

## X Ray Image And Report Medical Records Retention CdpH Home

This popular guide to the examination and interpretation of chest radiographs is an invaluable aid for medical students, junior doctors, nurses, physiotherapists and radiographers. Translated into over a dozen languages, this book has been widely praised for making interpretation of the chest X-ray as simple as possible The chest X-ray is often central to the diagnosis and management of a patient. As a result every doctor requires a thorough understanding of the common radiological problems. This pocketbook describes the range of conditions likely to be encountered on the wards and guides the reader through the diagnostic process based on the appearance of the abnormality shown. Covers the full range of common radiological problems. Includes valuable advice on how to examine an X-ray. Assists the doctor in determining the nature of the abnormality. Points the clinician towards a possible differential diagnosis. A larger page size allows for larger and clearer illustrations. A new chapter on the sick patient covers the patient on ITU and the appearance of lines and tubes. There is extended use of CT imaging with advice on choosing modalities depending on the clinical circumstances. A new section of chest x-ray problems incorporates particularly challenging case histories. The international relevance of the text has been expanded with additional text and images. This title provides essential guidance for anyone responsible for diagnostic X-Ray equipment. It gives clear advice on which routine performance tests are essential and which are desirable, where to get information on how to do them, who should be doing them and how often they should be done. For many tests it also gives guidance as to when the results indicate further action should be taken. This second edition takes into account the introduction of new technologies in medical imaging including CR, DDR and image display devices.

In 1890, Professor Arthur Willis Goodspeed, a professor of physics at Pennsylvania USA was working with an English born photographer, William N Jennings, when they accidentally produced a Röntgen Ray picture. Unfortunately, the significance of their findings were overlooked, and the formal discovery of X-rays was credited to Wilhelm Roentgen in 1895. The discovery has since transformed the practice of medicine, and over the course of the past 130 years, the development of new radiological techniques has continued to grow. The impact has been seen in virtually every hospital in the world, from the routine use of ultrasound for pregnancy scans, through to the diagnosis of complex medical issues such as brain tumours. More subtly, X-rays were also used in the discovery of DNA and in military combat, and their social influence through popular culture can be seen in cartoons, books, movies and art. Written by two radiologists who have a passion for the history of their field, The History of Radiology is a beautifully illustrated review of the remarkable developments within radiology and the scientists and pioneers who were involved. This engaging and authoritative history will appeal to a wide audience including medical students studying for the Diploma in the History of Medicine of the Society of Apothecaries (DHMSA), doctors, medical physicists, medical historians and radiographers.

Since the publication of the best-selling, highly acclaimed first edition, the technology and clinical applications of medical imaging have changed significantly. Gathering these developments into one volume, Webb's Physics of Medical Imaging, Second Edition presents a thorough update of the basic physics, modern technology and many examples of clinical application across all the modalities of medical imaging. New to the Second Edition Extensive updates to all original chapters Coverage of state-of-the-art detector technology and computer processing used in medical imaging 11 new contributors in addition to the original team of authors Two new chapters on medical image processing and multimodality imaging More than 50 percent new examples and over 80 percent new figures Glossary of abbreviations, color insert and contents lists at the beginning of each chapter Keeping the material accessible to graduate students, this well-illustrated book reviews the basic physics underpinning imaging in medicine. It covers the major techniques of x-radiology, computerised tomography, nuclear medicine, ultrasound and magnetic resonance imaging, in addition to infrared, electrical impedance and optical imaging. The text also describes the mathematics of medical imaging, image processing, image perception, computational requirements and multimodality imaging.

Chest X-Ray Made Easy E-Book

Selected Papers Presented at the United States-France Seminar on Biomedical Image Processing, St. Pierre de Chartreuse, France, May 27/31, 1980

An External Interface for Processing 3-D Holographic and X-Ray Images

Paul and Juhl's Essentials of Radiologic Imaging

Medical Image Registration

The History of Radiology

This open access book focuses on diagnostic and interventional imaging of the chest, breast, heart, and vessels. It consists of a remarkable collection of contributions authored by internationally respected experts, featuring the most recent diagnostic developments and technological advances with a highly didactical approach. The chapters are disease-oriented and cover all the relevant imaging modalities, including standard radiography, CT, nuclear medicine with PET, ultrasound and magnetic resonance imaging, as well as imaging-guided interventions. As such, it presents a comprehensive review of current knowledge on imaging of the heart and chest, as well as thoracic interventions and a selection of "hot topics". The book is intended for radiologists, however, it is also of interest to clinicians in oncology, cardiology, and pulmonology.

