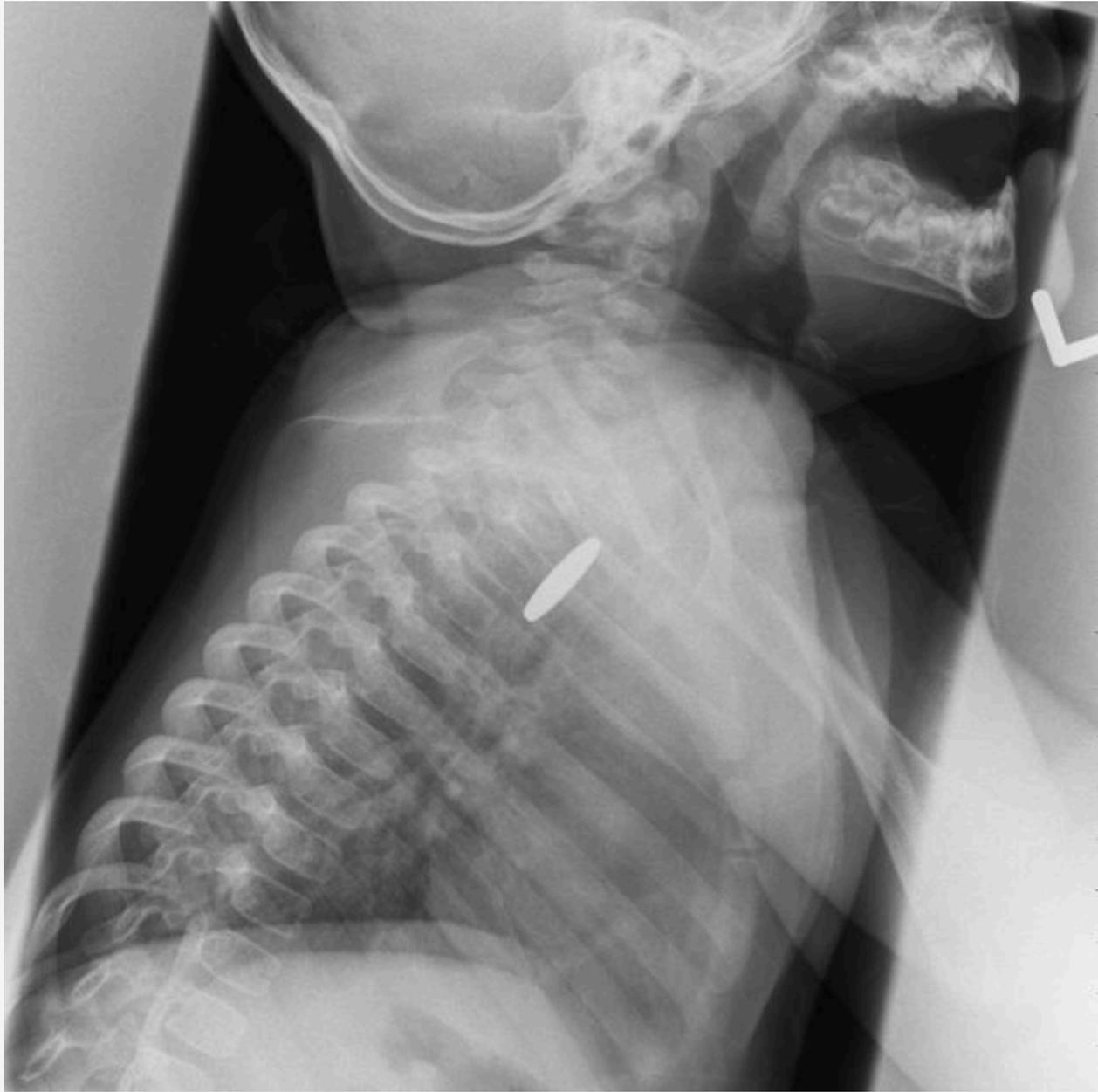
Expiratory

**simple right sided
pneumothorax**

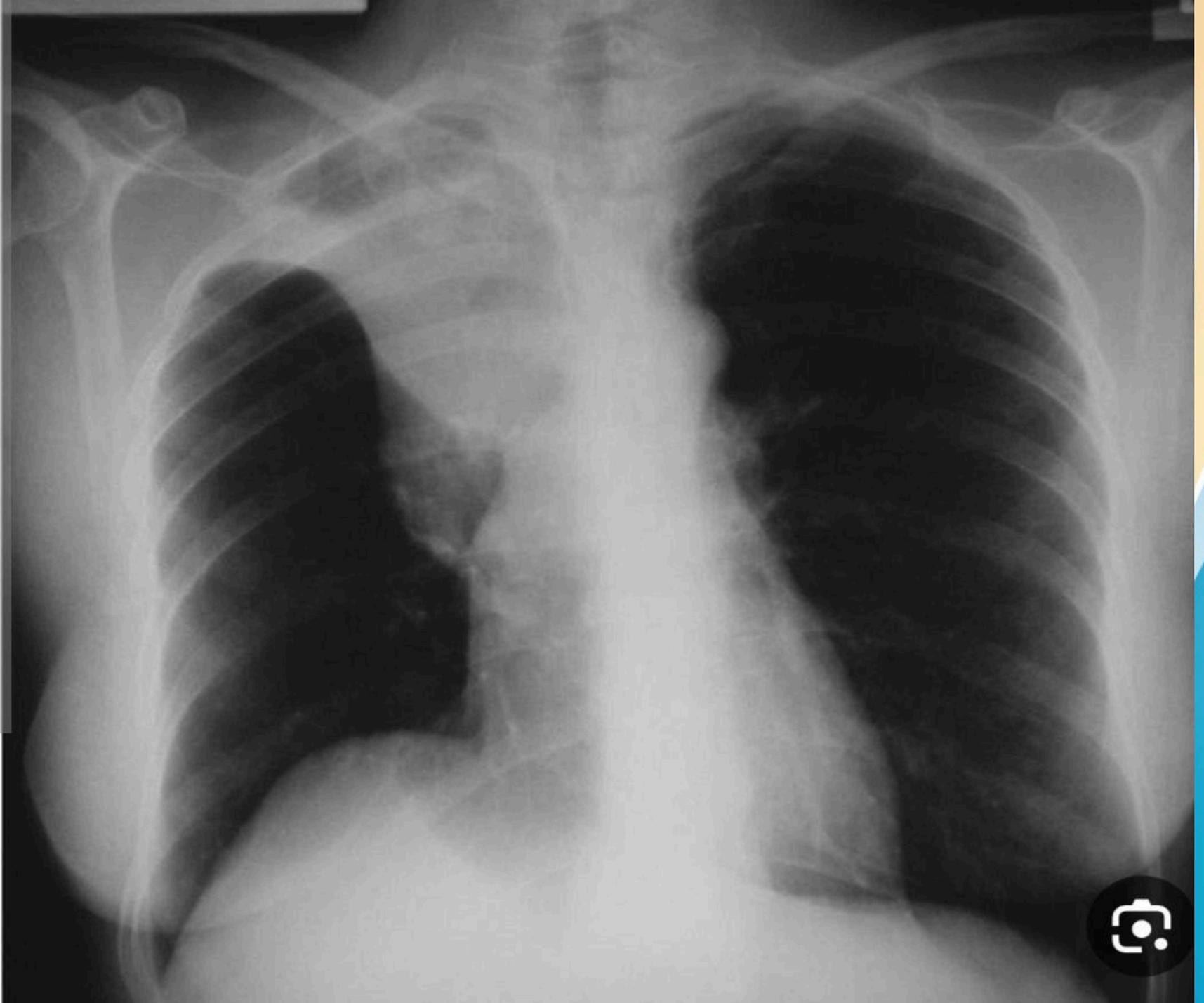


**Coin in esophagus
confirmed in next slide to
be in esophagus**





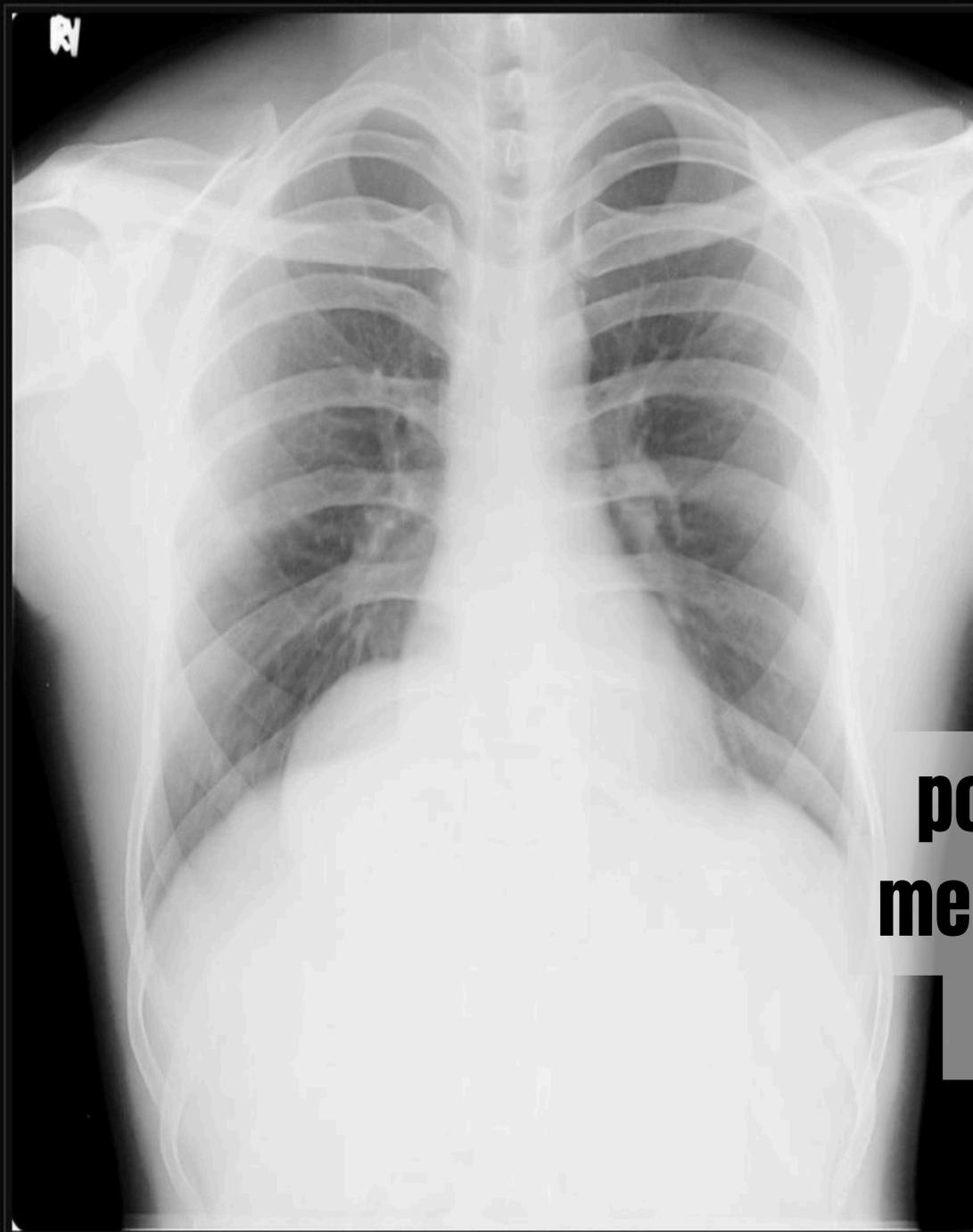
**Right upper lobe
collapse**





**Mass in the
middle
mediastinal**





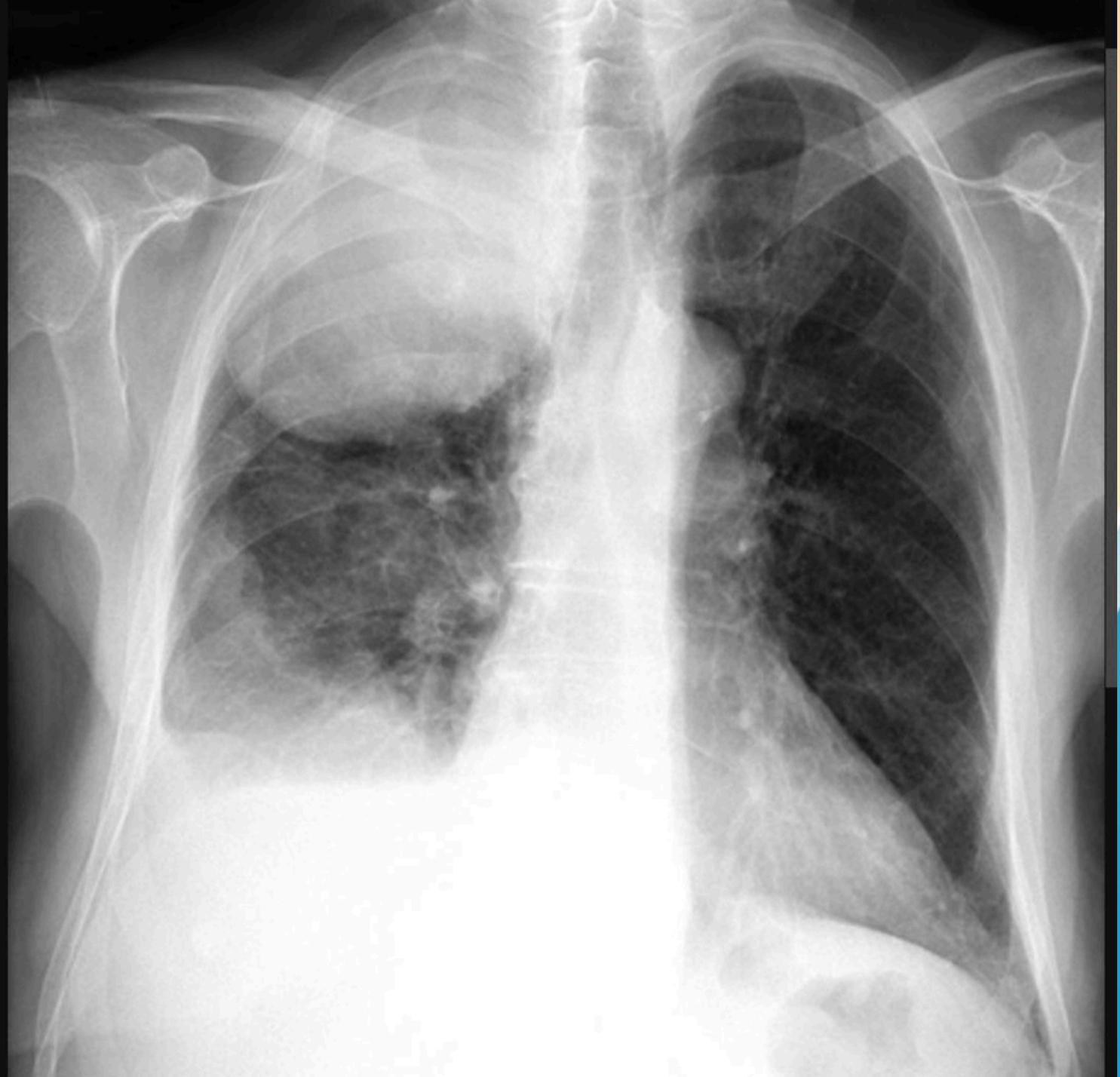
**posterior
mediastinal
