

Our Mission:

To provide reliable education, resources and tools of practice To advance your clinical expertise, business development, and professional growth.

Taking a Good X-Ray:

Step By Step:

You should have a procedure to indicate those cassette that are not exposed, from those that are exposed, e.g.

- unexposed cassettes left of the control panel,
- front forward
- exposed cassettes to the right
- backs forward.
- 4. Place the Cassettes in their designated location to indicate whether not exposed.
- 5. Decide on the speed of the Film. This is determine by the DC in advance.
- 6. Select the Cassette for the first view to be taken.
- 7. Select necessary Markers. (Mitchell Markers are best.) Unless otherwise indicated use the marker on the side without the ID Identification Block
- 8. Select all Filters and Shielding

Taking a Good X-Ray:

- 9. If female ask: "Is there any chance you are pregnant?" Ask DLMP (Date of start Last Menstrual Period) Follow the Ten Day Rule. Enter into log and if procedure, on the Flashcard.
 - > If there is a chance patient is pregnant:
 - O Notify doctor to determine urgency, if necessary use lead apron to complete studies in other areas.
 - Postpone study until pregnancy test completed within Ten Days of Last Period.
- 10. If necessary have them evacuate bladder as this could obscure anatomy.
- 11. Have patient change into gown, shorts (or both).
 - Instruct them to remove all objects (potential artifacts) that are removable.
 - o If taking cervical film this include full and partial dentures. You will receive resistance here, they must understand they may block anatomy. You can offer to have them take them our only for the views necessary and they an put them back in for the others.
- 10. Instruct as to placement of Gonad Shielding if required.

- 13. Explain the procedures and what will happen.
- 14. Further explain why you (or anyone else) will not be in the room.
- 15. Measure the patient at the thickest part of the anatomy to be imaged
- 16. Determine Techniques and log results.
- 17. Turn X Ray Machine on and confirm Processor is ready (If CR or DR disregard).
- 18. Enter Technique in the below order:
 - I. mA
 - II. kVp
 - III. Time

- 19. Set SID
- 20. Set tube and tilt if required
- 21. Place any other Filter if necessary
- 22. Place Cassette in Bucky, (If DR disregard)
- 23. Place Marker(s) in a neutral spot not over desired anatomy. On Lateral views the Marker used indicates part closest to Film/Detector.

Step By Step:

24. Set Tube crosshairs (height) center of Cassette, push Tray in if it was necessary to pull out.



- 25. Position patient. Always attempt to get the patient closest to the Bucky/Detector.
- 26. Place any Shielding or supplemental Filters necessary.
- 27. Refine positioning. Use your foot to indicate amount to move if necessary
- 28. Verify Central Ray, Markers position and Cassette positions
- 29. Collimate

- 30. Final position check
- 31. Go to control panel, instruct patient

- 32. Take exposure as quickly as possible (remember on some exposure breathing is suspended)
- 33. After each exposure place the cassette in a designated place to indicate the cassette has been exposed.
- 34. Complete other views.
- 35. If using a Conventional X Ray system follow <u>How to Process An Exposure</u> procedures previously discussed.

Study Guide

Spinal Views:

SID 84" AP Full Spine

72" All Lateral Cervical (Neutral-Flexion-Extension)

Cervical Obliques

40" All others

Cassette/Film: 14" x 36" AP Full Spine

8" x 10" All Cervical

Lumbosacral Spots

Lateral Sacrum

All Coccyx

10" x 12" Swimmers

Lumbar Obliques

AP Sacrum

14" x 17 " All others

Study Guide Spinal Views:

Cassette Orientation: Only the AP Pelvis/Bilateral Hip cassette Horizontal

All others vertical

Tube Tilt: Cephalad

15 degrees AP Cervical

Cervical Obliques

AP Sacrum

Caudal

30 to 40 degrees

10 degrees

Cervical Pillars

AP Coccyx

No Tilt All others

Instructions: "Take a deep breath in and hold" Thoracic

AP Full Spine Optional

"Deep Breath in, blow it all the way out and hold" Lumbar

"Breath out and hold" All others

Full Spine Positioning

Film Size: 14" x 36" placed in Bucky vertically (Differs from text)

SID: 84"

Tube Angle: No tilt

Patient Position: Shoulders parallel to Bucky – Arms by your side- top of film just below eyes

Option 1 - slight chin up -mouth closed

Option 2 – slight chin down – mouth opened

Depending on the option the opposite separate film should be taken

Central Ray: Centered to film approximately the Xiphoid process of Sternum

Collimation: Just below eyes and above symphysis pubis and to exclude shoulders

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Take a deep breath in and hold"

Text: Page 134

Notes: Should use wedges at the tube

Lateral Spine Full Spine view are not recommended

Should only be used if necessary. Lateral regional films are still required

If patient measures in excess of 27 cm this view should not be used

AP Full Spine



This is Allen the Alien. Remember his name.