Aimed at radiographers, nurse practitioners, junior doctors and allied professionals who need to formulate a written report/opinion on trauma radiographs. There are 100 case studies each with radiograph image. The book is designed to support whatever course you have done whether reporting, OCyred dottingOCO or commenting or to encourage you to go on OCythat courseOCO. It can be used as a revision book, a study aid, or to help in preparation for an assessment. However you use the book it will encourage you to read more and research more into musculoskeletal trauma and its radiographic appearance; for it is a fascinating topic and there is always more to learn "

Chest Imaging presents a comprehensive review of thoracic pathologies commonly encountered by practicing radiologists and residents in training. The volume covers topics including: Common Abnormalities, Emergency Radiology, Pleural Disease, Infections, Neoplasms, and Airway Disease. Each section begins with an overview chapter that orients the reader to the concerns and issues related to imaging in the specific anatomic region or category. Part of the Rotations in Radiology series, this book offers a guided approach to imaging diagnosis with examples of all imaging modalities complemented by the basics of interpretation and technique and the nuances necessary to arrive at the best diagnosis. Each chapter contains a targeted discussion of a pathology which reviews the definition, clinical features, anatomy and physiology, imaging techniques, differential diagnosis, clinical issues, key points, and further reading. This book is a must-read for residents and practitioners in radiology seeking refreshing on essential facts and imaging abnormalities in thoracic imaging.

Gamuts in Radiology is the world's most complete, best known, and most trusted guide to radiologic differential diagnosis. Since 1975, radiologists the world over have used it to ensure that every diagnostic possibility is considered. For the Fourth Edition, Dr. Maurice M. Reeder has assembled an all-new board of Section Editors who have completely revised and updated their respective sections. New features in the fourth edition include: over 250 new gamuts, updates in more than 80 percent of the previous gamuts, an entire new section on obstetrical ultrasound.

A Handbook for Teachers and Students

4th International Conference, CVIP 2019, Jaipur, India, September 27-29, 2019, Revised Selected Papers, Part I

Comprehensive Lists of Roentgen Differential Diagnosis

Expert Radiology Series

X-Ray Equipment Maintenance and Repairs Workbook for Radiographers and Radiological Technologists

A Review of the Clinical Effectiveness, Cost-effectiveness, and Guidelines

When Jessica breaks her arm, she goes to the hospital to get an x-ray, in an introduction to x-rays and related procedures including the CAT-scan, MRI, and ultrasound.

While books on the medical applications of x-ray imaging exist, there is not one currently available that focuses on industrial applications. Full of color images that show clear spectrometry and rich with applications, X-Ray Imaging fills the need for a comprehensive work on modern industrial x-ray imaging. It reviews the fundamental science of x-ray imaging and addresses equipment and system configuration. Useful to a broad range of radiation imaging practitioners, the book looks at the rapid development and deployment of digital x-ray imaging system.

This two-volume set (CCIS 1147, CCIS 1148) constitutes the refereed proceedings of the 4th International Conference on Computer Vision and Image Processing, held in Jaipur, India, in September 2019. The 73 full papers and 10 short papers were carefully reviewed and selected from 202 submissions. The papers are organized according to the following topics: Part I: Biometrics; Computer Forensic; Computer Vision; Dimension Reduction; Healthcare Information Systems; Image Processing; Image segmentation; Information Retrieval; Instance based learning; Machine Learning.Part II: Neural Network; Object Detection; Object Recognition; Online Handwriting Recognition; Optical Character Recognition; Security and Privacy; Unsupervised Clustering.

This open access book gives a complete and comprehensive introduction to the fields of medical imaging systems, as designed for a broad range of applications. The authors of the book first explain the foundations of system theory and image processing, before highlighting several modalities in a dedicated chapter. The initial focus is on modalities that are closely related to traditional camera systems such as endoscopy and microscopy. This is followed by more complex image formation processes: magnetic resonance imaging, X-ray projection imaging, computed tomography, X-ray phase-contrast imaging, nuclear imaging, ultrasound, and optical coherence tomography.

