

Emergency residents 'skill level in Chest X-Ray (ERCXR) Interpretation

Supplementary Online Content

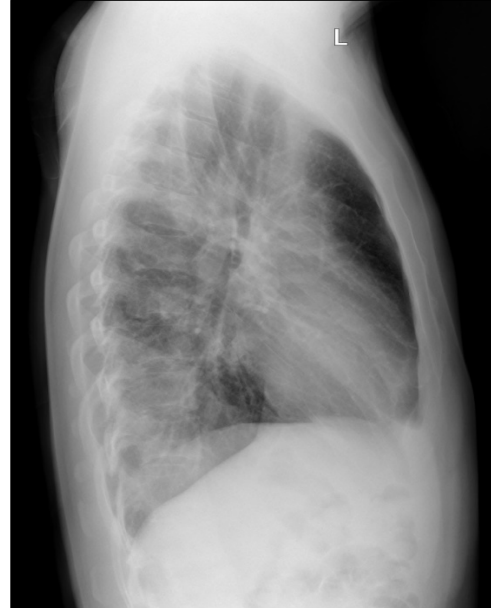
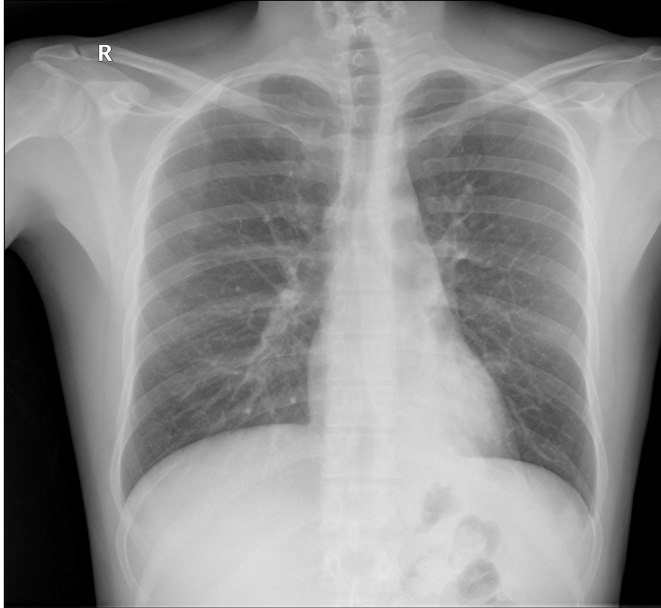
- This supplementary material has been provided by the authors to give readers additional information about their work.

Demographic Information

- **What is your gender?**
 - Male
 - Female
- **What is your residency level?**
 - 1
 - 2
 - 3
 - 4
- **How long have you been in clinical practice?**
 - 1 year
 - 2 year
 - 3 year
 - 4 year
 - >5 year
- **Average number of CXR read per week?**
 - >10
 - ≤10
- **. Do you have an interest in diagnostic radiology?**
 - Yes
 - No
- **Have you had an elective rotation in diagnostic radiology?**
 - Yes
 - No

Question 1

Clinical Vignette: A 20-year-old man presented to the Emergency Department with a history of productive cough and pleuritic chest pain for 3 days prior to the presentation. His vital signs were as follows: blood pressure: 152/90 mmHg, heart rate: 112/minute, respiratory rate: 24/minute, and temperature: 38.0 °C. His chest X-ray is shown below:



Sim K, Left lower lobe consolidation. Case study, Radiopaedia.org, <https://doi.org/10.53347/rld-33258>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Normal Chest X-ray
 - B. Left Lower Lobe Pneumonia**
 - C. Lung Cancer
 - D. Right Upper Lobe Pneumonia
 - E. Pleural Effusion
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1

Low

2

3

4

5

High

Question 2

Clinical Vignette: A 50-year-old male patient developed a dry cough for 3 days prior to his presentation to the Emergency Department. He is a heavy smoker. His vital signs were as follows: Blood Pressure: 152/90 mmHg, Heart Rate: 100 bpm, Respiratory Rate: 16 bpm, and Temperature: 37.0 C:



Jones J, Normal CXR. Case study, Radiopaedia.org, <https://doi.org/10.53347/r1D-13647>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
A. Normal Chest X-Ray
B. Pneumonia (Right Upper Lobe)
C. Pneumonia (Right Lower Lobe)
D. Pleural Effusion
E. Lung Cancer
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1

