

RADIOGRAPHY PROTOCOLS

UPPER EXTREMITY

- 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
Finger	PA	Coned to digit
	PA Oblique	
	Lateral	
Hand	PA	
	PA Oblique	External oblique
	Lateral	Separate fingers to prevent overlap. Fan lateral
Wrist	PA PA Oblique Lateral	Coned to wrist
	Navicular View	Ulnar deviation CR angled 15° cephalad
Forearm	AP Lateral	Include both joints on one image
Elbow	AP AP EXTERNAL Oblique Lateral	If unable to extend/rotate for external oblique, use Coyle Method to image the radial head
Humerus	AP	With elbow flexed
	Lateral	Include both joints. May use 2 films per projection <i>if necessary</i>
Shoulder	AP Internal	Internal rotation
	AP External	External rotation
	Axillary	
	** Y View	If axillary view not possible. Rotate patient, mid-coronal plane 45° - 60° to IR
Scapula	AP	
	Y View - Lateral	Rotate patient, mid-coronal plane 45° - 60° to IR
AC Joints	Bilateral	2 Views - With and without weights. Both joints on one film per projection
Clavicle	AP	
	Axial/Angle	Angle CR 20-25° cephalad

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