

# General X-Ray



## Comments

ALL lateral views of the chest and spine should be oriented with the anterior aspect of the patient on the left of the image in PACS (See Fig. A and Fig. B)

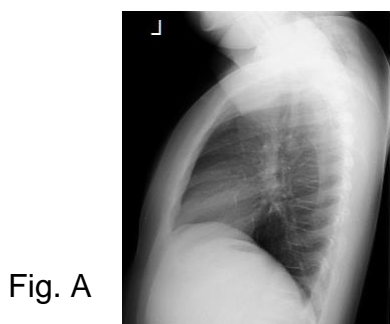


Fig. A

YES



NO



Fig. B

YES



NO

## Abdomen

Abdomen	Upright/KUB
KUB	AP KUB
Foreign Body	AP Mouth to Pubic Symphysis

## Chest

Chest	PA/Lateral
Ribs	PA (or AP, depending on location of pain)/Oblique (BB marker on focal pain) *Document detailed history for all rib exams*
Sternum	RAO/Lateral
SC Joints	PA/Oblique to side of interest

## Extremities

Shoulder	Neutral/Grashey/Y-View
AC Joints	AP with Weights/AP without Weights
Humerus	AP/Lateral
Scapula	AP/Y-View

**\*\*These are routine adult protocols. If order requests specific views, perform the exam as ordered.\*\***

**\*\*\*Adapt protocols accordingly per patient.\*\*\***

Reviewed by Dr. Steinberg 10/2018

# General X-Ray



## Extremities-cont.

Clavicle	AP/AP Axial
Forearm	AP/Lateral
Elbow	AP/External Oblique/Lateral
Wrist-Routine	PA/Oblique/Lateral
Wrist-4 View	PA/Oblique/Lateral/Scaphoid View, preferably in the PA position with 15-30° ulnar deviation *For patients ≥ 11 y/o with wrist trauma or non-traumatic pain in the scaphoid or radial styloid area*
Hand	PA/Oblique/Fan Lateral
Finger	PA/Oblique/Lateral
Pelvis	AP *For all patients ≥ 16 y/o*
Pediatric Pelvis	AP Pelvis and Bilat Frog Leg Pelvis *Include bilat hips on both views for all patients ≤ 15 y/o*
Hip	AP/Frog Leg Lateral *For all patients ≥ 16 y/o*
Pediatric Hip	AP Pelvis and Bilat Frog Leg Pelvis *Include bilat hips on both views for all patients ≤ 15 y/o*
Femur	AP/Lateral
Knee	AP/Lateral/Rosenberg/Sunrise (first 3 views performed standing)
Tib/Fib	AP/Lateral
Ankle	AP/Oblique/Lateral
Foot	AP/Oblique/Lateral
Toe	AP/Oblique/Lateral
Calcaneus	Tangential/Lateral

## Head Work

Skull	PA/Townes/Both Laterals
Sinuses	Caldwell/Waters/Lateral
Nasal Bones	Waters/Both Laterals
Facial Bones	Waters/Caldwell/Lateral
Mandible	Townes/PA/Both Lateral Obliques

**\*\*These are routine adult protocols. If order requests specific views, perform the exam as ordered.\*\***

**\*\*\*Adapt protocols accordingly per patient.\*\*\***

Reviewed by Dr. Steinberg 9/2023

# General X-Ray



## Head Work-cont.

TMJ	Townes/AP/Bilat Laterals (Open and Closed Mouth)
Foreign Body	Caldwell/Waters/Lateral
Orbits	PA/Waters/Bilat Rhese
Shunt	PA Skull/Lateral Skull/AP Chest/AP Abdomen

## Spine

Cervical Spine	AP/Odontoid/Lateral, Swimmers if needed
Thoracic Spine	AP/Lateral/Swimmers
Lumber Spine	AP/Lateral/L5-S1 Spot
Sacrum/Coccyx	AP Sacrum/AP Coccyx/Lateral
SI Joints	AP Axial/Bilat Obliques
Scoliosis	Spine from C4 through Pelvis (PA for Females and AP for Males)/ Lateral Spine from C4 through Pelvis Need entire pelvis, do not cone If not able to image in 1 exposure, images need to be stitched together

## Bone Survey

Chest	PA
Skull	AP/Lateral
C-Spine	AP/Lateral
T-Spine	AP/Lateral
L-Spine	AP/Lateral
Pelvis	AP
Humerus	Bilateral AP
Forearm	Bilateral AP
Femur	Bilateral AP
Tib/Fib	Bilateral AP

## Bone Age

Left Hand/Wrist	PA (Annotate Gender and DOB on image)
-----------------	---------------------------------------

**\*\*These are routine adult protocols. If order requests specific views, perform the exam as ordered.\*\***

**\*\*\*Adapt protocols accordingly per patient.\*\*\***

Reviewed by Dr. Steinberg 12/2020

# General X-Ray



## IVP

Scout

Show radiologist.

Inject 100cc IV contrast.

Immediate AP

5 minute Bilateral Obliques

10 minute AP

Show radiologist.

Post Void AP

**\*\*Ask radiologist before exam.\*\***

## Pediatric Bone Survey (Abuse and/or Trauma)

Chest	AP
Ribs	Bilateral Oblique
Skull	AP/Lateral
C-Spine	Lateral
T-Spine	AP/Lateral
L-Spine	AP/Lateral
Upper Extremities	Bilateral AP
Pelvis	AP
Elbows	Bilateral AP
Wrists	Bilateral PA
Hands	Bilateral PA
Lower Extremities	Bilateral AP
Knees	Bilateral AP
Ankles	Bilateral AP/Lateral
Feet	Bilateral AP

**\*\*These are routine protocols. If order requests specific views, perform the exam as ordered.\*\***

Reviewed by Dr. Steinberg 6/2017

\*Subject to change at the discretion of the radiologist due to clinical circumstances.\*

# General X-Ray



## Pediatric Bone Survey (Other than Abuse/Trauma)

Chest	AP
Skull	AP/Lateral
C-Spine	Lateral
T-Spine	Lateral
L-Spine	Lateral
Pelvis	AP
Humerus	Bilateral AP
Forearm	Bilateral AP
Hand	Bilateral PA
Femur	Bilateral AP
Tib/Fib	Bilateral AP
Feet	Bilateral AP

## G-Tube Contrast Check

Correct Imaging Order – XR Abdomen 1 View (IMG154)  
Contrast – Omnipaque 300 mg/mL or equivalent water-soluble contrast

### Adult Patient

- AP Supine KUB Scout
- Inject 30 mL Omnipaque 300 mg/mL or equivalent water-soluble contrast
- Immediate AP
- 10-minute AP & Lateral

### Pediatric Patient

- AP Supine KUB Scout
- Inject 15 mL Omnipaque 300 mg/mL or equivalent water-soluble contrast
- Immediate AP
- 10-minute AP & Lateral

Annotate all images (i.e. Scout, Immediate, 10-minute)

Tech notes must include patient's room number, time contrast administered, and the amount of contrast administered

**\*\*These are routine protocols. If order requests specific views, perform the exam as ordered.\*\***

Reviewed by Drs. King/Becker/Steinberg 1/2025

\*Subject to change at the discretion of the radiologist due to clinical circumstances.\*