mass**



**Healed tuberculosis
Ranke complex**



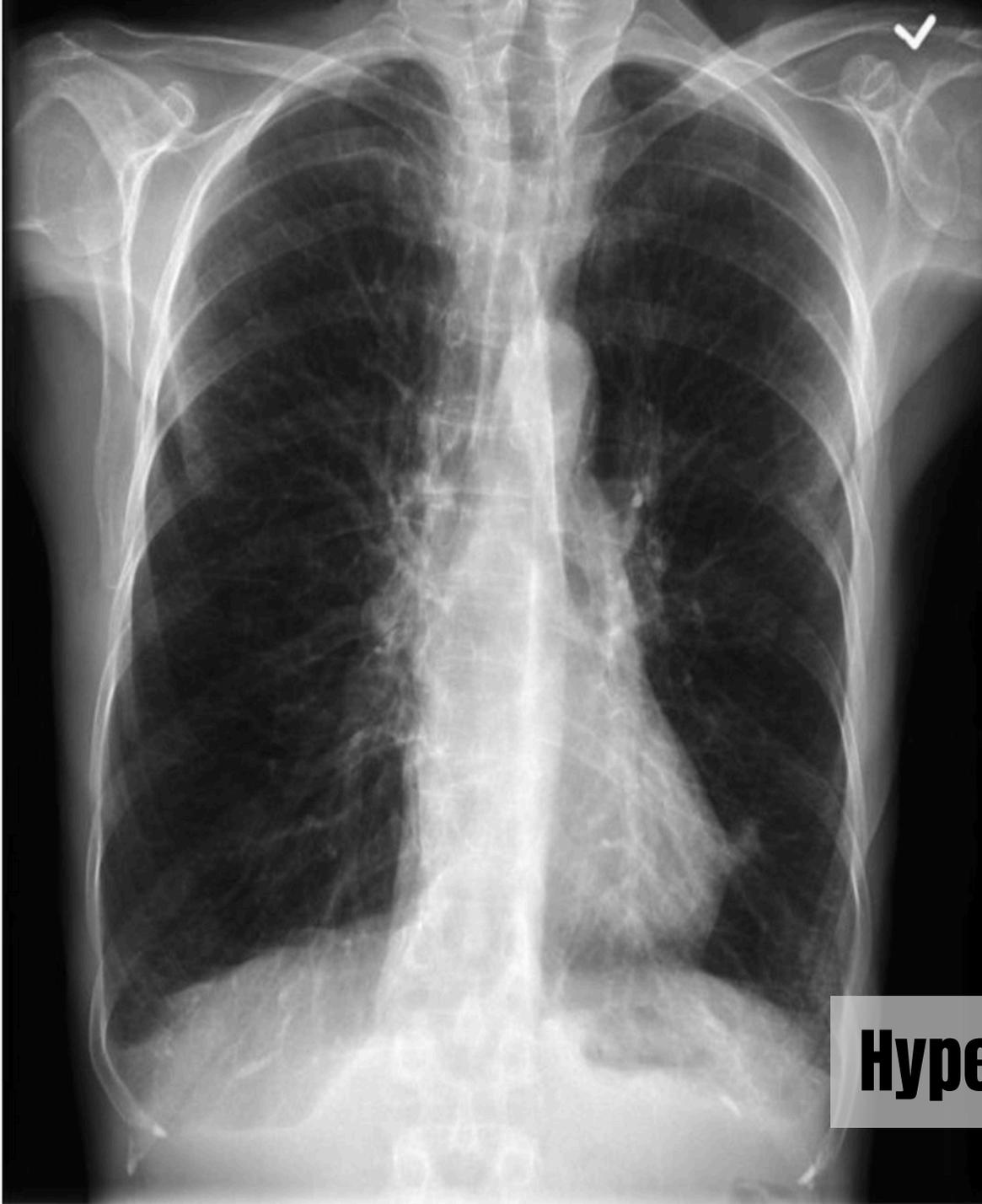
**Evidence of round opacity
seen in the upper zone of
right lung with loss of lung
volume and right sided
pleural effusion**



Expiratory

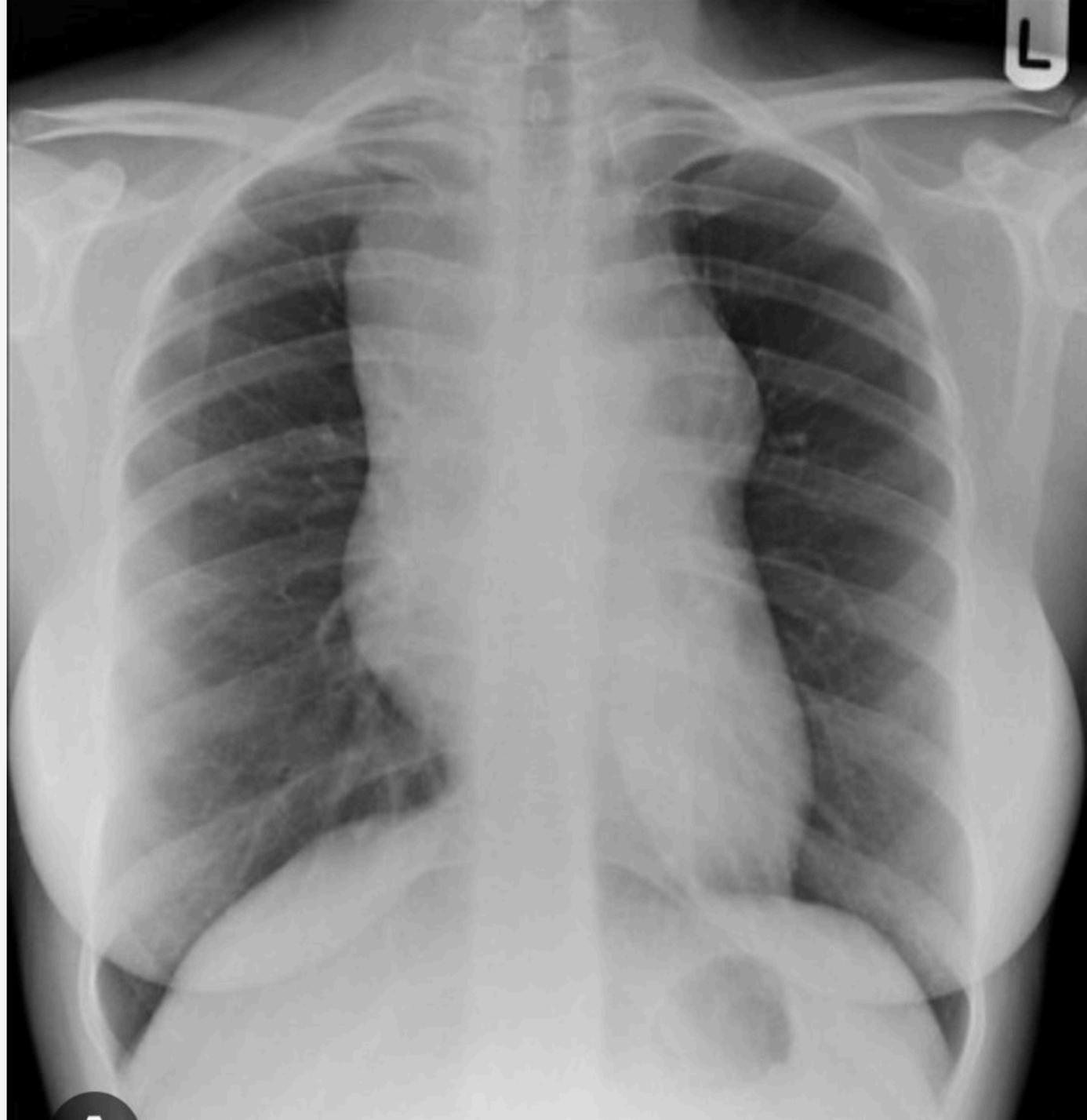
**left tension
pneumothorax with
collapsed lung and
shifted mediastinum
to the right , low
diaphragm position**