Jessica's X-ray

Compliance with Standards

Health Risks from Exposure to Low Levels of Ionizing Radiation

Fundamentals, Industrial Techniques and Applications

Reeder and Felson 's Gamuts in Radiology

Occupational Outlook Handbook

*Completely revised to reflect recent, rapid changes in the field of interventional radiology (IR), Image-Guided Interventions, 3rd Edition, offers comprehensive, narrative coverage of vascular and nonvascular interventional imaging-ideal for IR subspecialists as well as residents and fellows in IR. This award-winning title provides clear guidance from global experts, helping you formulate effective treatment strategies, communicate with patients, avoid complications, and put today's newest technology to work in your practice. Offers step-by-step instructions on a comprehensive range of image-guided intervention techniques, including discussions of equipment, contrast agents, pharmacologic agents, antiplatelet agents, and classic signs, as well as detailed protocols, algorithms, and SIR guidelines. Includes new chapters on Patient Preparation, Prostate Artery Embolization, Management of Acute Aortic Syndrome, Percutaneous Arterial Venous Fistula Creation, Lymphatic Interventions, Spinal and Paraspinal Nerve Blocks, and more. Employs a newly streamlined format with shorter, more digestible chapters for quicker reference. Integrates new patient care and communication tips throughout to address recent changes in practice. Highlights indications and contraindications for interventional procedures, and provides tables listing the materials and instruments required for each. Features more than 2,300 state-of-the-art images demonstrating IR procedures, full-color illustrations of anatomical structures and landmarks, and video demonstrations online. 2014 BMA Medical Book Awards Highly Commended in Radiology category! Enhanced eBook version included with purchase. Your enhanced eBook allows you to access all of the text, figures, and references from the book on a variety of devices.*

*The technology of automatic pattern recognition and digital image processing, after over two decades of basic research, is now appearing in important applications in biology and medicine as well as industrial, military and aerospace systems. In response to a suggestion from Mr. Norman Caplan, the Program Director for Automation, Bioengineering and Sensing at the United States National Science Foundation, the authors of this book organized the first Uni ted States-France Seminar on Biomedical Image Processing. The seminar met at the Hotel Beau Site, St. Pierre de Chartreuse, France on May 27-31, 1980. This book contains most of the papers presented at this seminar, as well as two papers (By Bisconte et al. and by Floem ~ al.) discussed at the seminar but not appearing on the program. We view the subject matter of this seminar as a confluence amon- three broad scientific and engineering disciplines: 1) biology and medicine, 2) imaging and optics, and 3) computer science and computer engineering. The seminar had three objectives: 1) to discuss the state of the art of biomedical image processing with emphasis on four themes: microscopic image analysis, radiological image analysis, tomography, and image processing technology; 2) to place values on directions for future research so as to give guidance to agencies supporting such research; and 3) to explore and encourage various areas of cooperative research between French and Uni ted States scientists within the field of Biomedical Image Processing.*

*Chest X-Ray Made Easy E-BookElsevier Health Sciences*

*This book is the seventh in a series of titles from the National Research Council that addresses the effects of exposure to low dose LET (Linear Energy Transfer) ionizing radiation and human health. Updating information previously presented in the 1990 publication, Health Effects of Exposure to Low Levels of Ionizing Radiation: BEIR V, this book draws upon new data in both epidemiologic and experimental research. Ionizing radiation arises from both natural and man-made sources and at very high doses can produce damaging effects in human tissue that can be evident within days after exposure. However, it is the low-dose exposures that are the focus of this book. So-called "late" effects, such as cancer, are produced many years after the initial exposure. This book is among the first of its kind to include detailed risk estimates for cancer incidence in addition to cancer mortality. BEIR VII offers a full review of the available biological, biophysical, and epidemiological literature since the last BEIR report on the subject and develops the most up-to-date and comprehensive risk estimates for cancer and other health effects from exposure to low-level ionizing radiation.*

*An Introductory Guide*

*Recommended Standards for the Routine Performance Testing of Diagnostic X-Ray Imaging Systems*

*Airport Passenger Screening Using Backscatter X-Ray Machines*

*Physics and Technology*

*Comparative Interpretation of CT and Standard Radiography of the Chest*

*BEIR VII \_ Phase 2*

*An encyclopedia designed especially to meet the needs of elementary, junior high, and senior high school students.*

*As noted in the Foreword, this report is one of several volumes resulting from this study of future health care technology. The purpose of the study, as formulated by the STG, was to analyze future health care technology. Part of the task was to develop an 'early warning system' for health care technology. The primary goal of the project was to develop a list or description of a number of possible and probable future health care technologies, as well as information on their development. Within the areas of medicine, biology, and physics, the authors have identified several areas of technology. However, given the vast number of possible future health care technologies, complete information on the importance of each area could not be developed in any depth for all technology. Therefore, four specific technologies were chosen and were prospectively assessed. These future technologies were examined in more depth, looking particularly at their future health and policy implications. Subsequently, the project was extended to September 1986, and two additional technologies were chosen for assessment.*

