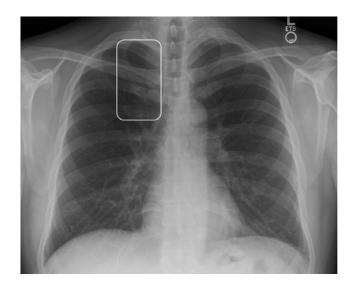
Criteria for classifying radiographic extent of disease in tuberculosis. Adapted from Diagnostic standards and classification of tuberculosis, National Tuberculosis Association, 1940

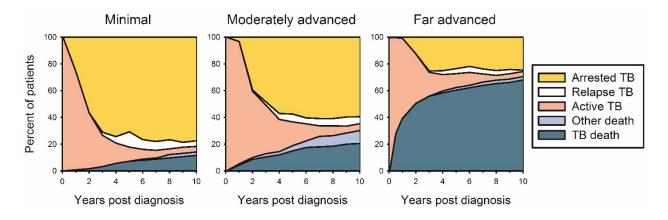
Slight to moderate density lesions	see note 1 below		
total volume	between note 1 and 1 lung		
	>1 lung		
Dense or confluent lesions	0		
total volume	between 0 and 1/3 lung		
	>1/3 lung		
Cavity total diameter	0 cm		
(see note 3 below)	between 0 and 4 cm		
	≥4 cm		
Overall extent of disease	minimal		
	moderately advanced		
	far advanced		

Notes:

- 1. To qualify as minimal disease, lesions must be of slight to moderate density only, and must occupy no more than the volume defined by the 2nd chondrosternal junction and the spine of the fourth or the body of the fifth thoracic vertebra on one side (see below)
- 2. Please note that although total volume may be compared to that of 1 lung, it may be distributed across both lungs
- 3. If conventional full size films are used, total cavity diameter may be measured directly. For other image types, a scaling factor may be applied if one is provided. Otherwise, the width of the anterior portion of the 3rd or 4th rib may be used to approximate 1 cm.
- 4. All checks must be in white for minimal disease
- 5. Any checks in black result in far advanced disease
- 6. Everything else is moderately advanced disease



Natural history of pulmonary tuberculosis in the pre-chemotherapy era, according to radiographic extent of disease at diagnosis. From Alling DW and Bosworth EB. The after-history of pulmonary tuberculosis. ARRD 81:839-849, 1960.



To be classified as "arrested TB", constitutional symptoms must be absent, sputum if any, must be ... microscopically negative for tubercle bacilli, lesions stationary and apparently healed according to X-ray examination with no evidence of pulmonary cavity. These conditions shall have existed for a period of six months, during the last two of which the patient has been taking one hour's walking exercise twice daily or its equivalent. From Diagnostic standards and classification of tuberculosis, National Tuberculosis Association, 1940.

RS Wallis 2 Apr 2018