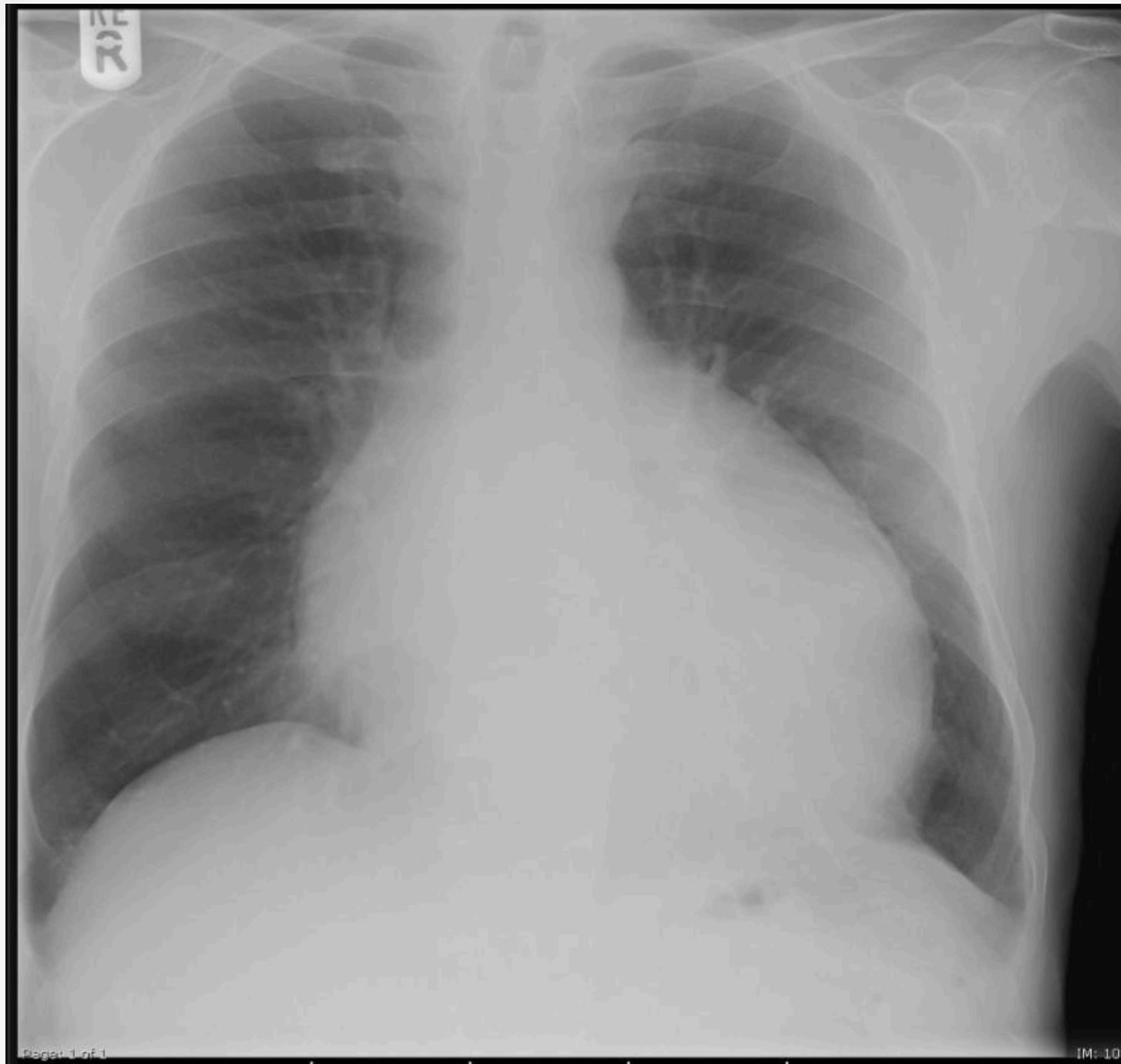


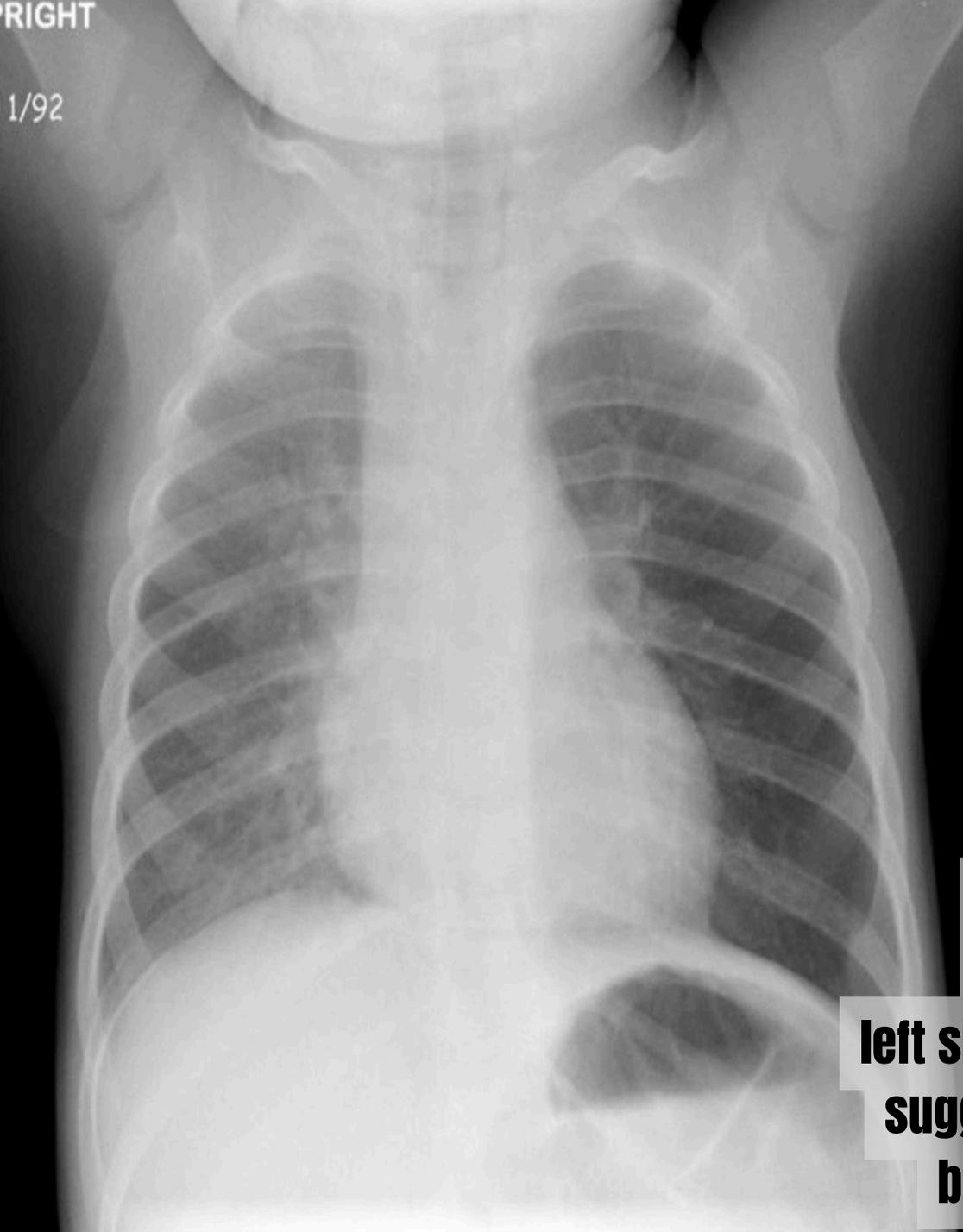
Hyperinflation

**Anterior
mediastinum
lesion**



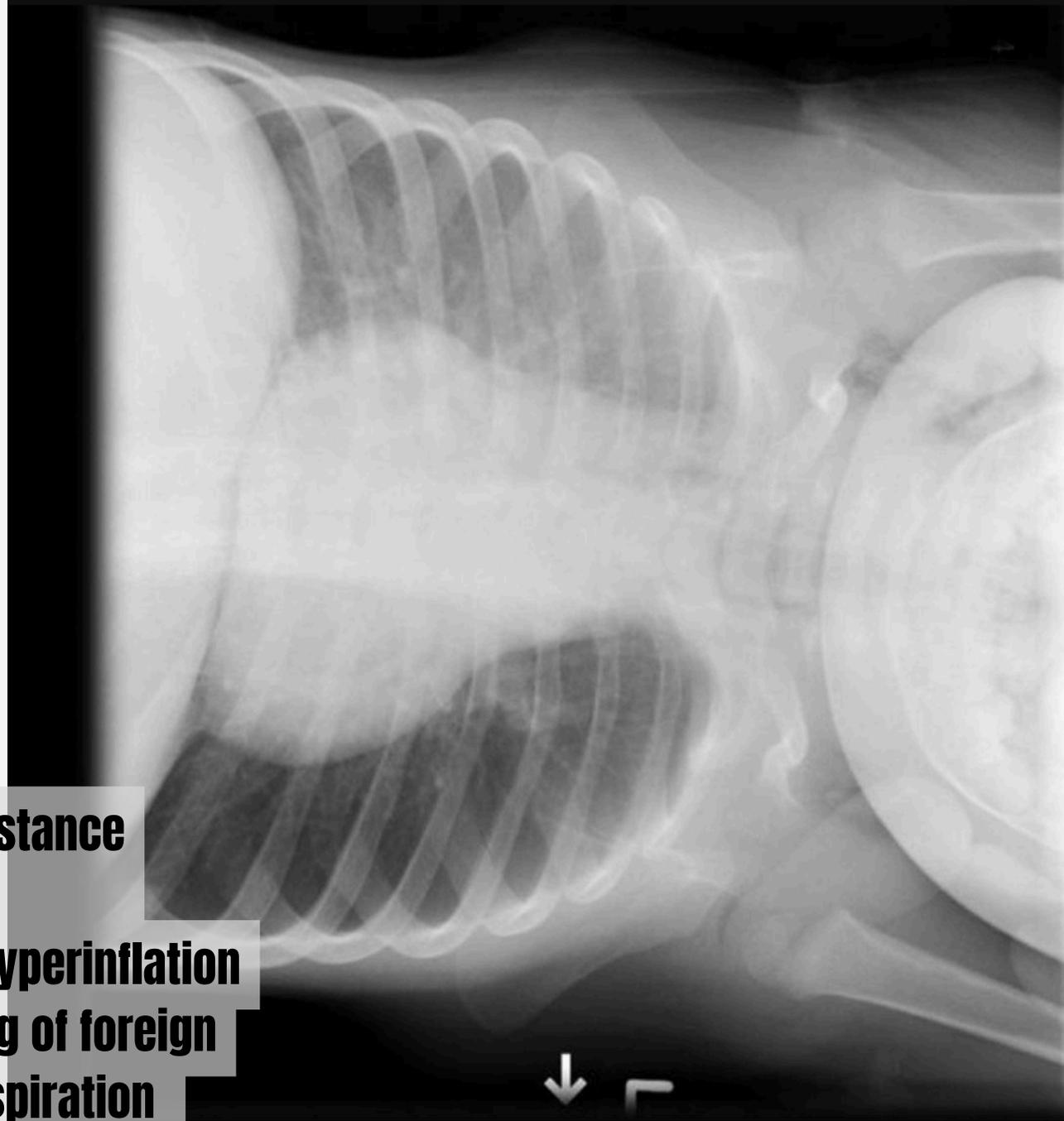
pericardial effusions

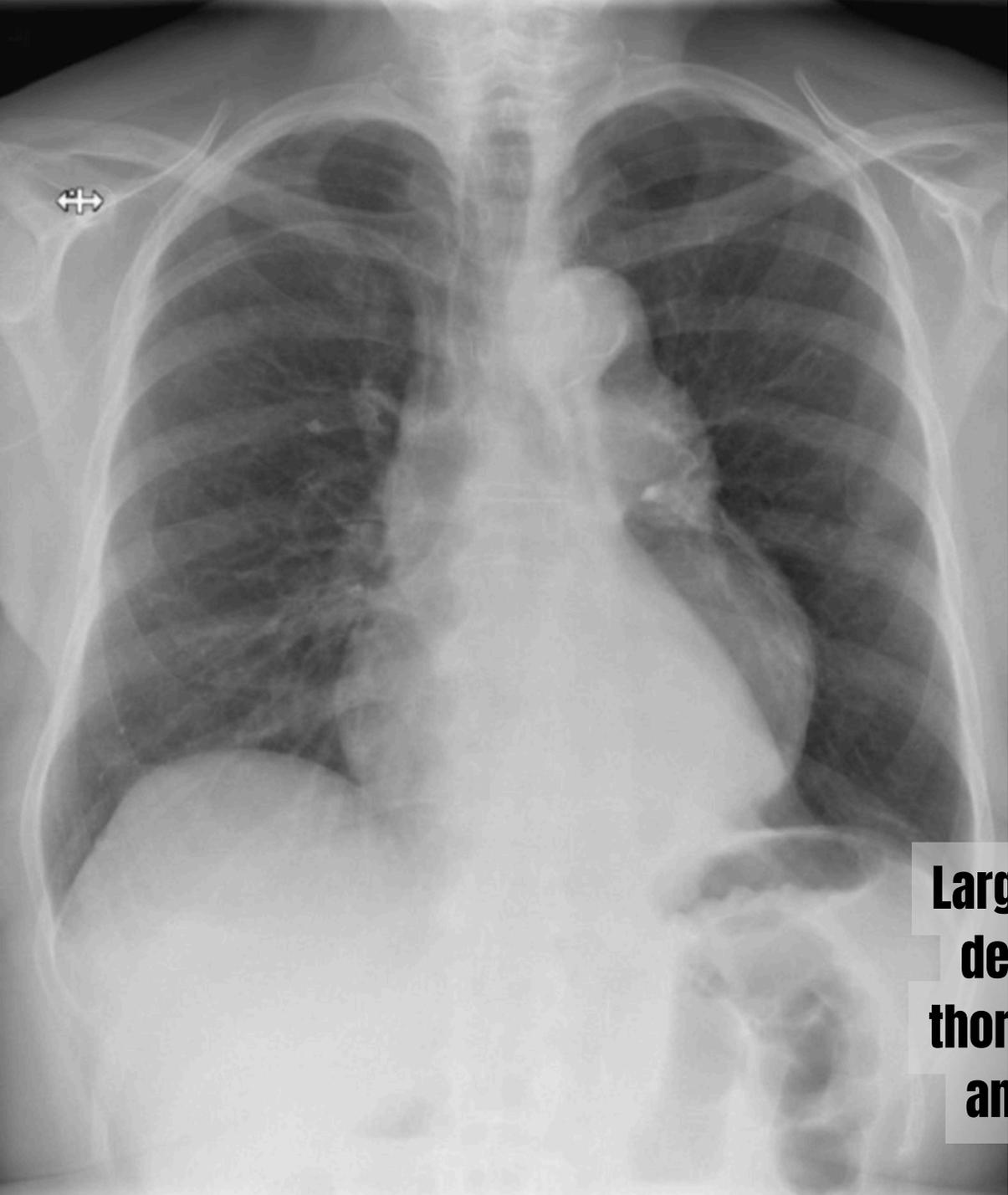




persistence

**left sided hyperinflation
suggesting of foreign
body aspiration**

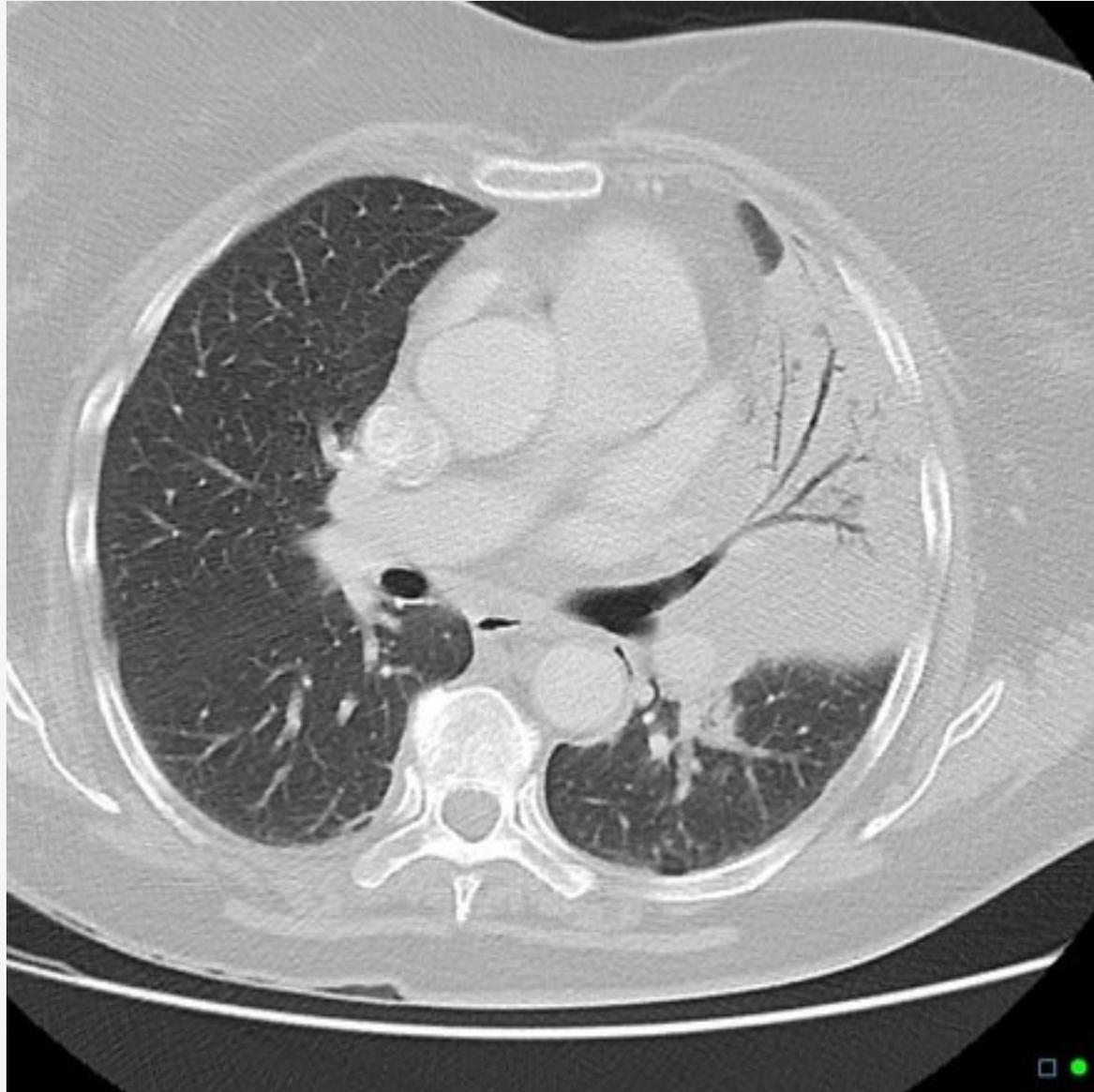




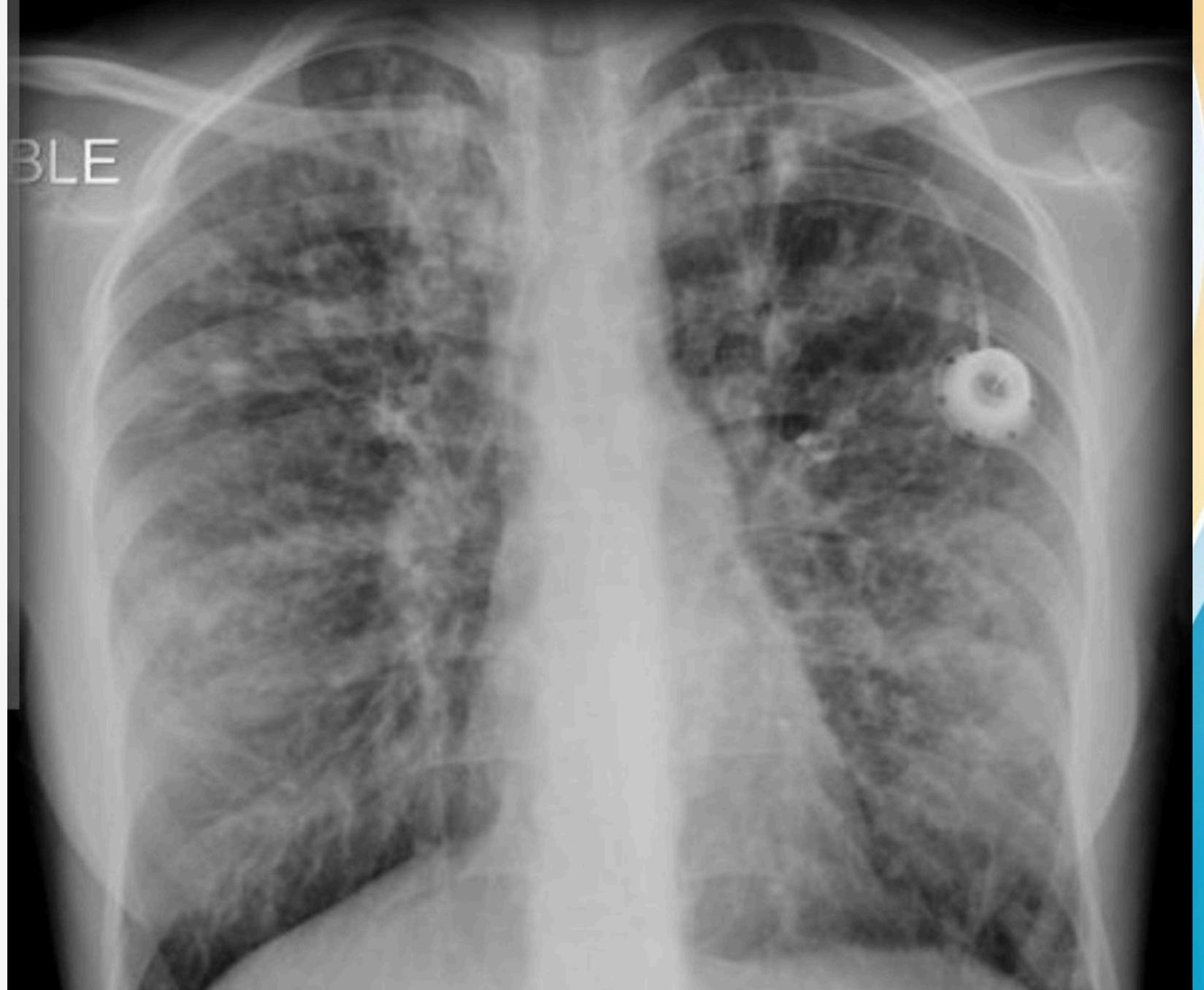
**Large fusiform
descending
thoracic aortic
aneurysm**