Full Spine Views

Full Spine Studies:

Minimum Study:

- (AP) Anterior to Posterior Full Spine
- Option 1 or 2 supplemental view
- Lateral Cervical
- Lateral Thoracic
- Lateral Lumbar

Alternate Minimum Study:

- Minimum Study Cervical
- Minimum Study Thoracic
- Minimum Study Lumbar

Full Spine Positioning

/iew:	(AP)) Anterior to Posterior Full Spir	ne
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Film Size: 14" x 36" placed in Bucky vertically (Differs from text)

SID: 84"

Tube Angle: No tilt

Patient Position: Shoulders parallel to Bucky – Arms by your side- top of film just below eyes

Option 1 - slight chin up -mouth closed

Option 2 – slight chin down – mouth opened

Depending on the option the opposite separate film should be taken

Central Ray: Centered to film approximately the Xiphoid process of Sternum

Collimation: Just below eyes and above symphysis pubis and to exclude shoulders

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Take a deep breath in and hold" (don't move)

Text: Page 134

Notes: Should use wedges at the tube

Lateral Spine Full Spine view are not recommended

Should only be used if necessary. Lateral regional films are still required

If patient measures in excess of 27 cm this view should not be used

AP Full Spine



Full Spine Views

Full Spine Studies:

Minimum Study:

- (AP) Anterior to Posterior Full Spine
- Option 1 or 2 supplemental view
- Lateral Cervical
- Lateral Thoracic
- Lateral Lumbar

Alternate Minimum Study:

- Minimum Study Cervical
- Minimum Study Thoracic
- Minimum Study Lumbar

Cervical Spine Views

Cervical Studies:

Minimum Study:

(AP) Anterior to Posterior Cervical

(APOM) Anterior to Posterior Open Mouth Cervical

Lateral Cervical

In addition to Minimum Study-either or both:

Optional Routine Series Minimum:

Forward Flexion Cervical

Extension Cervical

Optional Routine Series Minimum:

Right Oblique Cervical

Left Oblique Cervical

Special Views:

Lateral Flexion (Right and Left side bending) Cervical

Rotational Cervical (Right and Left)

• Pillar: frontal

Pillar: semioblique

Verticosubmental

Cervical Spine Positioning

View: (AP) Anterior to Posterior Cervical

Film Size: 8" X 10" placed in Bucky vertically

SID: 40"

Tube Angle: 15 degrees cephalad

Patient Position: Chin slightly up

Naso-Medial (nostrils to ear canal) line parallel to floor

Central Ray: CR through apex of thyroid cartilage/prominence

(mid-cervical/Adam's Apple)

Collimation: To tissue line

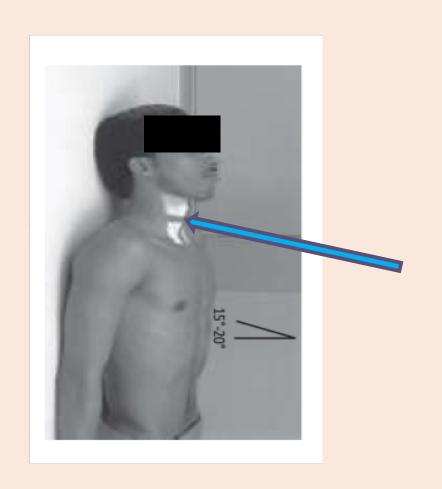
Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Breath out and hold"

Text: Page 127-128

AP Cervical





Cervical Spine Positioning

View: (APOM) Anterior to Posterior Open Mouth

Film Size: 8" X 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tube tilt

Patient Position: Front tooth lined up with base of occiput parallel to floor

Central Ray: CR through angles of the mouth

Collimation: Just below eyes

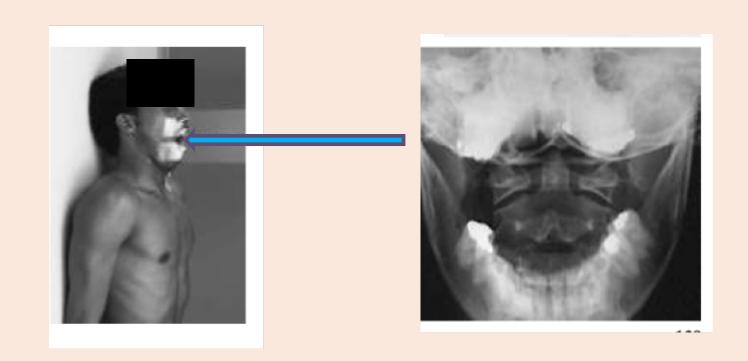
Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Breath out and hold"