*Comprehensive medical imaging physics notes aimed at those sitting the first FRCR physics exam in the UK and covering the scope of the Royal College of Radiologists syllabus. Written by Radiologists, the notes are concise and clearly organised with 100's of beautiful diagrams to aid understanding. The notes cover all of radiology physics, including basic science, x-ray imaging, CT, ultrasound, MRI, molecular imaging, and radiation dosimetry, protection and legislation. Although aimed at UK radiology trainees, it is also suitable for international residents taking similar examinations, postgraduate medical physics students and radiographers. The notes provide an excellent overview for anyone interested in the physics of radiology or just refreshing their knowledge. This third edition includes updates to reflect new legislation and many new illustrations, added sections, and removal of content no longer relevant to the FRCR physics exam. This edition has gone through strict critique and evaluation by physicists and other specialists to provide an accurate, understandable and up-to-date resource. The book summarises and pulls together content from the FRCR Physics Notes at Radiology Cafe and delivers it as a paperback or eBook for you to keep and read anytime. There are 7 main chapters, which are further subdivided into 60 sub-chapters so topics are easy to find. There is a comprehensive appendix and index at the back of the book.*

*Containing chapter contributions from over 130 experts, this unique publication is the first handbook dedicated to the physics and technology of X-ray imaging, offering extensive coverage of the field. This highly comprehensive work is edited by one of the world's leading experts in X-ray imaging?physics and technology and has been created with guidance from a Scientific Board containing respected and renowned scientists from around the world. The book's scope includes 2D and 3D X-ray imaging techniques from soft-X-ray to megavoltage energies, including computed tomography, fluoroscopy, dental imaging and small animal imaging, with several chapters dedicated to breast imaging techniques. 2D and 3D industrial imaging is incorporated, including imaging of artworks. Specific attention is dedicated to techniques of phase contrast X-ray imaging. The approach undertaken is one that illustrates the theory as well as the techniques and the devices routinely used in the various fields. Computational aspects are fully covered, including 3D reconstruction algorithms, hard/software phantoms, and computer-aided diagnosis. Theories of image quality are fully illustrated. Historical, radioprotection, radiation dosimetry, quality assurance and educational aspects are also covered. This handbook will be suitable for a very broad audience, including graduate students in medical physics and biomedical engineering; medical physics residents; radiographers; physicists and engineers in the field of imaging and non-destructive industrial testing using X-rays; and scientists interested in understanding and using X-ray imaging techniques. The handbook's editor, Dr. Paolo Russo, has over 30 years' experience in the academic teaching of medical physics and X-ray imaging research. He has authored several book chapters in the field of X-ray imaging, is Editor-in-Chief of an international scientific journal*

*In medical physics, and has responsibilities in the publication committees of international scientific organizations in medical physics.*

*Webb's Physics of Medical Imaging, Second Edition*

*X-Ray Imaging*

*Chest Imaging*

*Anticipating and Assessing Health Care Technology*

*Government reports annual index*

*Biomedical Images and Computers*

This publication is aimed at students and teachers involved in programmes that train medical physicists for work in diagnostic radiology. It provides, in the form of a syllabus, a comprehensive overview of the basic medical physics knowledge required for the practice of modern diagnostic radiology. This makes it particularly useful for graduate students and residents in medical physics programmes. The material presented in the publication has been endorsed by the major international clinical courses in both diagnostic radiology physics and in emerging areas such as imaging in radiotherapy.

This cross-disciplinary book documents the key research challenges in the mathematical sciences and physics that could enable the economical development of novel biomedical imaging devices. It is hoped that the infusion of new insights from mathematical scientists and physicists will accelerate progress in imaging. Incorporating input from dozens of biomedical researchers who described what they perceived as key open problems of imaging that are amenable to attack by mathematicians of biomedical imaging, especially the imaging of dynamic physiological functions, to the educated nonspecialist. Ten imaging modalities are covered, from the well-established (e.g. CAT scanning, MRI) to the more speculative (e.g., electrical and magnetic source imaging). For each modality, mathematics and physics research challenges are identified and a short list of suggested reading offered. Two additional chapters offer visions of the next generation of surgical and interventional imaging.

overview of mathematical issues that cut across the various modalities. Standard radiography of the chest remains one of the most widely used imaging modalities but it can be difficult to interpret. The possibility of producing cross-sectional, reformatted 2D and 3D images with CT makes this technique an ideal tool for reinterpreting standard radiography of the chest. The aim of this book is to provide a comprehensive overview of chest radiography interpretation by means of a side-by-side comparison between chest radiographs and CT images. Introductory chapters cover the basic physics of chest radiography and CT. The book is complemented by online extra material which provides many further educational examples.