Low

2

3

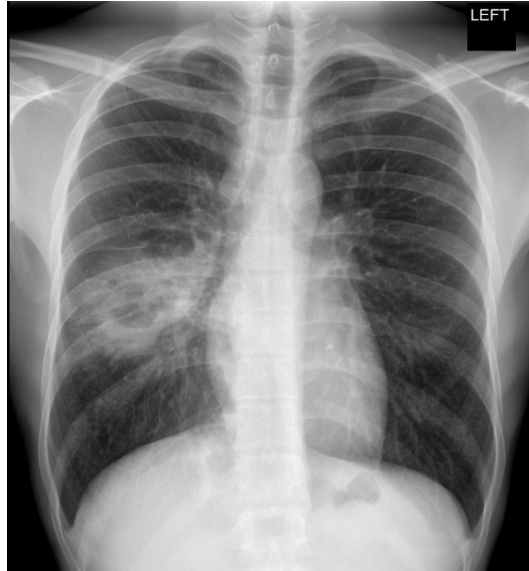
4

5

High

Question 3

Clinical Vignette: A 67-year-old male presents to the Emergency Department with a productive cough, nausea and vomiting. He had a previous stroke. He is a non-smoker. On examination, he has saturation of 85% in air, has a HR of 100 bpm, and is febrile with a temperature of 39°C.



Yonso M, Lung abscess. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-84867>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Right Middle Lobe Pneumonia
 - B. Right Upper Lobe Pneumonia
 - C. Tuberculosis
 - D. Lung Abscess**
 - E. Lung Cancer
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1

Low

2

3

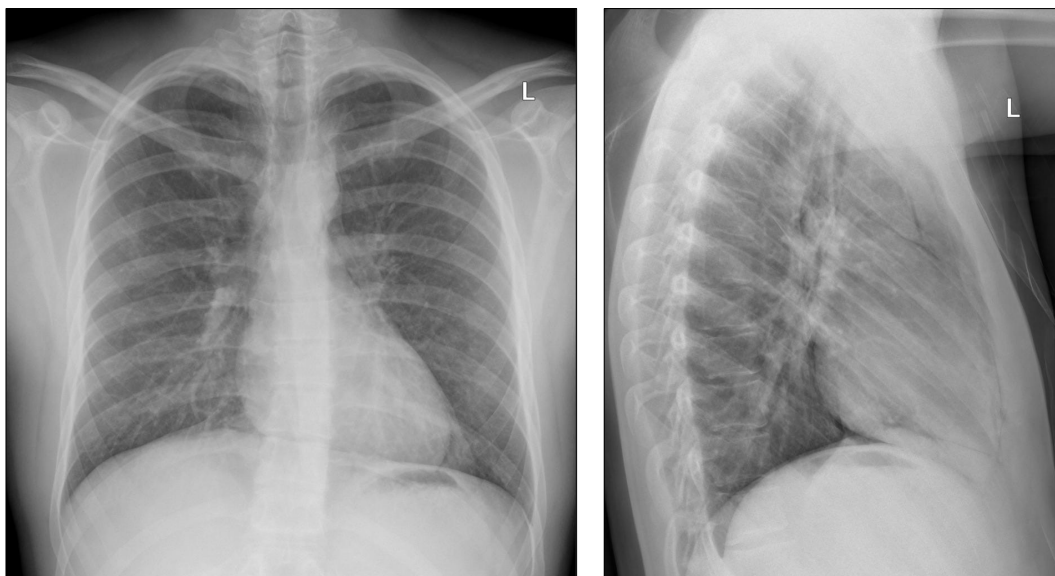
4

5

High

Question 4

Clinical Vignette: A 29-year-old male presented to the Emergency Department with increasing wheeze and dyspnea. He is a known asthmatic. On examination, he had oxygen saturation of 84% in room air and was afebrile. His respiratory rate was 28 bpm with a heart rate of 98 bpm. There were scattered wheezes throughout the lungs with reduced air entry bilaterally. His chest X-ray is shown below:



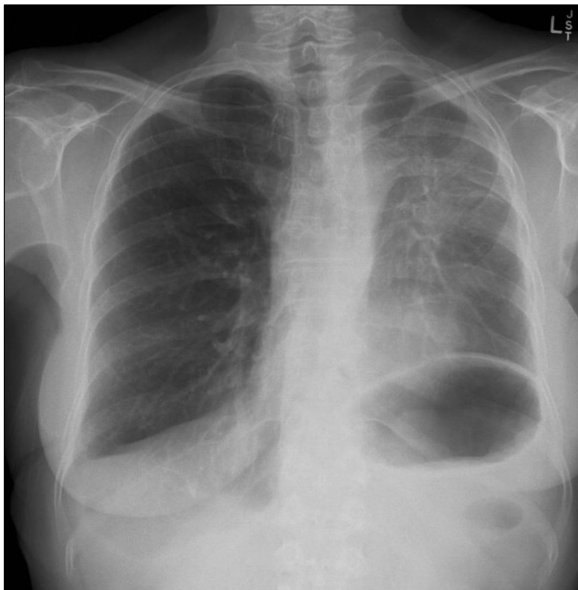
Gaillard F, Pneumomediastinum. Case study, Radiopaedia.org, <https://doi.org/10.53347/r1D-21694>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Pneumothorax
 - B. Pneumomediastinum**
 - C. Normal Chest X-ray
 - D. Rib Fracture
 - E. Right Lower Lobe Pneumonia
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1	2	3	4	5
Low				High

Question 5

Clinical Vignette: A 29-year-old woman presented to the Emergency Department with increasing wheeze and dyspnea. She is a known asthmatic. On examination, she had oxygen saturation of 84% in room air and was afebrile. Her respiratory rate was 28 bpm with a heart rate of 98 bpm. There were scattered wheezes throughout the lungs with reduced air entry bilaterally. Her chest X-ray is shown below:



Gaillard F, Left upper lobe collapse. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-10554>

- **What is the most likely diagnosis?**
 - Normal
 - Abnormal
- **What is the most likely diagnosis?**
 - A. Pleural Effusion
 - B. Lobar Collapse**
 - C. Pneumothorax
 - D. Pneumonia
 - E. Normal Chest X-ray
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1

Low

2

3

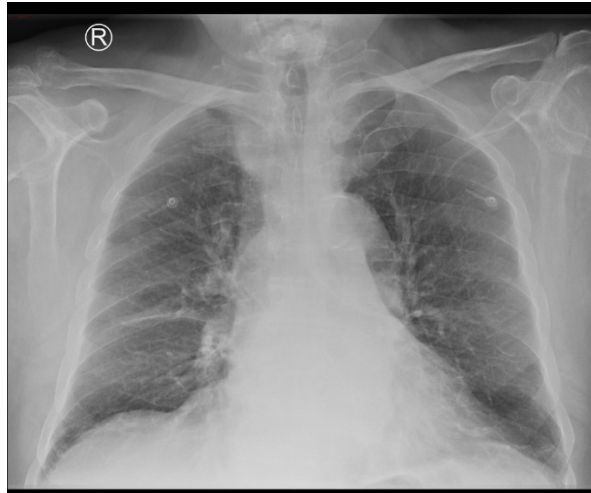
4

5

High

Question 6

Clinical Vignette: A 60-year-old man presents to the Emergency Department with acute shortness of breath. He has a 20 pack-year smoking history. On examination, he is afebrile with saturations of 90% in air. His heart rate is 100 bpm with a respiratory rate of 22. There is dullness and inspiratory crackles in both lower zones. His chest X-ray is shown below:



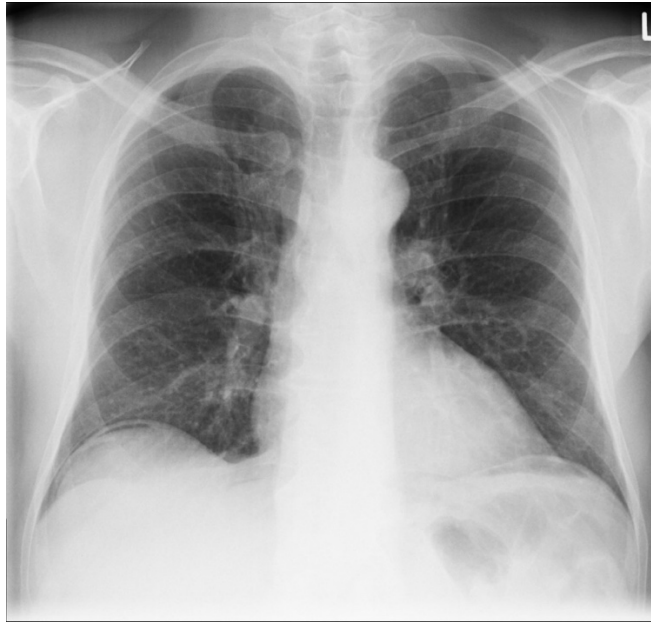
Worsley C, Pulmonary oedema. Case study, Radiopaedia.org, <https://doi.org/10.53347/r1D-82412>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Pneumonia
 - B. Pulmonary Edema**
 - C. Interstitial Lung Disease
 - D. Aortic Dissection
 - E. Normal Chest X-ray
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1	2	3	4	5
Low				High

