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Chest X-rays before surgery

When you need them—and when you don't

If you're scheduled for surgery, a pre-operative chest X-ray can sometimes help make it safer by identifying medical problems that might make it a good idea to delay or even cancel the procedure. But if you don't have signs or symptoms of heart or lung disease, you should think twice about having the X-ray. Here's why.

The test usually isn't helpful for low-risk people without symptoms.

Many people automatically receive a chest X-ray to “clear” them before surgery, and some hospitals even require the test for almost all patients who are admitted. But serious abnormalities found through chest X-rays are uncommon in low-risk people, so most of the time all that's needed is a careful medical history and physical examination. A chest X-ray doesn't add much useful information for people without risk factors for heart or lung problems and rarely changes their treatment or helps the anesthesiologist and surgeon manage their care. In fact, in those people the test can produce false alarms that require follow-up tests that usually aren't necessary and can add needless risk and expense.



It can pose risks.

A chest X-ray exposes you to a small amount of radiation. While the risk from any single exposure is uncertain, the harmful effects of radiation might be cumulative, so it's best to avoid exposure whenever you can. Also, most abnormal test results from the X-ray must be followed up with additional tests to rule out a serious prob-

lem. That can cause anxiety, trigger other tests, and prompt referrals to specialists for expensive consultations.

It can be a waste of money.

Chest X-rays aren't very expensive, usually only about \$44 according to HealthcareBlueBook.com. But any money spent on tests you don't need is money wasted. And if it's ordered solely because you're having surgery or being hospitalized, your insurance plan might not cover it.

So when is the test necessary?

A pre-operative or hospital admission chest X-ray makes sense if you have lung or heart disease or have signs or symptoms of a heart or lung condition. Those include chest pain, coughing, shortness of breath, ankle swelling, fever, recent heart attack, or an unresolved cold or other respiratory infection. You should also get the test if you're older than 70 and haven't had a chest X-ray within the past six months or have a chronic heart or lung disease, even if it's not causing symptoms. The test is also often a good idea if you're scheduled for surgery that will involve the heart, lungs, or part of the chest.

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Consumer Reports' Advice

How should you prepare for surgery?

- **Get medical clearance.** Your doctor or the hospital's pre-operative evaluation team will examine you and review your medical history. Make sure they provide a specific medical reason for any pre-op test. Bring a list of all the drugs, vitamins, and herbal supplements you take, including doses and instructions.

- **Quit smoking, at least temporarily.** The earlier you quit, the less likely you are to experience complications. It's especially important not to smoke on the day of your operation. If you need help stopping, ask about a nicotine patch.

- **Consider banking your blood.** That can eliminate the slight risk of infection and reaction if you need a transfusion.

- **Ask about OTC pain relievers.** Ibuprofen (Advil, Motrin, and generic) and naproxen (Aleve and generic) can cause excess surgical bleeding, so stick with acetaminophen (Tylenol and generic). Ask your doctor about whether you should stop aspirin or any other blood thinners.

- **Line up post-surgery help.** Have someone drive you to and from the hospital and stay overnight if necessary. Find out about nursing or rehab care, too.

- **Pack a bag.** Don't bring valuables, but do bring insurance cards; storage containers for dentures, contact lenses, and glasses; and a few comforting items, such as a music player and headphones, photos, and a favorite robe or pillow.