Text: Page 127-128

APOM Cervical



Cervical Spine Positioning

View: **Neutral Lateral Cervical**

Film Size: 8" X 10" placed in Bucky vertically

SID: 72"

Tube Angle: No tube tilt

Patient Position: Shoulders perpendicular to film

Naso-Medial line parallel to floor

Central Ray: CR through midpoint SCM (C4 level) - Sandbags optional

Collimation: To tissue line

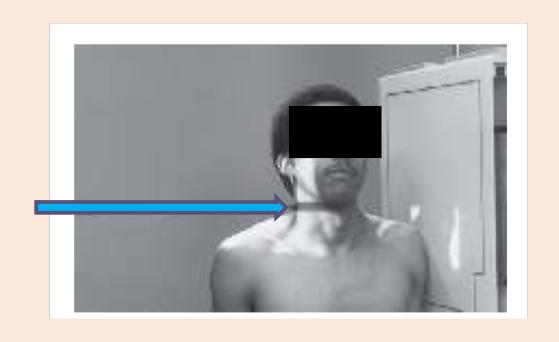
Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Breath out and hold"

Text: Page 127-128

Neutral Lateral Cervical





Cervical Spine Positioning

View: Flexion Lateral Cervical

Film Size: 8" X 10" placed in Bucky vertically

SID: 72"

Tube Angle: No tube tilt

Patient Position: Tuck chin-flex neck forward to limitation

Shoulders down

Central Ray: CR through midpoint SCM (C4 level)

Collimation: To tissue line

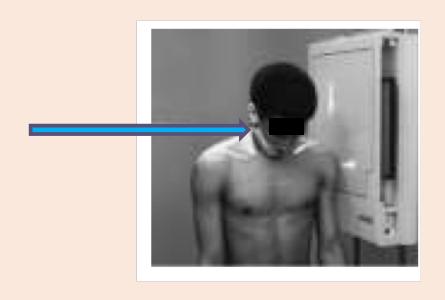
Shielding: Apron in areas outside field

Marker: R or L and FLEX

Instruction: "Breath out and hold"

Text: Page 127-128

Flexion Lateral Cervical





Cervical Spine Positioning

View: **Extension Lateral Cervical**

Film Size: 8" X 10" placed in Bucky vertically

SID: 72"

Tube Angle: No tube tilt

Patient Position: Head tilted back to limitation

Shoulders down

Central Ray: CR through midpoint SCM (C4 level)

Collimation: To tissue line

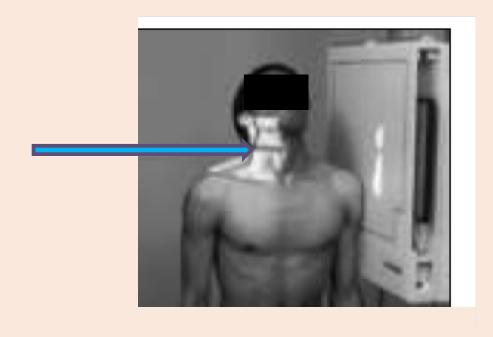
Shielding: Apron in areas outside field

Marker: R or L and EXT

Instruction: "Breath out and hold"

Text: Page 127-128

Extension Lateral Cervical





Cervical Spine Positioning

View: (RPO – LPO) Right and Left Posterior Obliques Cervical

Film Size: 8" X 10" placed in Bucky vertically

SID: 72"

Tube Angle: 15 - 20 degrees cephalad

Patient Position: Patient's shoulders 45 degrees from board

Head turned to profile

Central Ray: CR through midpoint SCM (C4 level)

Collimation: To tissue line

Shielding: Apron in areas outside field

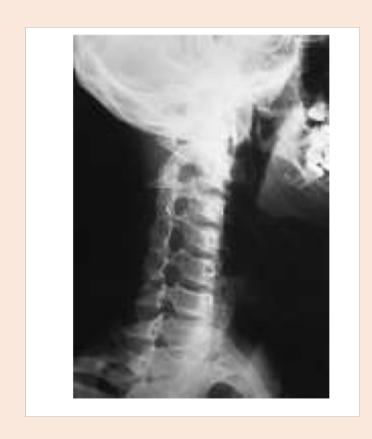
Marker: RPO – LPO

Instruction: "Breath out and hold"