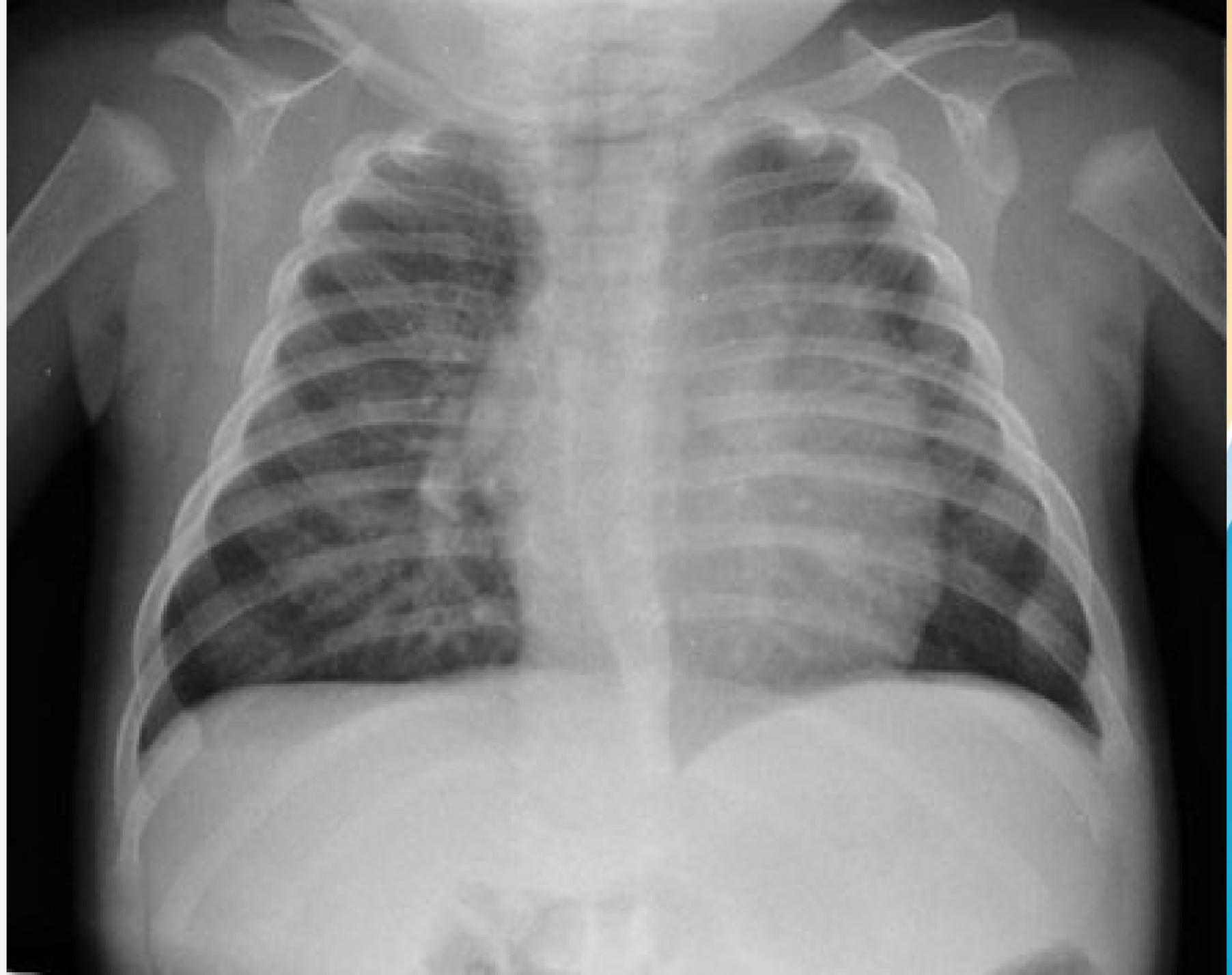
**High resolution
CT San
pneumonia**



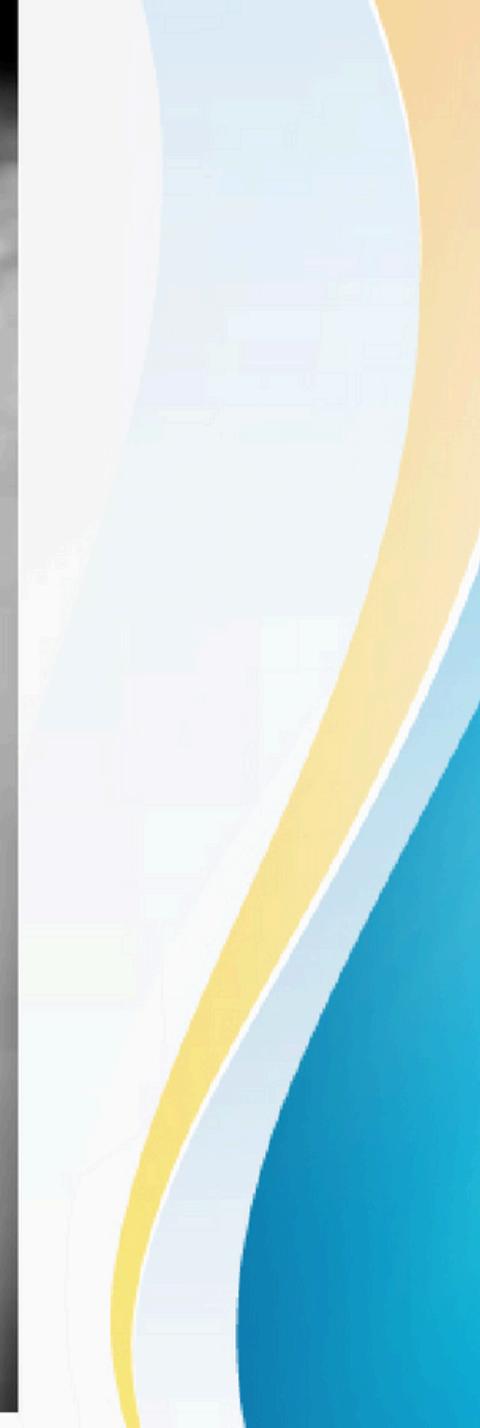
Cystic fibrosis



A normal thymus



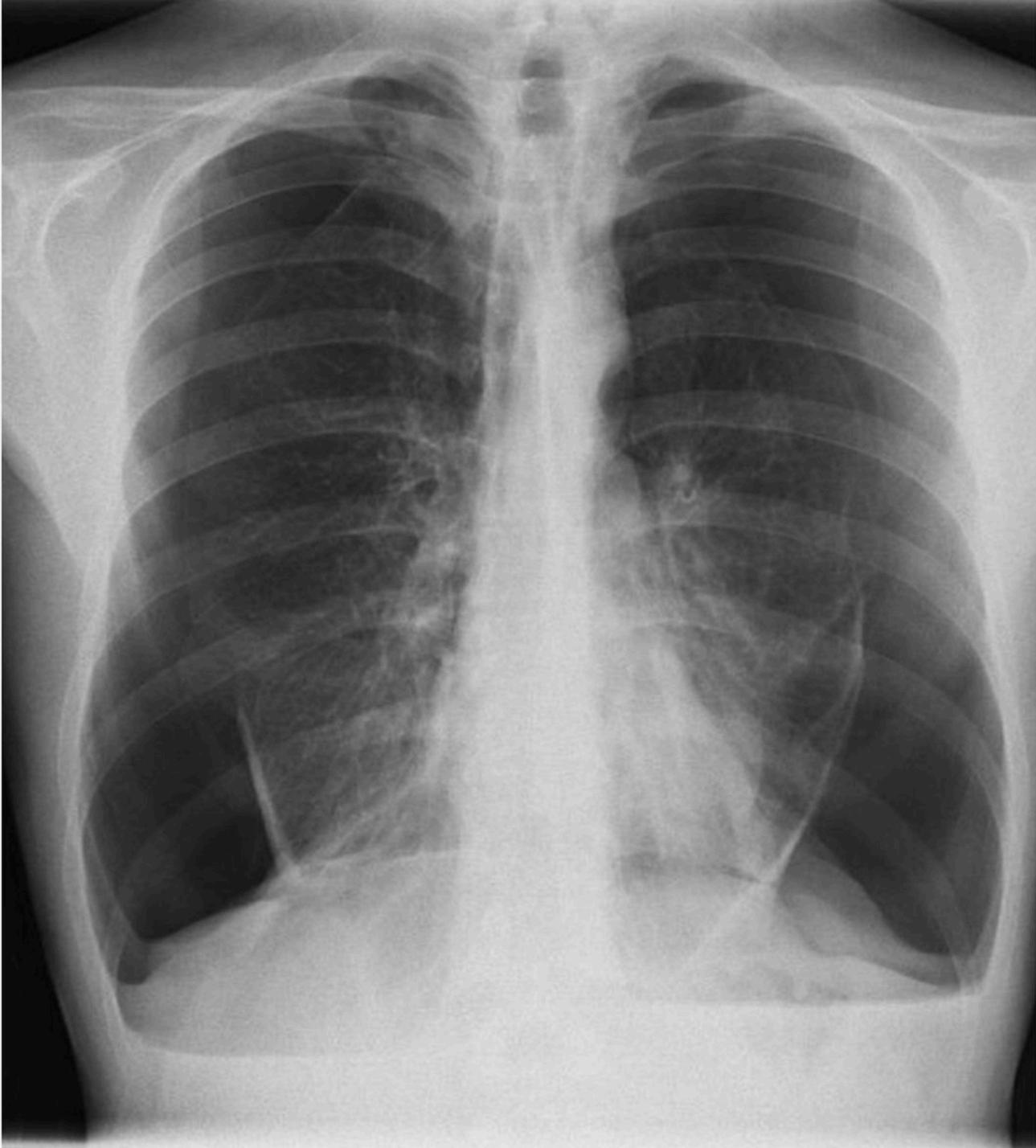
Cannonballs mets

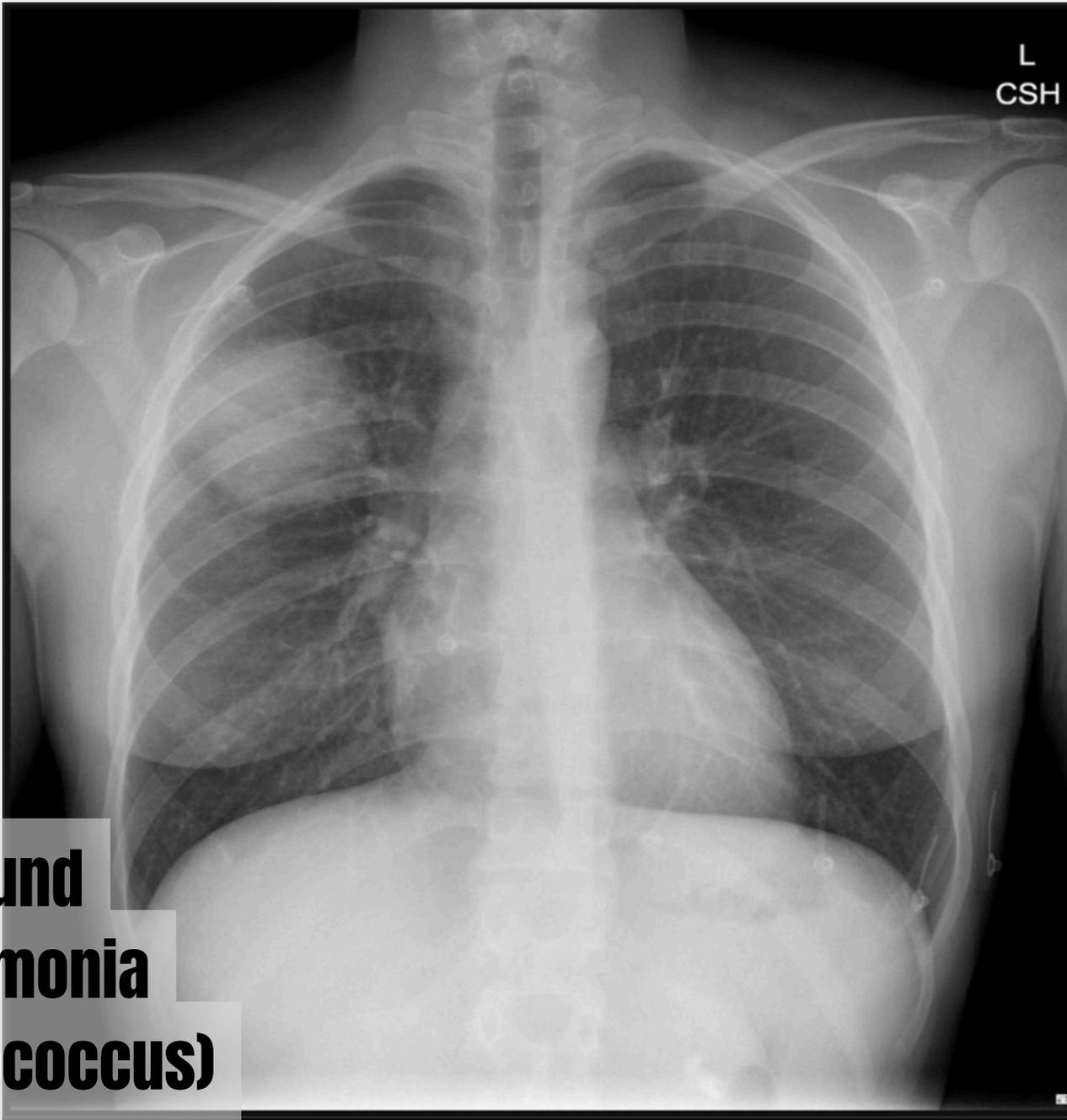


**morgagni
diaphragmatic