Question 7

Clinical Vignette: A 25-year-old male presents to the Emergency Department with worsening abdominal pain. He is a non-smoker. On examination, he has an oxygen saturation of 87% in air, respiratory rate of 22 bpm, heart rate of 130 bpm, and is febrile with a temperature of 37.9°C. His chest X-ray is shown below:



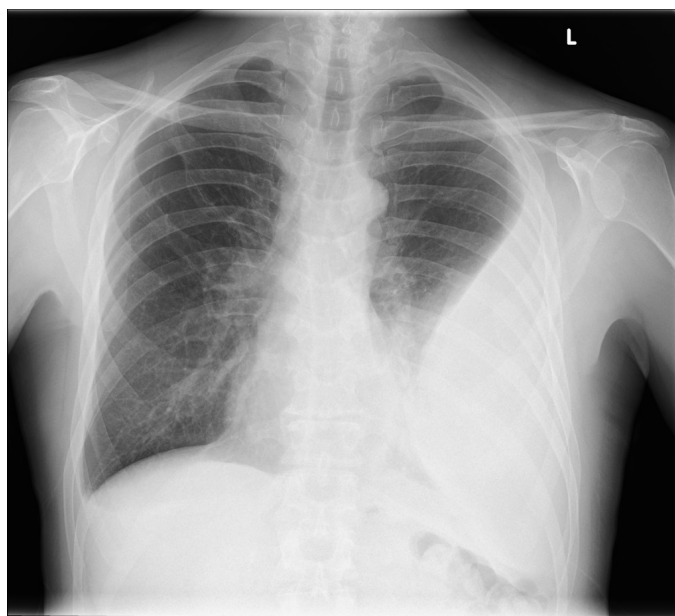
Sorrentino S, Pneumoperitoneum. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-14866>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Hiatal Hernia
 - B. Pleural Effusion
 - C. Pneumothorax
 - D. Pneumoperitoneum**
 - E. Pneumonia
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1	2	3	4	5
Low				High

Question 8

Clinical Vignette: A 70-year-old male presents to the Emergency Department feeling unwell with a productive cough. He was diagnosed with pneumonia 3 weeks earlier, but has not been taking his antibiotics. He is a heavy smoker. On examination, he is febrile and has a saturation of 90% in air. There are crackles, reduced air entry in the right hemithorax. His chest X-ray is shown below:



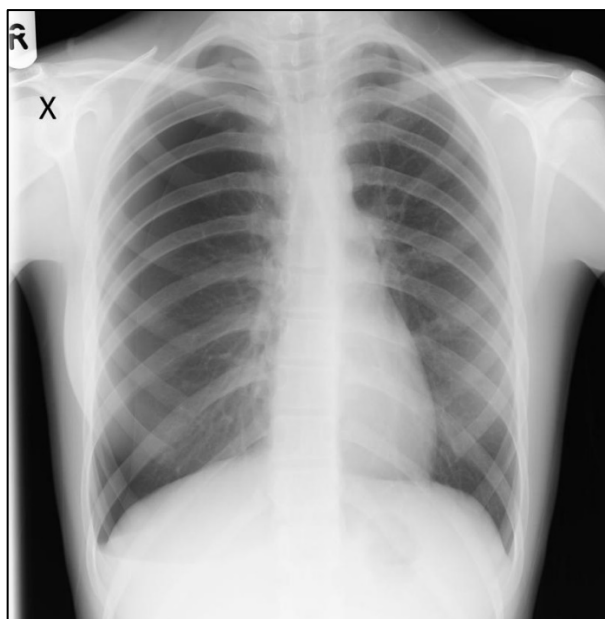
Bickle I, Pleural empyema. Case study, Radiopaedia.org, <https://doi.org/10.53347/rid-74921>

- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Lobar Collapse
 - B. Tuberculosis
 - C. Pneumothorax
 - D. Empyema**
 - E. Lung Abscess
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1	2	3	4	5
Low				High