Text: Page 127-129

RPO & LPO Cervical





Cervical Spine Positioning

View: Right and Left and Bilateral Pillars Cervical

Film Size: 8" X 10" placed in Bucky vertically

SID: 40"

Tube Angle: Right or Left – 30 to 40 degrees caudal

Bilateral no tilt

Patient Position: Right or Left –Back flat to Bucky

Head rotated fully R or L with slight flex

Central Ray: CR through midpoint SCM (C4 level)

Collimation: To tissue line

Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Breath out and hold"

Text: Page 129

Caution this is generally a trauma view

Thoracic Spine Views

Thoracic Studies:

Minimum Study:

- (AP) Anterior to Posterior Thoracic
- Lateral Thoracic

Special Views:

• Semioblique (Swimmers View) Thoracic

Thoracic Spine Positioning

View: Swimmers Lateral View Thoracic

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: Bilateral no tilt

Patient Position: Shoulders perpendicular to Bucky

Arm closest to Bucky up behind head

Central Ray: CR through C7-T1 interspace. Base of the neck

Collimation: To tissue line

Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Breath out and hold"

Text: This differs from text - Page 130

Swimmers Cervical





Thoracic Spine Positioning

View: (AP) Anterior to Posterior Thoracic

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Back to the Bucky

Shoulders parallel to film.

Central Ray: Top of film 2 inches above shoulder, CR to center of film (approx. T6)

Collimation: To tissue line

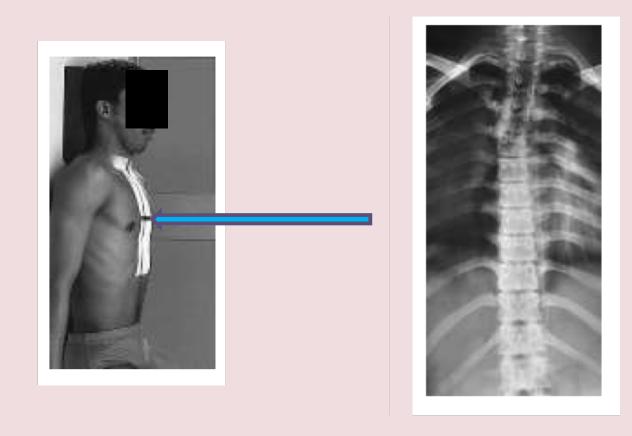
Shielding: Apron in areas outside field

Marker: R or L

Instruction: "Take a deep breath in and hold"

Text: Page 130

AP Thoracic



Thoracic Spine Positioning

View: Lateral (R or L) Thoracic

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulder perpendicular to Bucky.

Arms in prayer or up on a pole.

Apex of curve 3 inches posterior to vertical midline.

Central Ray: Top of film 2 inches above shoulder, CR to center of film (approx. T6)

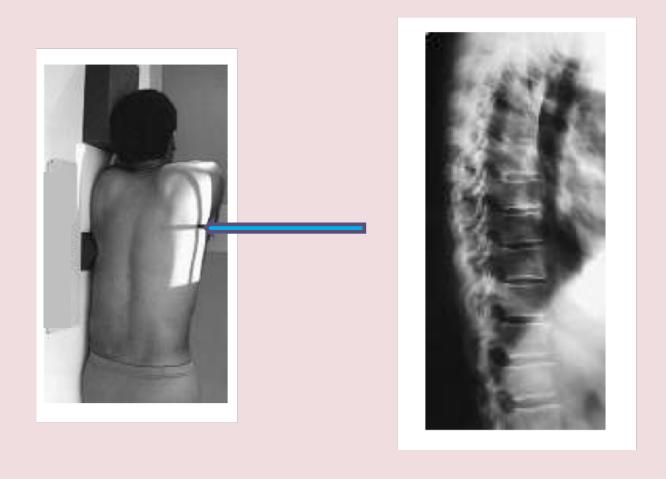
Collimation: To tissue line

Shielding: Apron in areas outside field

Marker: R or L, NEUT

Instruction: "Take a deep breath in and hold"

Lateral Thoracic



Lumbar Spine Views

Lumbar Studies:

Minimum Study:

(AP) Anterior to Posterior LumbarLateral Lumbar

In addition to Minimum Study-either or both:

Optional Routine Series Minimum:

Right Oblique LumbarLeft Oblique Lumbar

Optional Routine Series Minimum:

(AP) Anterior to Posterior Lumbosacral Spot
 Lateral Lumbosacral Spot

Special Views:

AP Lateral Flexion (Right and Left) Lumbar

• Lateral Forward Flex Lumbar

Lateral Extension Lumbar

View: (AP) Anterior to Posterior Lumbar

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Back to the Bucky

Shoulders parallel to film.