Passenger screening at commercial airports in the United States has gone through significant changes since the events of September 11, 2001. In response to increased concern over terrorist attacks on aircrafts, the Transportation Security Administration (TSA) has deployed security systems of advanced imaging technology (AIT) to screen passengers at airports. To date (December 2014), TSA has deployed AITs in U.S. airports of two different technologies that use different types of radiation. The first type of AIT is backscatter AITs. The second type is dual-energy AITs. The first type of AITs is backscatter AIT systems. X-ray backscatter AITs were deployed in U.S. airports in 2008 and subsequently removed from all airports by June 2013 due to privacy concerns. TSA is looking to deploy a second-generation X-ray backscatter AIT equipped with privacy software to eliminate production of an image of the person being screened in order to alleviate these concerns. This report reviews previous studies as well as current processes used by the Department of Homeland Security to evaluate the effectiveness of X-ray backscatter AIT systems.

Resulting from backscatter X-ray advanced imaging technology system use in screening air travelers, Airport Passenger Screening Using Backscatter X-Ray Machines examines whether exposures comply with applicable health and safety standards for public and occupational exposures to ionizing radiation and whether system design, operating procedures, and maintenance procedures are appropriate to prevent over exposures of travelers and operators to ionizing radiation. This study also examines whether the use of X-ray backscatter AITs raised by Congress, individuals within the scientific community, and others.

Medical Imaging Physics for the First FRCR Examination

Medical Imaging Systems

Medical Imaging in the Twentieth Century

The World Book Encyclopedia

Evaluation of the IGE Digital Radiology System

*Presents a history of such technology as X-rays, computerized tomography, magnetic resonance imaging, and ultrasound, and shows the effects of their use in literature, art, movies, and legal cases*

*Image registration is the process of systematically placing separate images in a common frame of reference so that the information they contain can be optimally integrated or compared. This is becoming the central tool for image analysis, understanding, and visualization in both medical and scientific applications. Medical Image Registration provid*

*Ideal for residents, practicing radiologists, and fellows alike, this updated reference offers easy-to-understand guidance on how to approach musculoskeletal MRI and recognize abnormalities. Concise, to-the-point text covers MRI for the entire musculoskeletal system, presented in a highly templated format. Thoroughly revised and enhanced with full-color artwork throughout, this resource provides just the information you need to perform and interpret quality musculoskeletal MRI. Includes the latest protocols, practical advice, tips, and pearls for diagnosing conditions impacting the temporomandibular joint, shoulder, elbow, wrist/hand, spine, hips and pelvis, knee, and foot and ankle. Follows a quick-reference format throughout, beginning with basic technical information on how to obtain a quality examination, followed by a discussion of the normal appearance and the abnormal appearance for each small unit that composes a joint. Depicts both normal and abnormal anatomy, as well as disease progression, through more than 600 detailed, high-quality images, most of which are new to this edition. Features key information boxes throughout for a quick review of pertinent material.*

*Established as a classic for 40 years, this text is now in its thoroughly updated Seventh Edition—with 12 new contributing authors, hundreds of new illustrations, and completely rewritten chapters on the brain and spinal cord, obstetric and gynecologic imaging, the face, mouth, and jaws, and the chest. Three new chapters cover chest disease in the immunocompromised patient; inflammatory and immunologic disease of the lung; and chest trauma, the postoperative chest, and the ICU patient.*

*Fundamentals of X-ray*

*The Unofficial Guide to Radiology*

*Portable Versus Fixed X-ray Equipment*

*Diseases of the Chest, Breast, Heart and Vessels 2019-2022*

*Image production & evaluation*

*Musculoskeletal MRI E-Book*

*Presents a collection of jokes for young readers, including one liners, knock knock jokes, and tongue twisters.*

Portable X-ray has been an useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the number of chest X-rays showing new findings or changes to known findings divided by the total number of chest X-rays) for patients admitted to the intensive care unit has been reported to be 84.5%. Mobile radiography service is a useful tool for the diagnosis and monitoring of patients in the intensive care units, in nursing homes, in prisons, or in shelters for the homeless, where transfer to the hospital radiology department may be an obstacle. The diagnostic efficacy of portable chest X-ray - or bedside chest X-ray - (defined as the