When you need a CT scan to check for a blood clot in your lungs

When you came into the emergency department (ED), you had symptoms that prompted your doctor to check for a **pulmonary embolism**. That’s a blood clot in your lungs. If you have one, you need help right away.

**If you have a blot clot in your lungs, you may have:**
- Chest pain that gets worse when you take deep breaths
- Shortness of breath
- Swollen legs

You may also cough up blood.

**You are more likely to have a blood clot in your lungs if you:**
- Are over age 50
- Use birth control that contains hormones

You are also more likely to have a blood clot if you:
- A fast heartbeat
- Been injured or had surgery in the last four weeks
- Had blood clots before
- Signs of heart strain (Your doctor can check for this with a simple, painless test called an EKG.)

If you have **most** of these signs and risk factors, you may have a blood clot in your lungs. In that case, it may be wise to have a CT scan.

If you have just **some** of these signs and risk factors, or your doctor thinks you are unlikely to have a blood clot, the doctor may order a **D-dimer**. This blood test looks for signs that your body is trying to dissolve a blood clot.

You may need a CT scan if the D-dimer shows that you may have a blood clot. You may also need one if your doctor is concerned about any of your test results. But it may not be the first test you should have.

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**The danger of too many CT scans**

When they’re needed, CT scans are very helpful. And the risk from a single scan is very small.

But CT scans expose you to a strong dose of radiation. In some cases, it’s the same as having about 200 chest X-rays. Your body can often repair the damage CT scans cause to your tissue—but not always. And when it doesn’t, the damage could lead to cancer. The more times you’re exposed, the greater your risk of cancer.