Central Ray: 1 inch below Iliac Crest

Center of film

Collimation: To tissue line

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

AP Lumbar-Lumbosacral





View: Lateral Lumbar-Lumbosacral

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulders perpendicular to film.

Arms crossed and hands on shoulders.

Apex of curve 3 inches posterior to vertical midline.

Convexity closest to film (CR into Concavity)

Central Ray: 1 inch <u>above</u> Iliac Crest

Center of film

Collimation: To tissue line

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

Lateral Lumbar-Lumbosacral



View: AP(R & L) Lateral Flexion Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: AP (R or L) Lateral Flexion Lumbar

Shoulder parallel to Bucky

Lean to marked side

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R L Flex

Instruction: "Deep Breath in, blow it all the way out and hold"

View: Lateral Forward Flexion Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: Lateral Forward Flexion Lumbar

Shoulders perpendicular to Bucky

Arms crossed

Bend forward

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R Flex

Instruction: "Deep Breath in, blow it all the way out and hold"

View: Lateral Extension Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: Lateral Extension Flexion Lumbar

Shoulders perpendicular to Bucky

Arms crossed

Bend backwards

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R Ext

Instruction: "Deep Breath in, blow it all the way out and hold"

View: (RPO – LPO) Right or Left Posterior Obliques Lumbar

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: RPO: facing tube with right side against Bucky and left side angled 20-30

degrees away from Bucky.

A point 2 inches medial to left Anterior Superior Iliac Spine (ASIS)

Should be on midline of Bucky, and patient's Spinous Processes (SP) should

be 1 inch to the left of midline of Bucky.

LPO: opposite of RPO.

Central Ray: Level with Iliac Crest - center of film

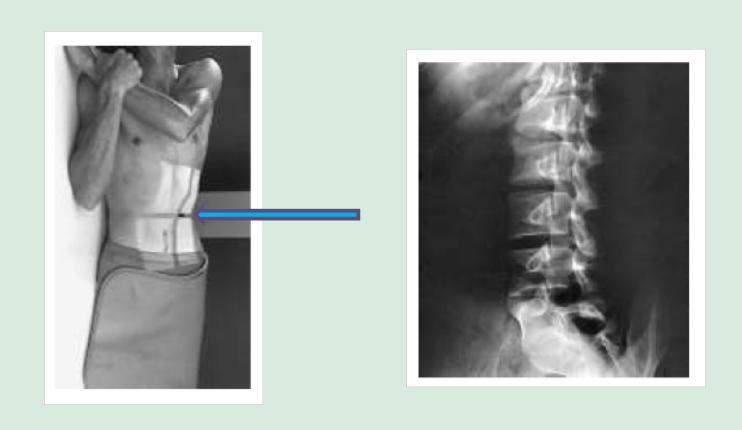
Collimation: To film size

Shielding: Gonad Shielding

Marker: RPO or LPO

Instruction: "Deep Breath in, blow it all the way out and hold"

RPO & LPO Oblique Lumbar



View: (AP L5/S1) Anterior to Posterior Lumbosacral Spot

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Low back parallel to film

Arms crossed and hands on shoulders

Central Ray: 2 inches <u>below</u> Iliac Crest

Center of film

Collimation: To film size

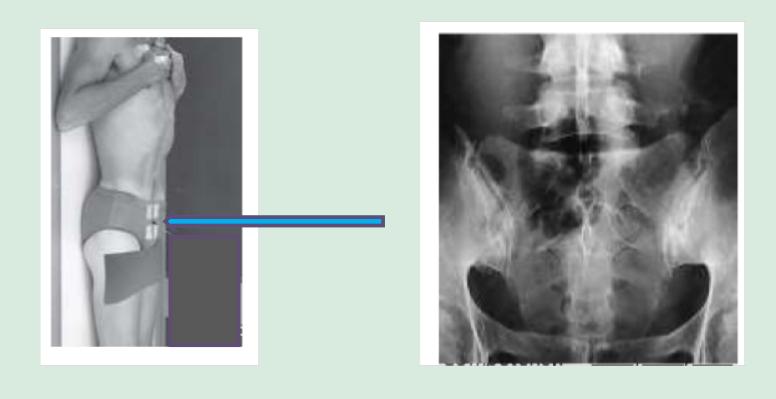
Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