hernia**



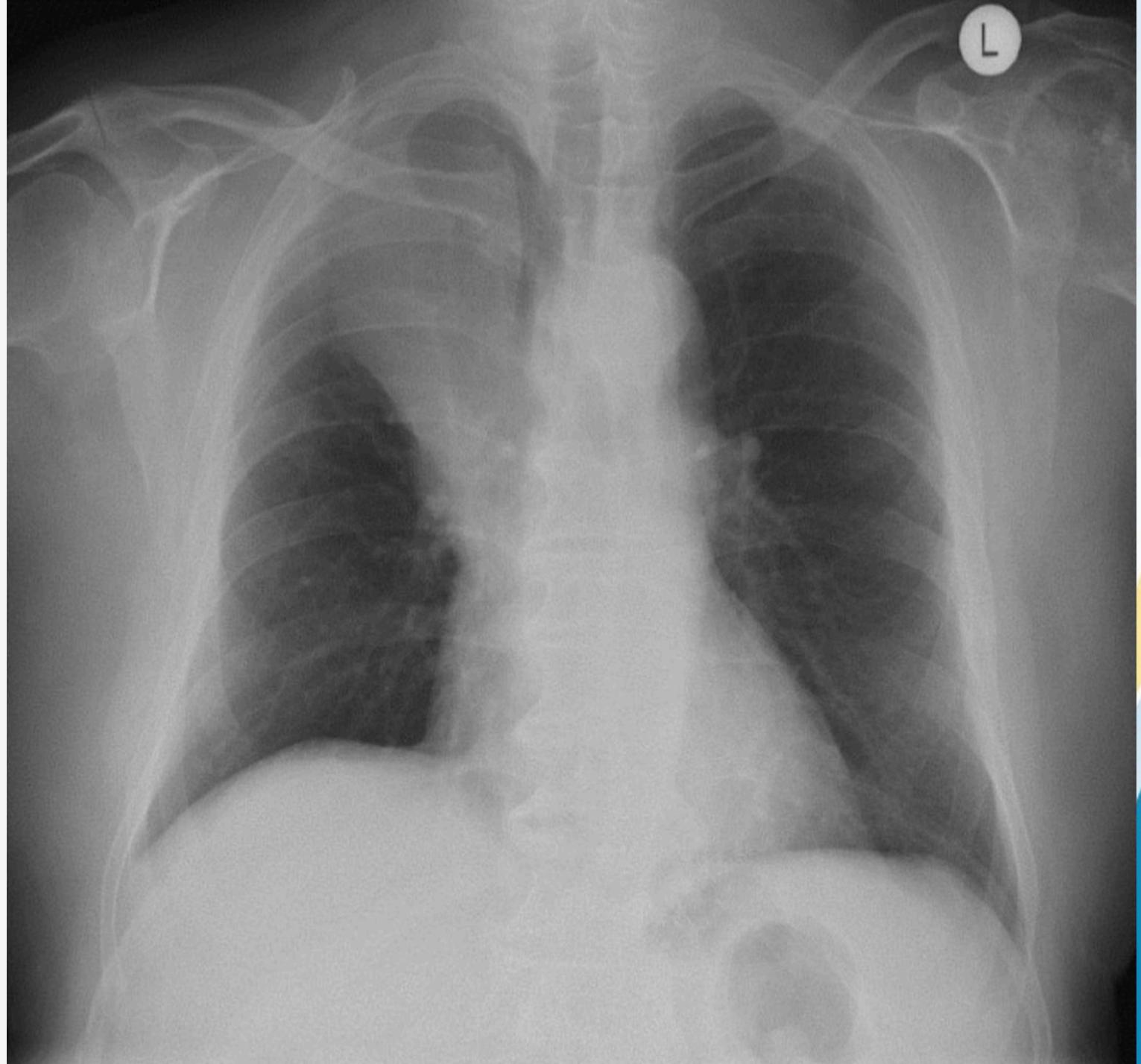
**Bilateral
pneumothorax**





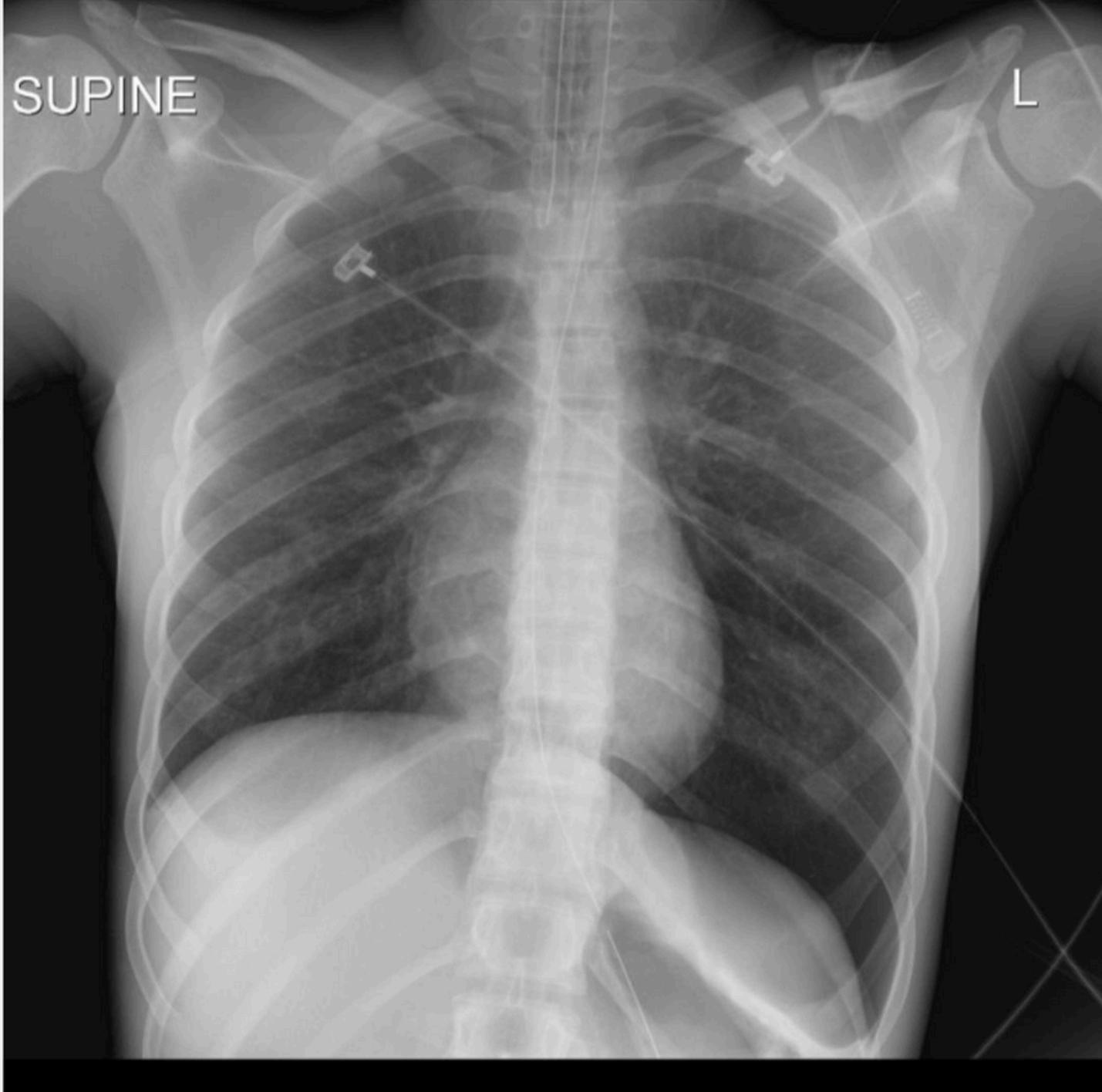
**Round
pneumonia
(streptococcus)**

**Right upper
lobe collapse**



**Lucent left
diaphragm and
left deep sulcus
sign**

Pneumothorax



Underexposure

