

EXTREMITIES – IMPROVE YOUR R RADIOGRAPHS

- **UPPER EXTREMITY** – NO TUBE TILTS.
- ALL EXTREMITIES – 40” SID.
- PELVIS – exam – only view not requiring gonadal shielding!
- **LOWER EXTREMITY VIEWS** – all can be improved by having patient internal rotate their leg ~5 degrees (pigeon toe position)
- **ALL EXTREMITY VIEWS** – NEED R/L MARKERS!
- The examples provided all require collimation – only for illustrative purposes.
- **CENTRAL RAY** – MOST IMPORTANT!

LOWER EXTREMITY

- Knee – AP view -5 degree cephalad
- - Lateral view – 10 degrees cephalad

SHOULDER EXAM – IR, ER VIEWS



CR -all views -coracoid process!

ELBOW EXAM – AP, LATERAL



CR – thru elbow joint.

WRIST EXAM



CR- between
radial & ulnar
styloid process.

HAND EXAM – PA, OBLIQUE & LATERAL



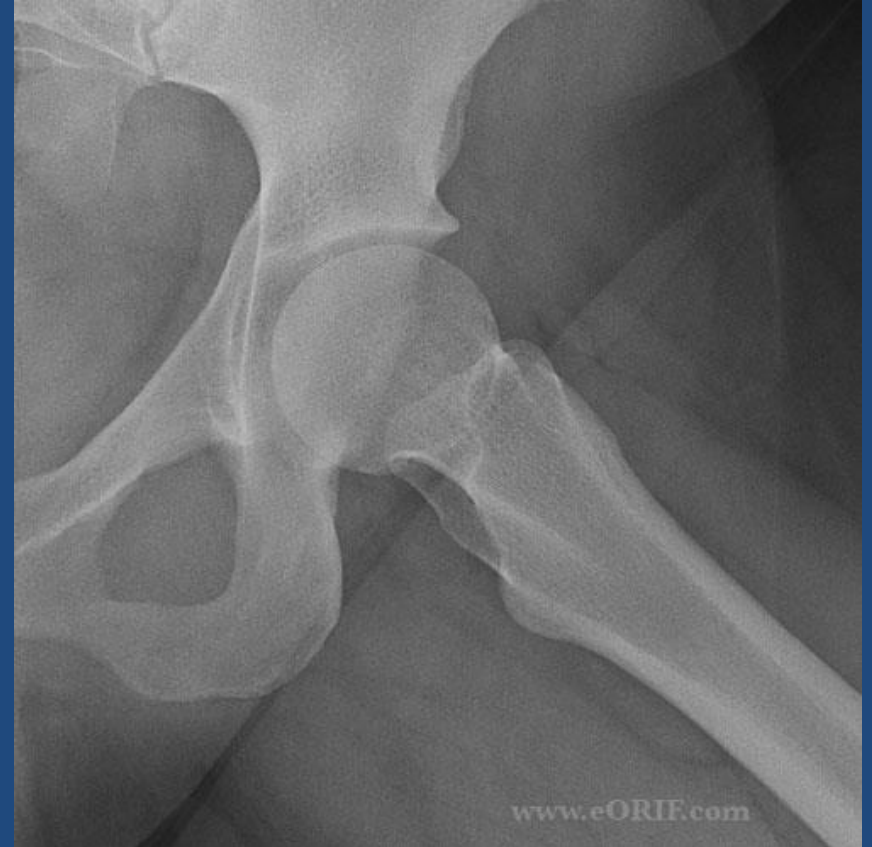
CENTRAL RAY: HEAD OF 3RD. METACARPAL

PELVIS EXAM



Place cassette 1" above iliac crests.

HIP EXAM

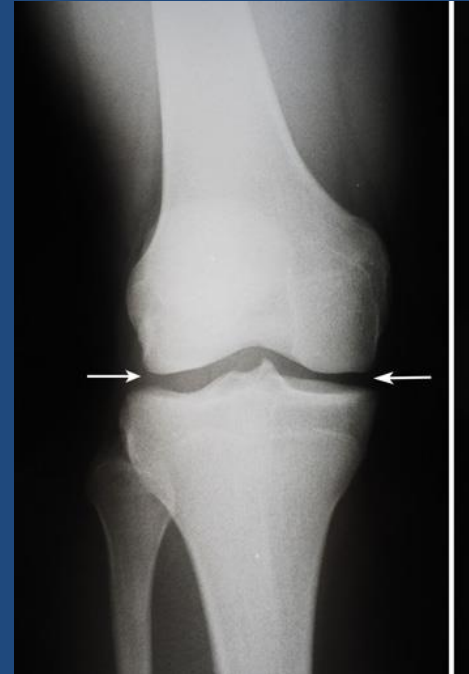


CR: thru inguinal crease!