Text: Page 131 Alternate procedure Page 133

AP L5 Lumbosacral Spot



View: Lateral (L5/S1) Lumbosacral Spot

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulders perpendicular to film

Arms crossed and hands on shoulders

Apex of curve 3 inches posterior to vertical midline

Central Ray: 2 inches <u>below</u> Iliac Crest

Center of film

Collimation: To film size

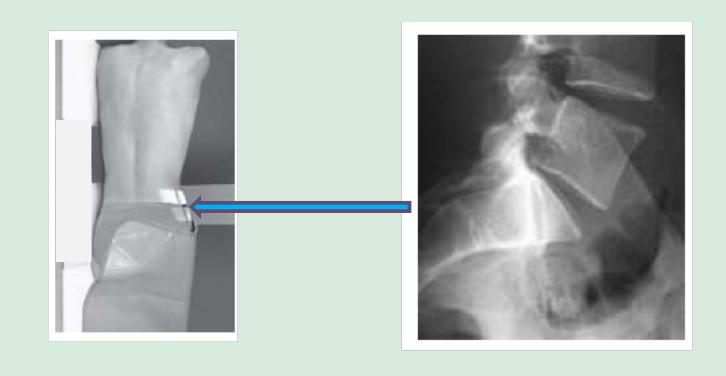
Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

Text: Page 131 Alternate procedure Page 133

Lateral L5-S1 Spot



View: (AP) Anterior to Posterior Lumbar

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Back to the Bucky. Shoulders parallel to film.

Central Ray: 1 inch <u>below</u> Iliac Crest

Center of film

Collimation: To tissue line

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

View: Lateral Lumbar-Lumbosacral

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulders perpendicular to film.

Arms crossed and hands on shoulders.

Apex of curve 3 inches posterior to vertical midline.

Convexity closest to film (CR into Concavity)

Central Ray: 1 inch <u>above</u> Iliac Crest

Center of film

Collimation: To tissue line

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

View: AP(R & L) Lateral Flexion Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: AP (R or L) Lateral Flexion Lumbar

Shoulder parallel to Bucky

Lean to marked side

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R L Flex

Instruction: "Deep Breath in, blow it all the way out and hold"

View: Lateral Forward Flexion Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: Lateral Forward Flexion Lumbar

Shoulders perpendicular to Bucky

Arms crossed

Bend forward

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R Flex

Instruction: "Deep Breath in, blow it all the way out and hold"

View: Lateral Extension Lumbar

Film Size: 14" x 17" placed in Bucky vertically (Differs from text)

SID: 40"

Tube Angle: No tilt

Patient Position: Lateral Extension Flexion Lumbar

Shoulders perpendicular to Bucky

Arms crossed

Bend backwards

Central Ray: 2 inches above crest

Collimation: To film size

Shielding: Gonad Shielding

Marker: R Ext

Instruction: "Deep Breath in, blow it all the way out and hold"

View: (RPO – LPO) Right or Left Posterior Obliques Lumbar

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: RPO: facing tube with right side against Bucky and left side angled 20-30

degrees away from Bucky.

A point 2 inches medial to left ASIS should be on midline of Bucky, and

patient's SPs should be 1 inch to the left of midline of Bucky.

LPO: opposite of RPO.

Central Ray: Level with Iliac Crest

Center of film

Collimation: To film size

Shielding: Gonad Shielding

Marker: R RPO or L LPO

Instruction: "Deep Breath in, blow it all the way out and hold"

View: (AP L5/S1) Anterior to Posterior Lumbosacral Spot

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Low back parallel to film

Arms crossed and hands on shoulders

Central Ray: 2 inches <u>below</u> Iliac Crest

Center of film

Collimation: To film size

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

Text: Page 131 Alternate procedure Page 133

View: Lateral (L5/S1) Lumbosacral Spot

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulders perpendicular to film.

Arms crossed and hands on shoulders

Apex of curve 3 inches posterior to vertical midline

Central Ray: 2 inches <u>below</u> Iliac Crest

Center of film

Collimation: To film size

Shielding: Gonad Shielding

Marker: R or L

Instruction: "Deep Breath in, blow it all the way out and hold"

Text: Page 131 Alternate procedure Page 133

Pelvis (Bilateral Hip) Views

Pelvis Studies:

Minimum Study:

• (AP) Anterior to Posterior Pelvis

Pelvis and Bilateral Hip Positioning

View: (AP) Anterior to Posterior (Pelvis) Bilateral Hip

Film Size: 14" x 17" placed in Bucky **horizontally**

SID: 40"

Tube Angle: No tilt

Patient Position: Back to the Bucky - Parallel to film

Arms crossed and hands on shoulders.