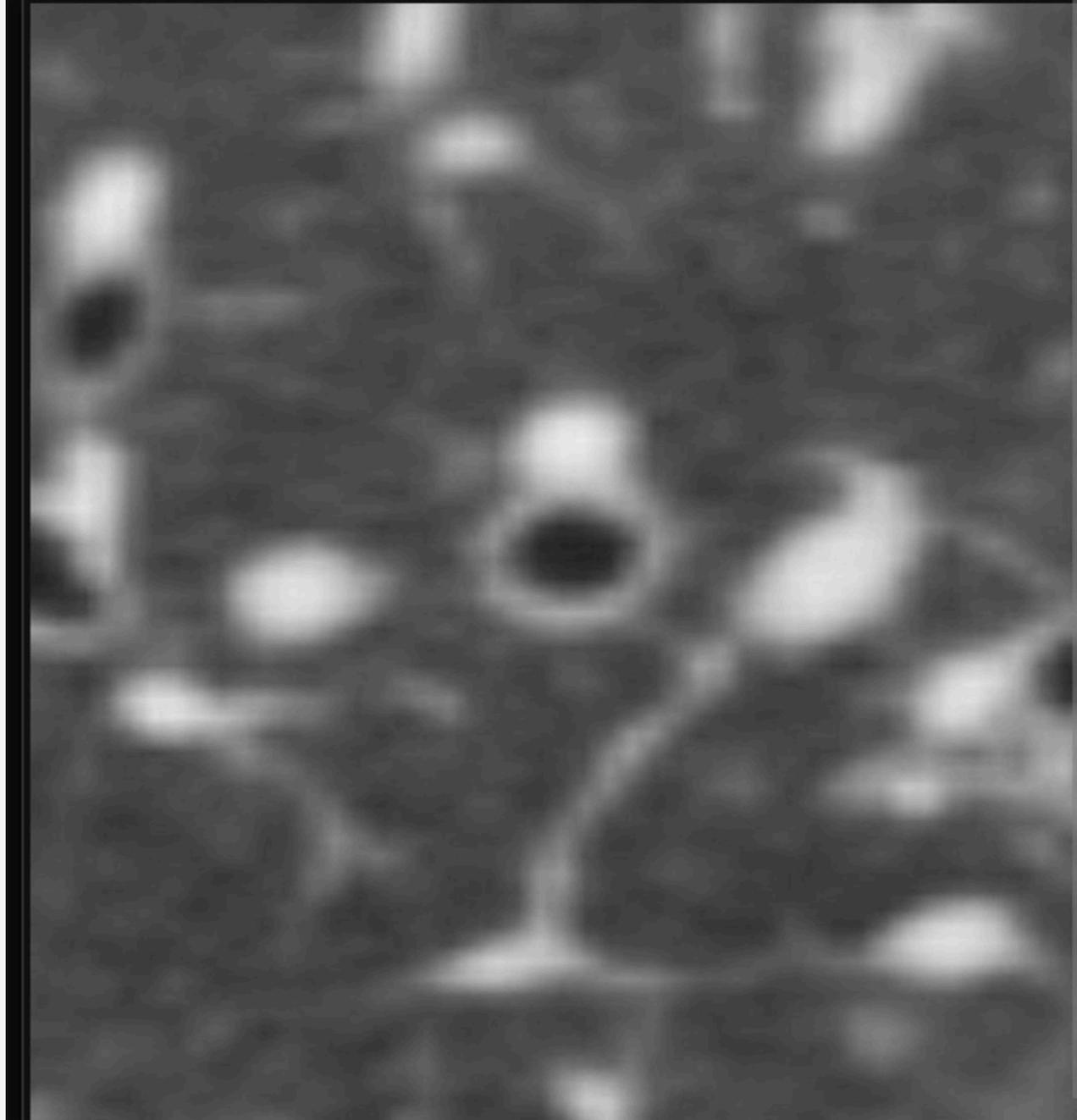


**sarcoidosis
stage 2**

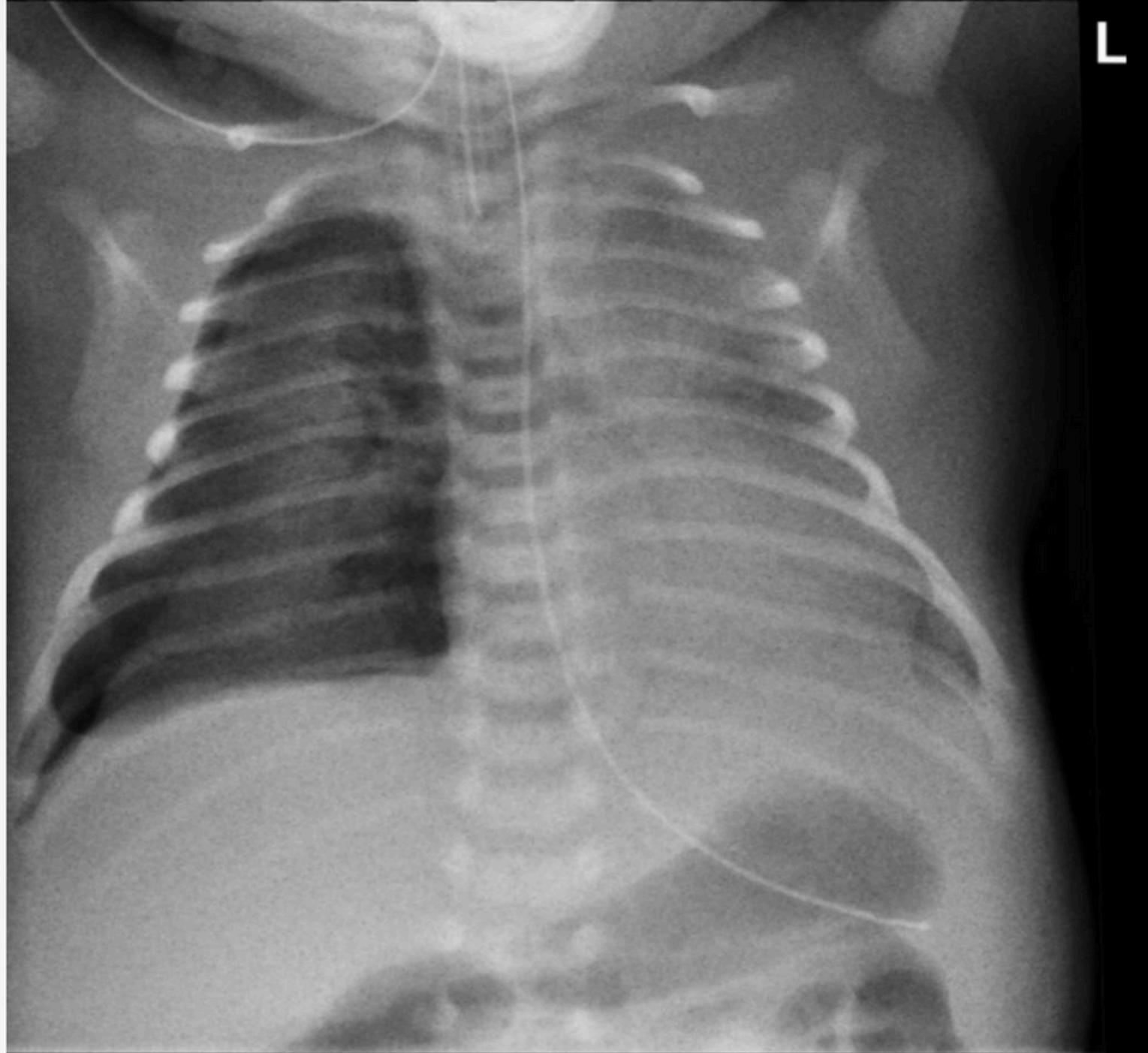


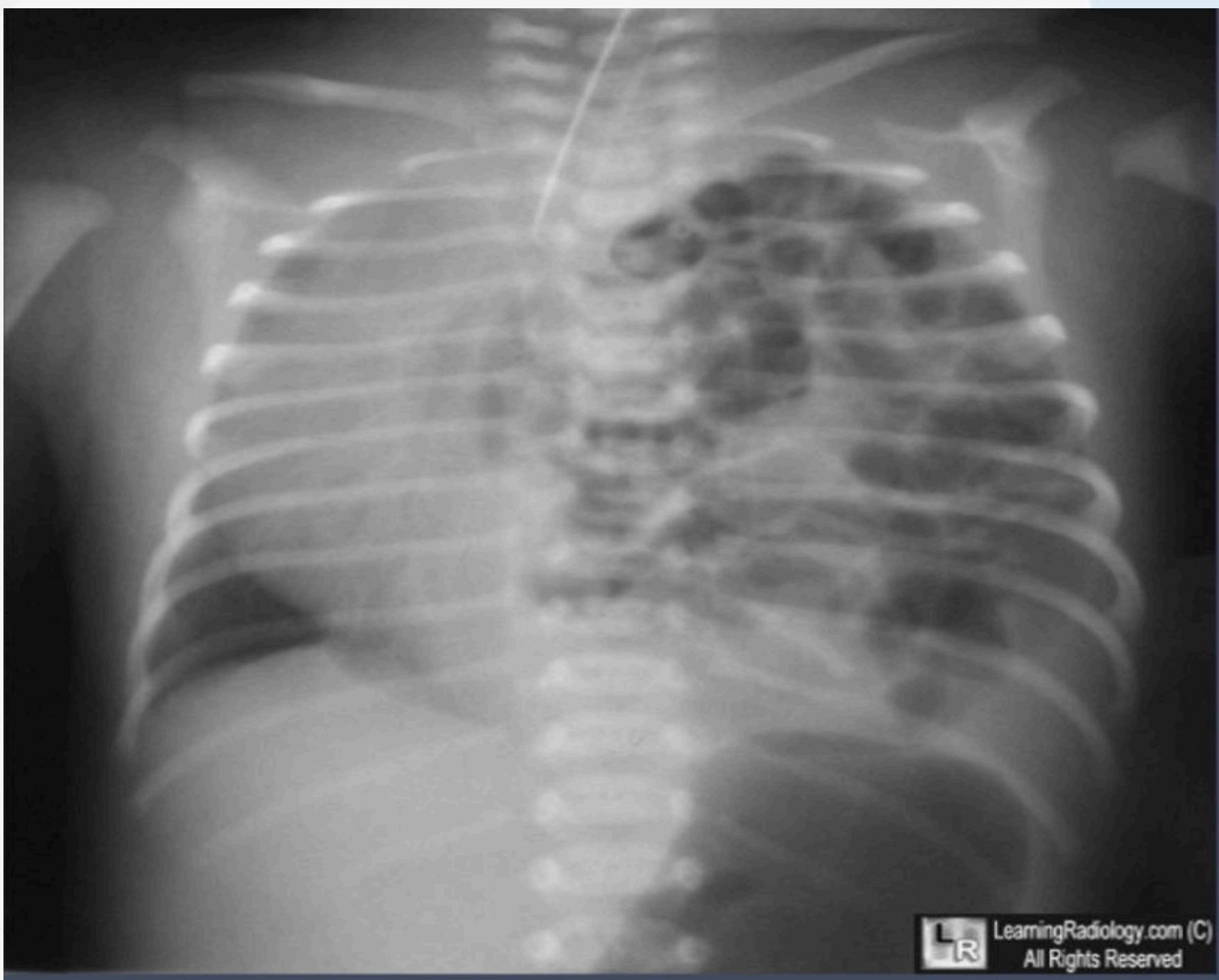
**High resolution
chest CT scan**

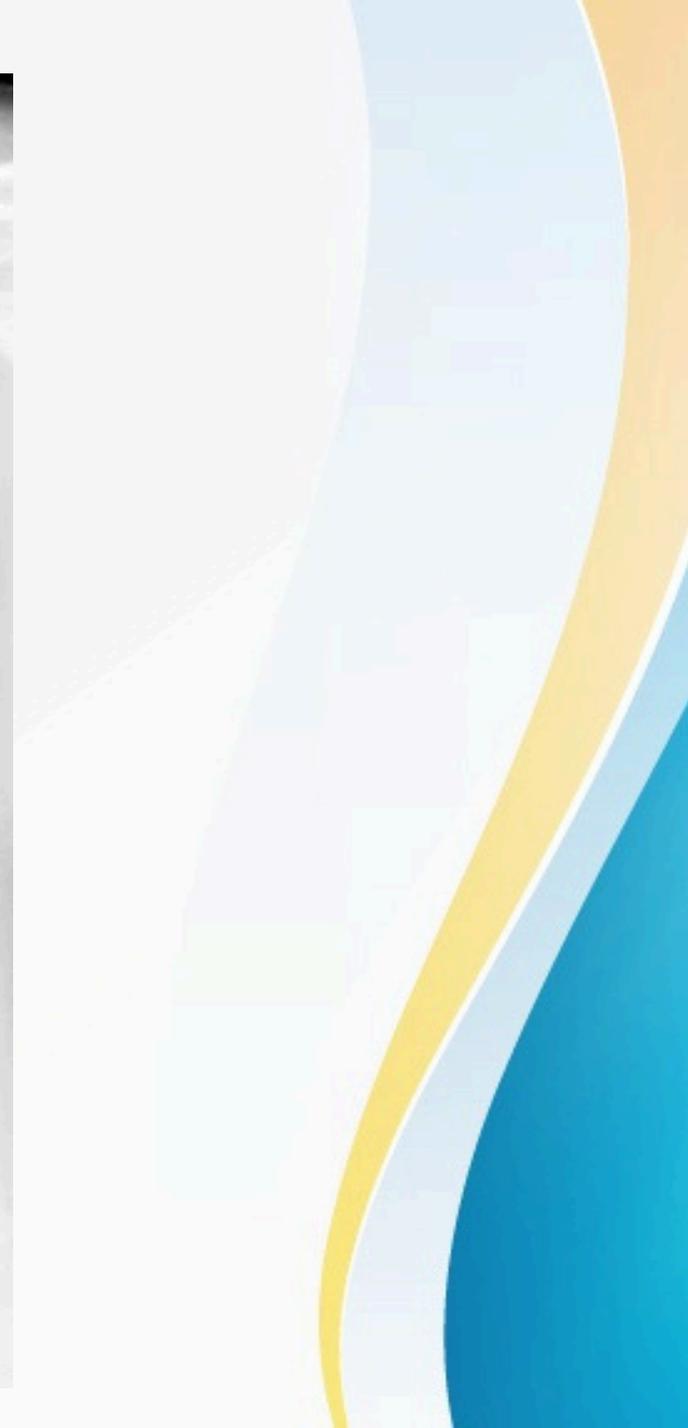
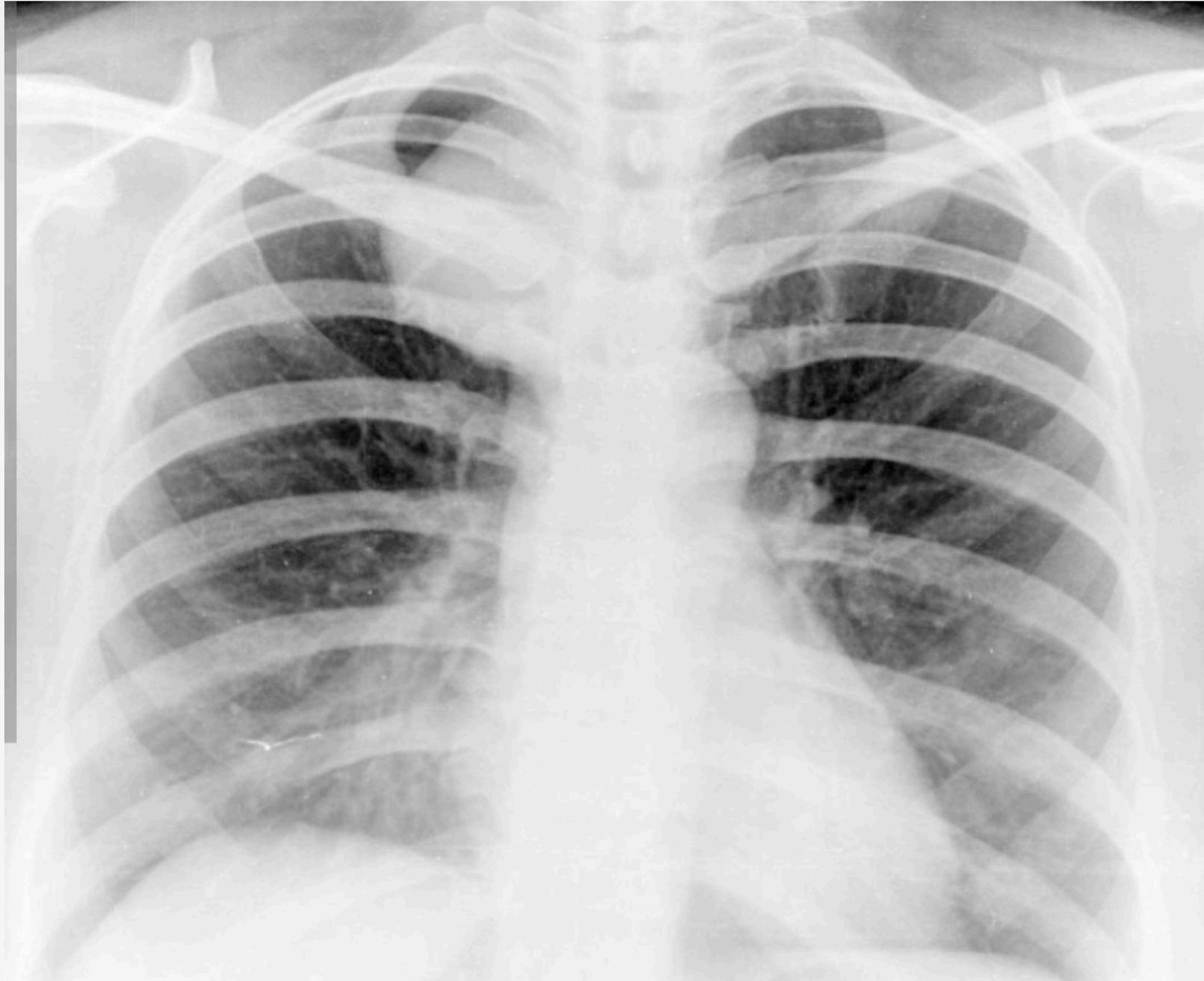
**Signet ring sign
(broncheactasis)**