KNEE EXAM: AP, LATERAL VIEWS



LATERAL VIEW – CR- 1" distal to apex of patella. 10 degree cephalad tilt. Flex leg!



AP view CR- 1" distal to apex of patella. 5 degree cephalad tilt.

KNEE- SKYLINE VIEW



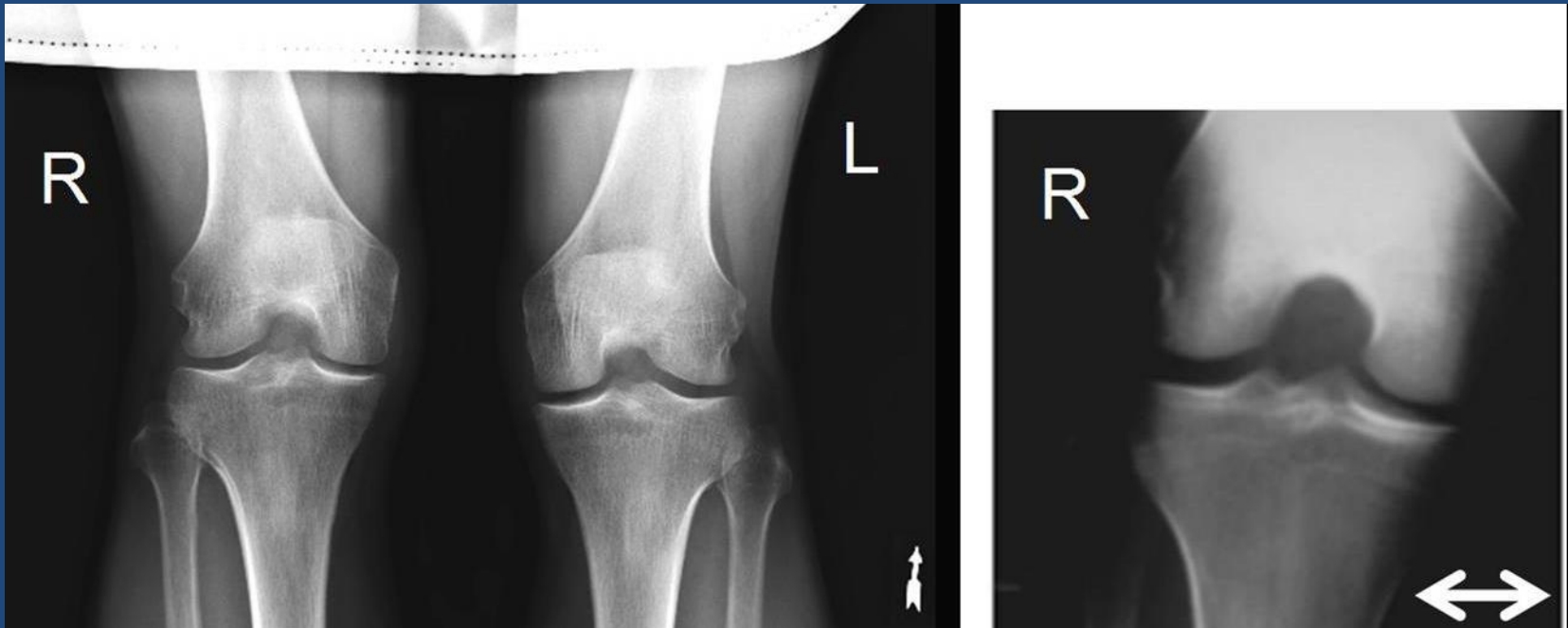
CR – same as AP & lateral views

KNEE EXAM - TUNNEL



CR – thru knee joint, patient positioning provides tube tilt.

KNEE EXAM - TUNNEL



ANKLE EXAM- AP, OBLIQUE



CR – between tibial & fibular malleolus. Toes dorsiflexed and internal rotation of limb optimally!

ANKLE- LATERAL



FOOT EXAM –AP, LATERAL



CR-base of 3rd.
MT. 5 degrees
cephalad tilt.

CR-base of 3rd.
MT. No tilt.

FOOT EXAM: LATERAL VIEW



CR: Same as AP & lateral views

