

RADIOGRAPHY PROTOCOLS

SKULL / FACIAL BONES

- NO Digital markers are to be used; lead markers only - out of the area of interest
- All external metal/radiopaque objects must be removed from the area of interest

ANATOMY	VIEWS	POSITIONING / Notes
Skull	AP	
	Townes	CR caudal angle 30° to OML
	Lateral - 2 Views	BOTH lateral views
	Waters	Hyper-extend neck. OML 37° to IR
Facial Bones	Townes	CR caudal angle 30° to OML
	Waters	
	Lateral	
	SMV (Kelly's)	Hyper-extend neck. CR perpendicular to IOML
Sinuses	PA	
	Waters	Hyper-extend neck. OML 37° to IR
	Lateral	
Nasal Bones	PA	
	Waters	Hyper-extend neck. OML 37° to IR
	Lateral - 2 Views	
Mandible	AP	
	Townes	CR caudal angle 30° to OML
	Bilateral Obliques	CR 25° cephalad
Orbits	AP	
	Waters	Hyper-extend neck. OML 37° to IR
	Lateral	
	Bilateral Rheese	Rotate mid-sagittal plane 53° from IR. Cheek, nose and chin in contact with IR <i>If optic foramen is in rim of orbit, pt is positioned too lateral. If optic foramen is in center of orbit pt is positioned too PA</i>

Pediatrics - Patients age 14 and younger

- Comparison views on all extremities
- Shield gonads in all cases, except when shield covers specific part to be examined radiographically