Question 9

Clinical Vignette: A 20-year-old male presents to the Emergency Department with sudden onset right-sided pleuritic chest pain and breathlessness. He has no significant past medical history and is a non-smoker. On examination, he has an oxygen saturation of 93% in air and is afebrile. His heart rate is 95bpm, and blood pressure is 120/82 mmHg. His chest X-ray is shown below:



Gregorius Enrico, Pneumothorax with apical bleb. , Radiopaedia.org, rID-126208

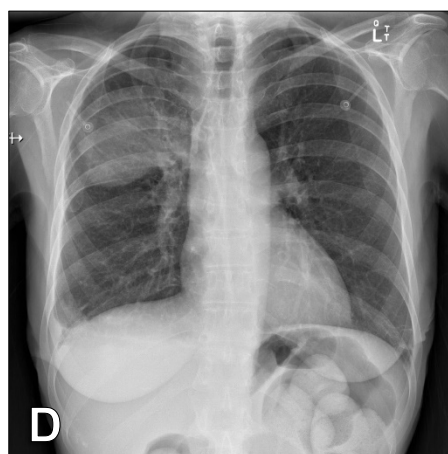
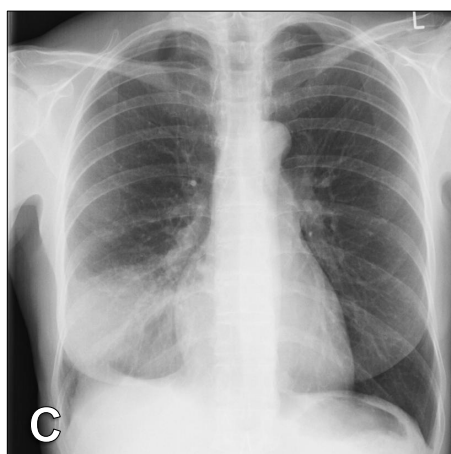
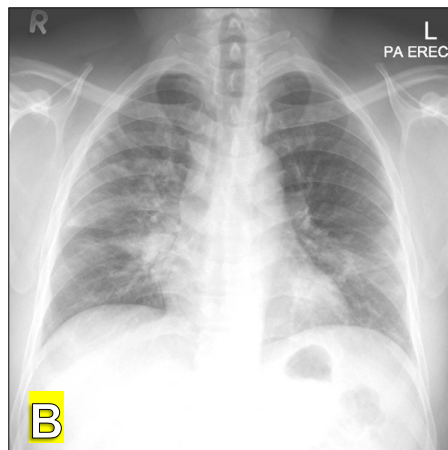
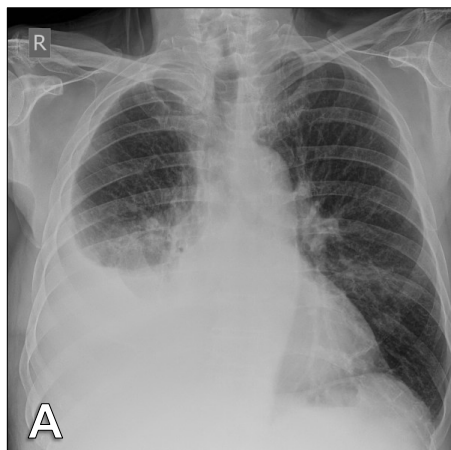
- **What is the most likely diagnosis?**
Normal
Abnormal
- **What is the most likely diagnosis?**
 - A. Normal Chest X-ray
 - B. Pneumonia
 - C. Pneumothorax**
 - D. Pleural Effusion
 - E. Rib Fracture
- **How do you rate your degree of confidence in interpreting the chest X-ray of this case?**

1	2	3	4	5
Low				High

Question 10

Clinical Vignette: A 60-year-old patient presented to the Emergency Department with fever and dry cough for the past 3 days. The patient underwent SARS-CoV-2 PCR testing to rule out COVID-19 pneumonia.

- Which of following chest X-ray images is most consistent with COVID-19 pneumonia?



A: Gavrilă Andrei, Chest RX – pleural effusion. Radiopaedia.org, rID-157292. B: Aljilly S, COVID-19 pneumonia. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-76145>. C: Sorrentino S, Pneumonia - right lower lobe. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-14982>. D: Mistry V, Lung abscess. Case study, Radiopaedia.org, <https://doi.org/10.53347/rID-56959>

- How do you rate your degree of confidence in interpreting the chest X-rays of this case?

☐ 1☐ 2☐ 3☐ 4☐ 5

Low

High