Central Ray: 1½ inches above superior margin of Symphysis Pubis

Alternate 1 to 2 inches above Iliac Crest

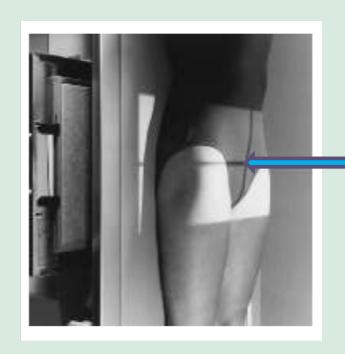
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Pelvis (Bilateral Hip)





Sacrum Views

Sacrum Studies:

Minimum Study:

- (AP) Anterior to Posterior Sacrum
- Lateral Sacrum

Sacroiliac Studies:

Minimum Study:

• Right and Left Oblique SI

In addition to minimum routine study

• (AP) Anterior to Posterior Pelvis

Sacrum Positioning

View: (AP Sacrum) Anterior to Posterior Sacrum

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: 15 degrees cephalad

Patient Position: Pelvis parallel to Bucky

Central Ray: Halfway between Symphysis Pubis and ASIS

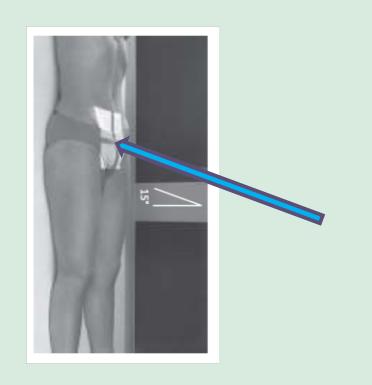
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Breath out and hold"

AP Sacrum





Sacrum Positioning

View: Lateral Sacrum

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Pelvis perpendicular to the Bucky

Central Ray: 3 inches below Iliac Crest

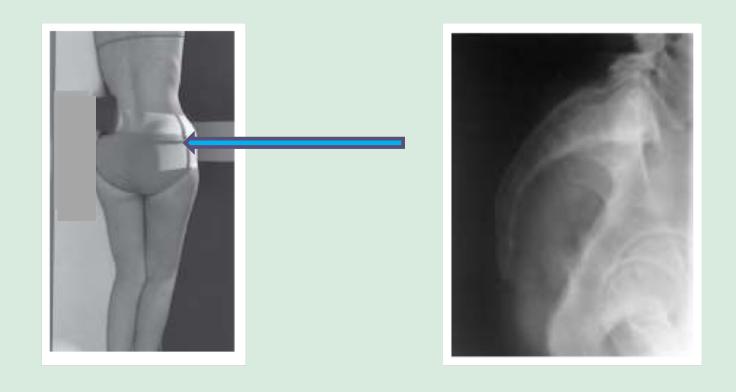
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Breath out and hold"

Lateral Sacrum



Coccyx Views

Coccyx Studies:

Minimum Study:

- (AP) Anterior to Posterior Coccyx
- Lateral Coccyx

Coccyx Positioning

View: (AP) Anterior to Posterior Coccyx

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: 10 degrees caudal

Patient Position: Pelvis parallel to Bucky

Central Ray: Approximately 2 inches superior to Symphysis Pubis

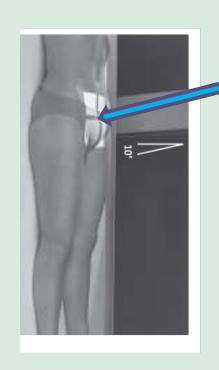
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Breath out and hold"

AP Coccyx





Coccyx Positioning

View: Lateral Coccyx

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Pelvis perpendicular to Bucky