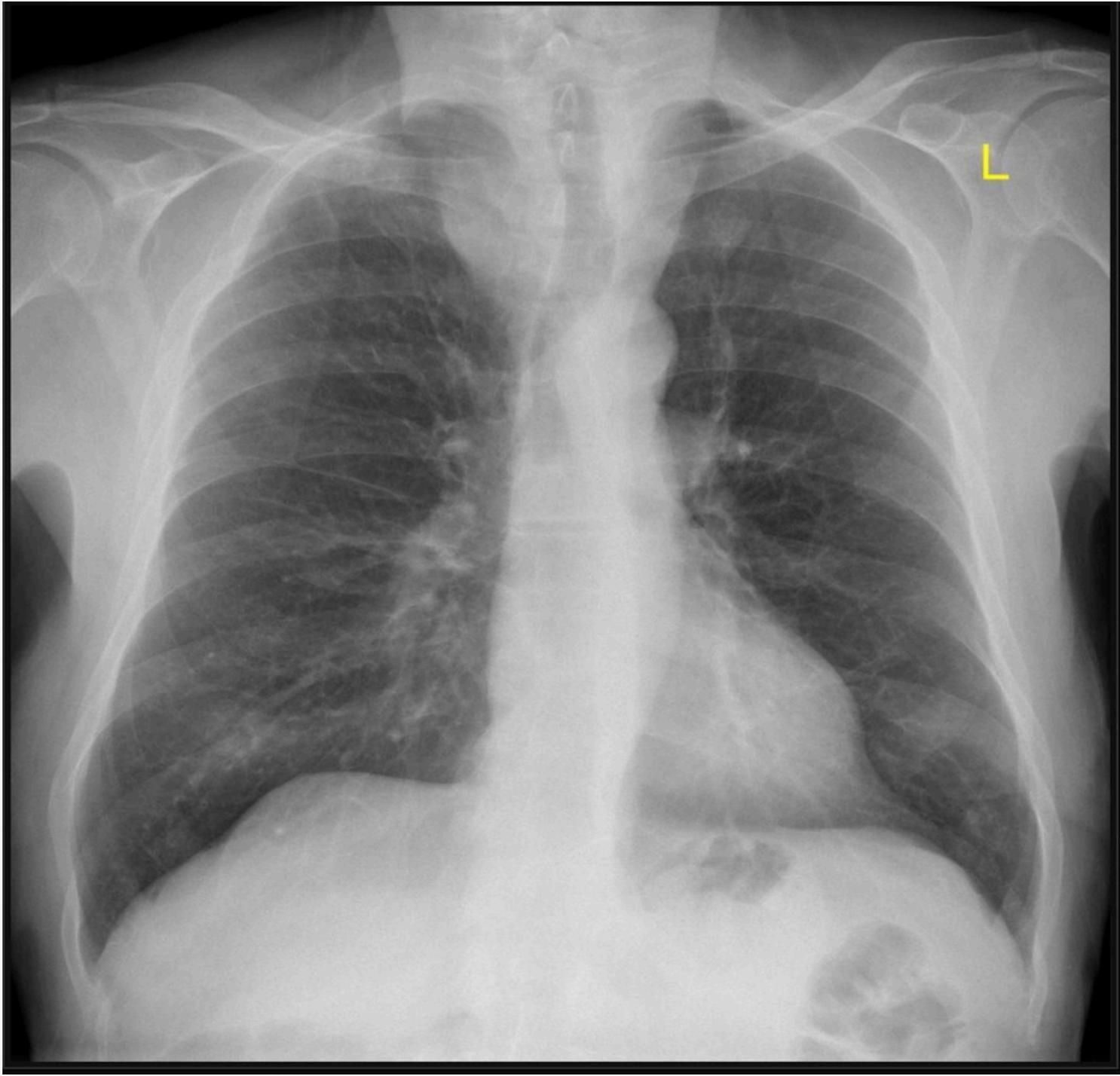
**RDs and right
sided
pneumothorax**







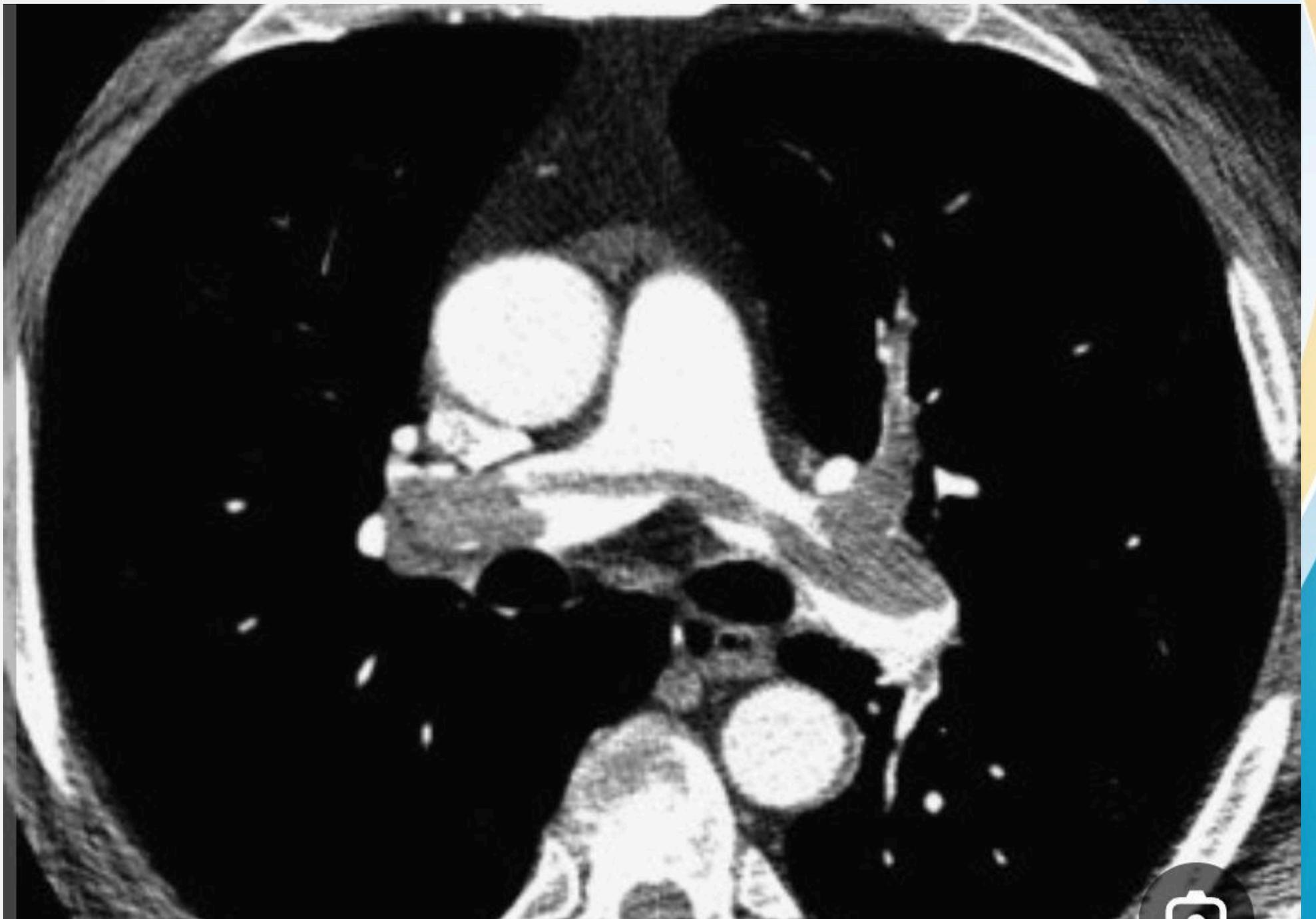
**Cervico
thoracic sign**

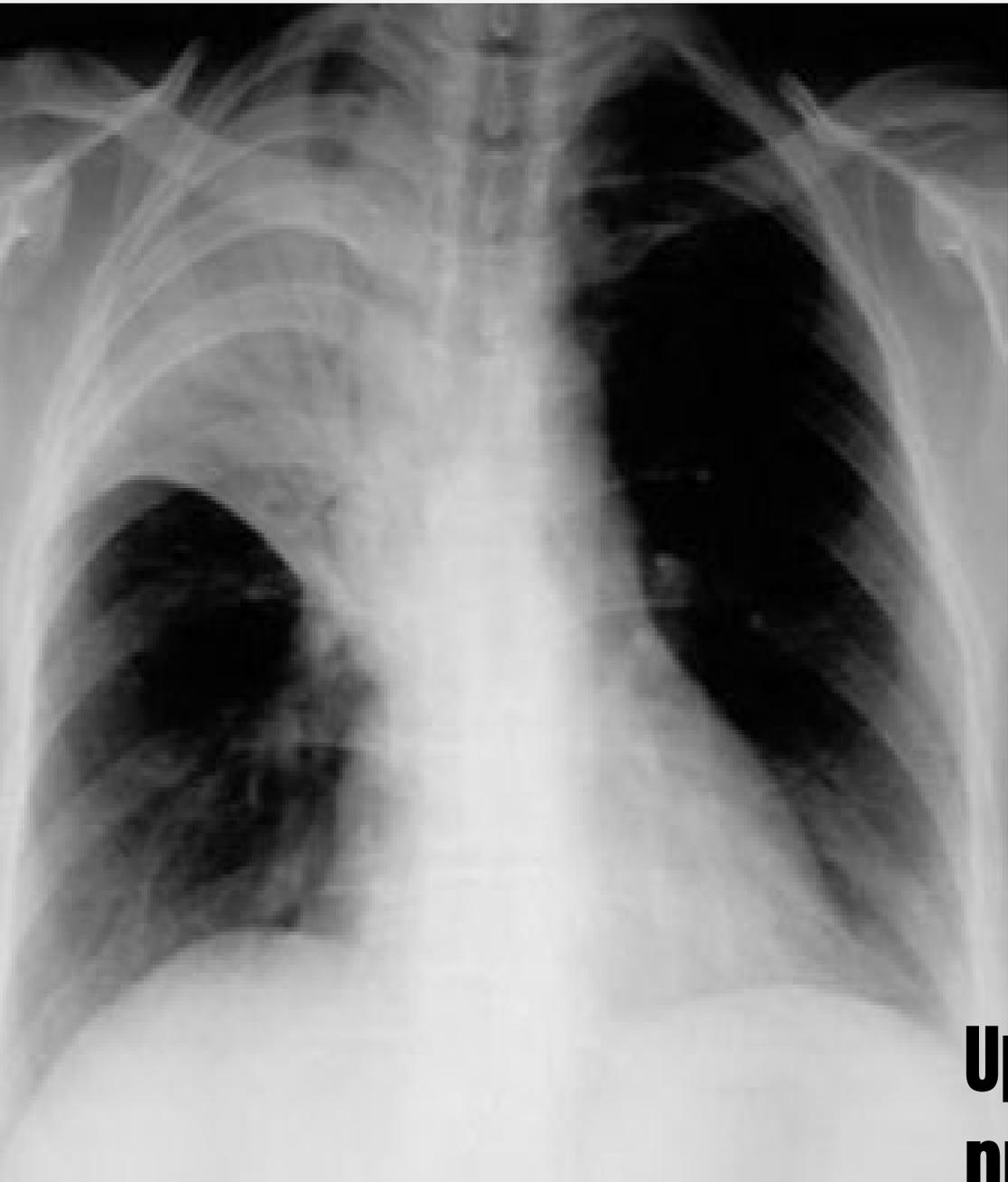


**Large right sided
pneumothorax with
knife seen in
lateral chest**

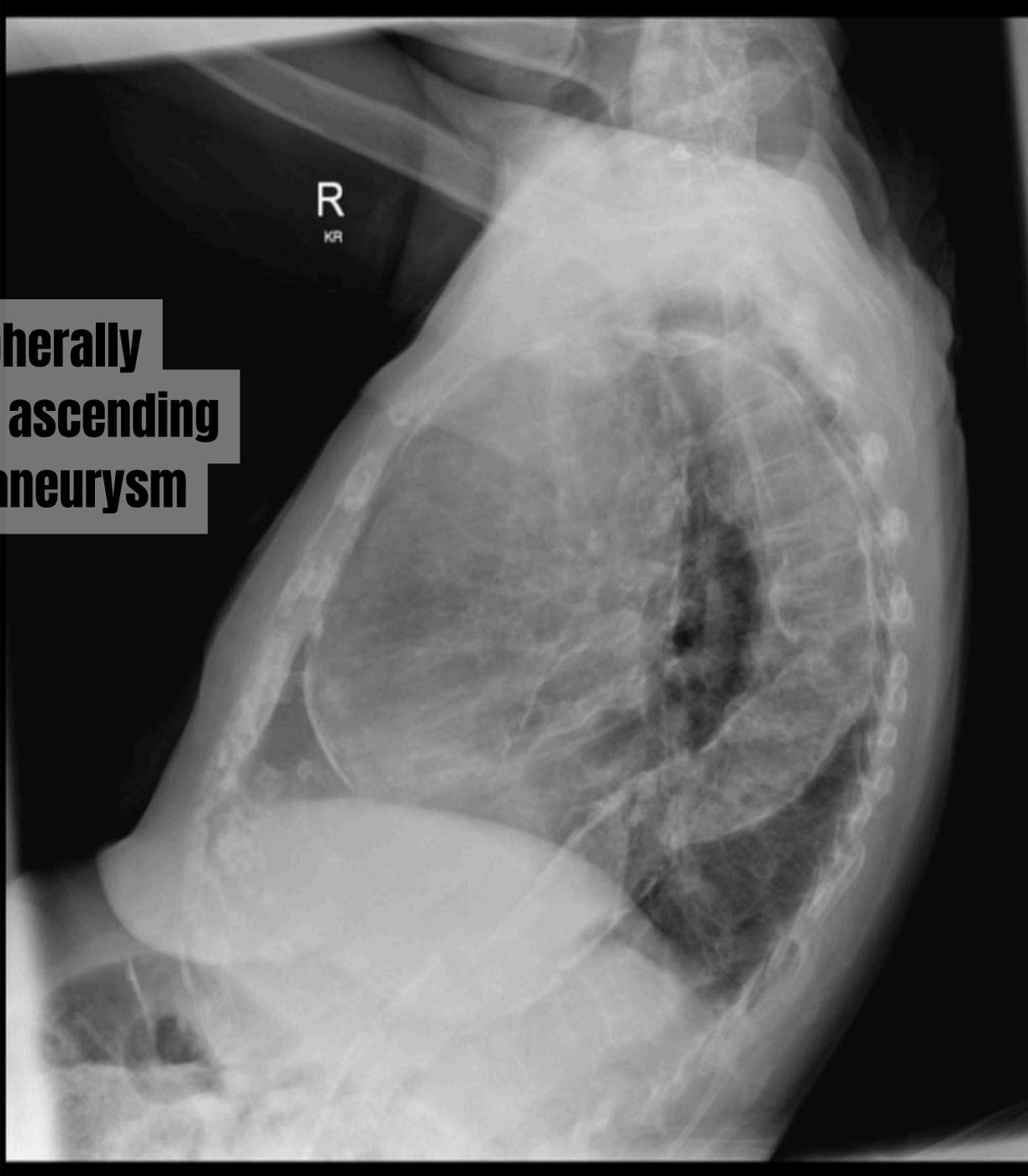
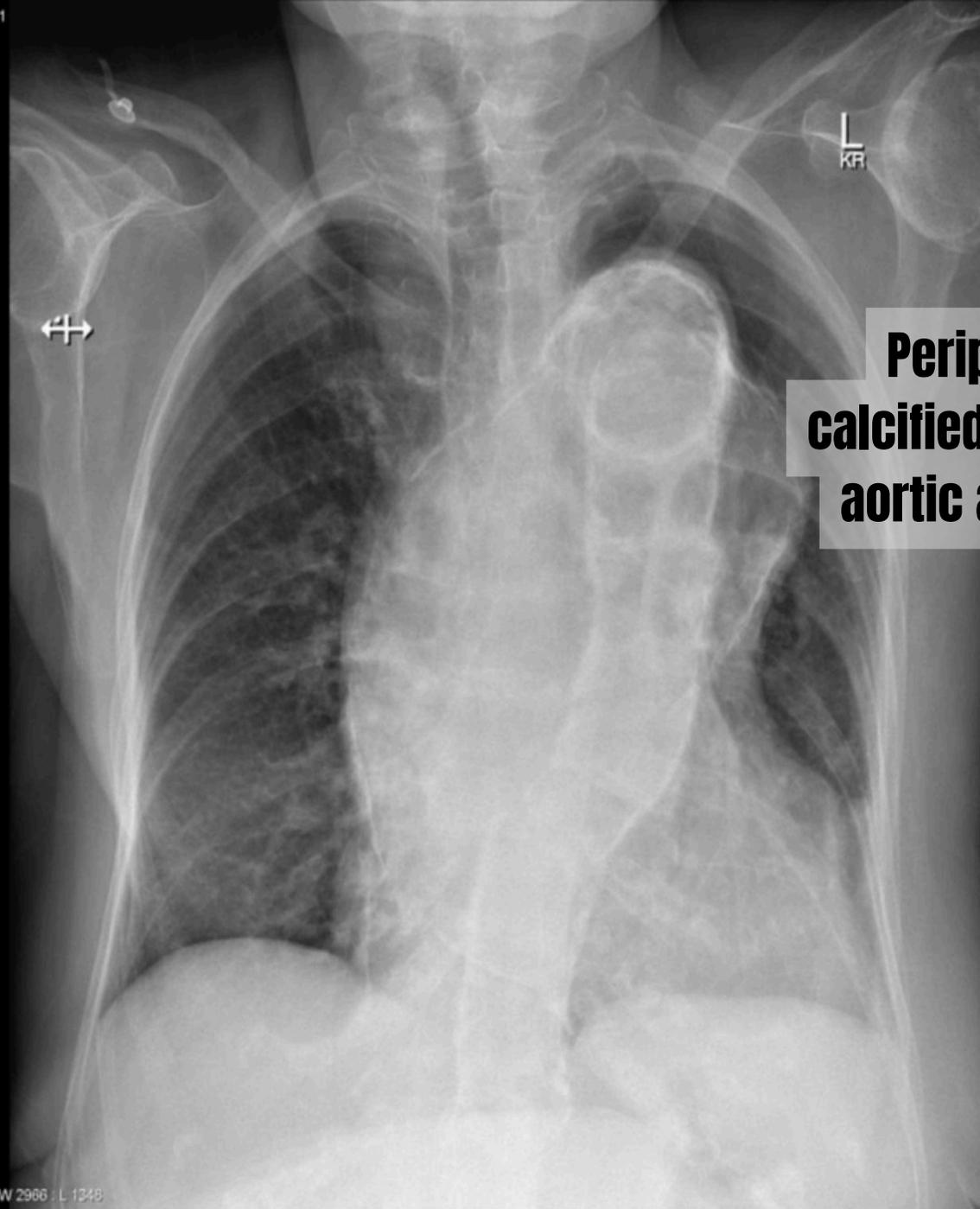


**Saddle
pulmonary
embolism**





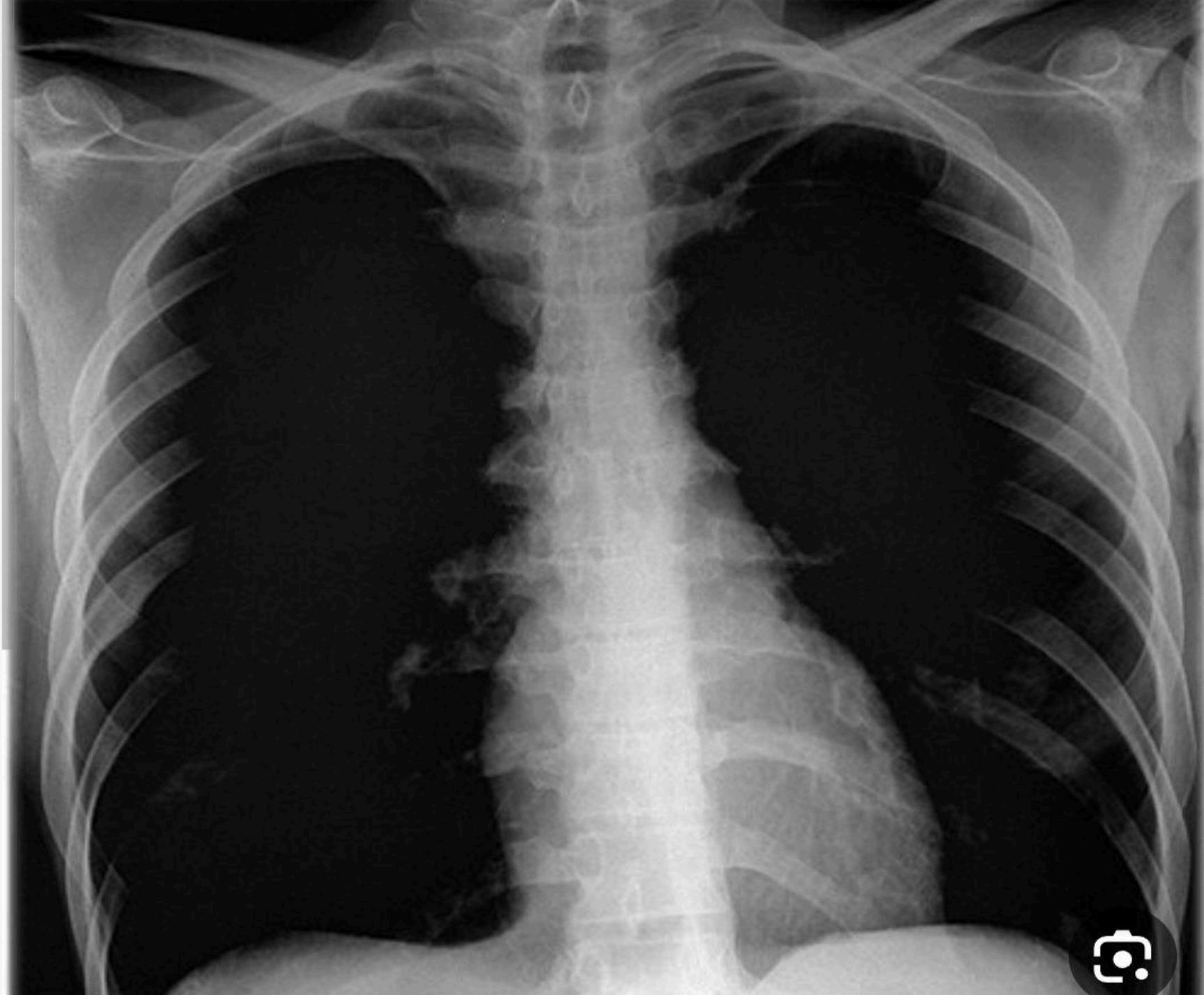
Upper lobe pneumonia



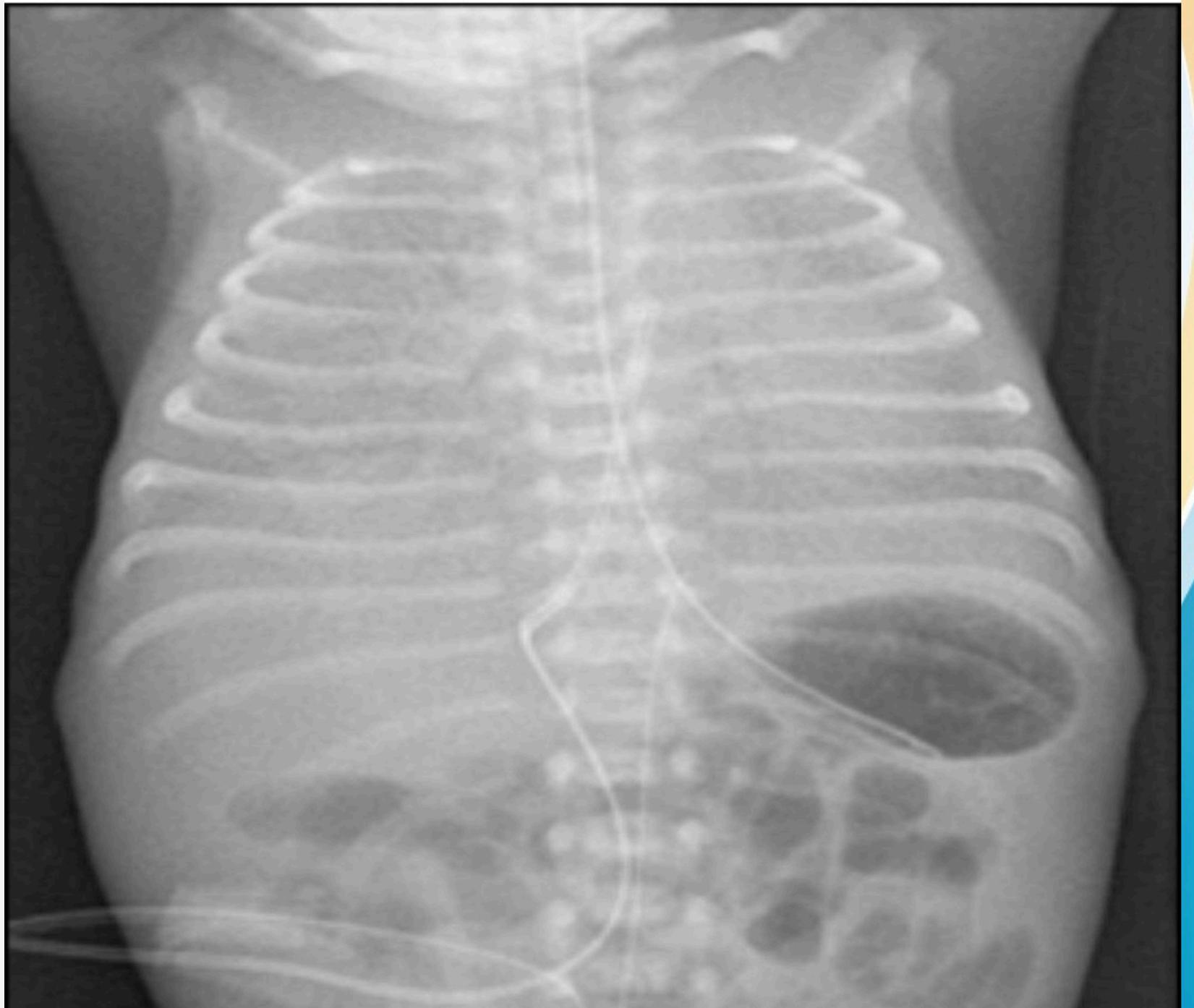
**Peripherally
calcified ascending
aortic aneurysm**



Overexposure



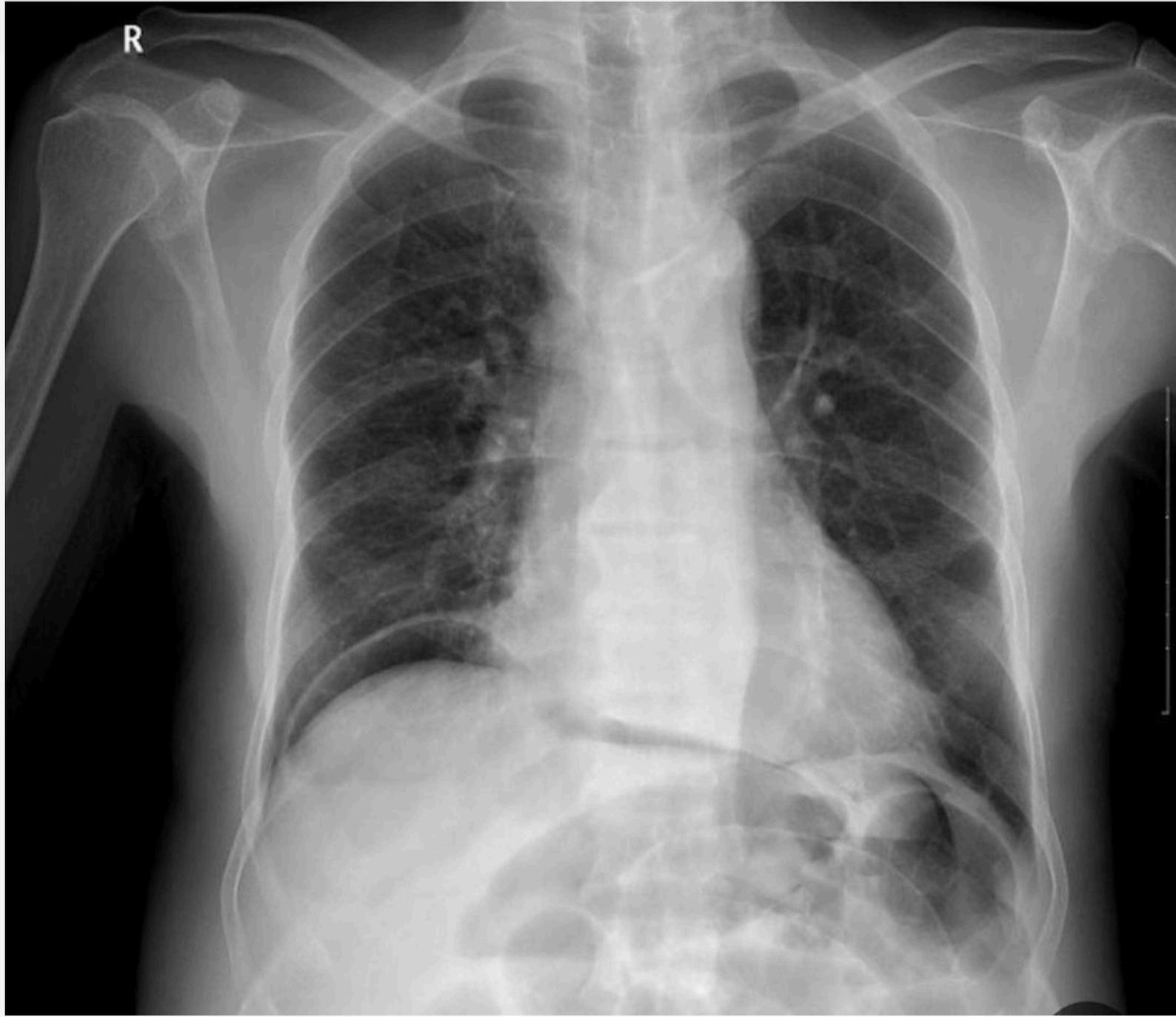
**Bilateral granular opacity
with air bronchogram ,
bell shaped chest RDs**



Healed Tb



**Evidence of
air under
diaphragm**



Dear all
I wish you best of luck in your examination
Be focus, be calm and everything will be just
fine(Good luck)