Central Ray: 5 inches below Iliac Crest

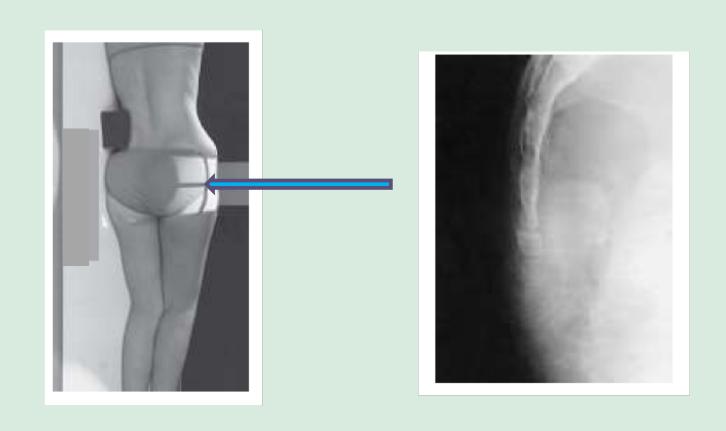
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Breath out and hold"

Lateral Coccyx



Study Guide

Upper Extremity Views:

SID 40" All

Cassette/Film:

14" x 17 " AP Forearm SPLIT

Lateral Forearm SPLIT

10" x 12" AP Shoulder

AP Elbow SPLIT Olecranon SPLIT

Lateral Wrist and Hand SPLIT

Medial Oblique Wrist and Hand SPLIT

8" x 10" Ulna Deviation SPLIT

All Digits SPLIT

All Others

Study Guide Upper Extremity Views:

Cassette Orientation: Bucky - Only Shoulder views All Vertical

No Bucky (On a Table) All Others

Tube Tilt: Caudal

45 Degrees 2 CTS Only

No Tilt All Others

Instructions: "Don't Move" All

SHOULDER:

View: (AP) Anterior to Posterior (R or L) Shoulder

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulder flat to Bucky

Palm flat to Bucky

Central Ray: Through Coracoid Process

Collimation: Include lateral aspect of clavicle

Shielding: None

Marker: R or L and NEUT

Instruction: "Do not move"

AP (R or L) Shoulder





SHOULDER:

View: (AP) Internal Rotation (R or L) Shoulder

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulder to Bucky

Arm flexed to 90 degrees

Palm flat to abdomen

Central Ray: Through Coracoid Process

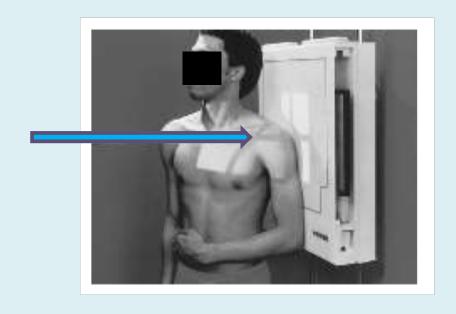
Collimation: Include lateral aspect of clavicle

Shielding: None

Marker: R or L and INT

Instruction: "Do not move"

AP (R or L) Internal Rotation Shoulder





SHOULDER:

View: (AP) External Rotation (R or L) Shoulder

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulder flat to Bucky

Arm flexed to 90 degrees

Palm out to the side

Central Ray: Through Coracoid Process

Collimation: Include lateral aspect of clavicle

Shielding: None

Marker: R or L and EXT

Instruction: "Do not move"

SHOULDER:

View: **Baby Arm Shoulder**

Film Size: 8" x 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Shoulder to Bucky

Arm **abducted** to 90 degrees and flat to Bucky

Forearm flexed to 90 degrees as flat to Bucky as possible

Palm upward

Central Ray: Through Coracoid Process

Collimation: Include lateral aspect of clavicle

Shielding: None

Marker: R or L ABD

Instruction: "Do not move"

ELBOW:

View: (AP) Anterior to Posterior Elbow

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Elbow fully extended

Palm upward

Central Ray: Center of elbow joint

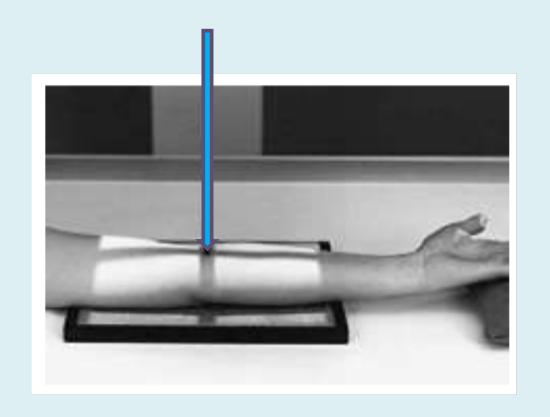
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Elbow





ELBOW:

View: Olecranon - (Jones') - (Tangential) Elbow

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Elbow fully flexed

Palm on shoulder

Central Ray: $1 \frac{1}{2}$ " - 2 " proximal to the tip of the olecranon process

Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

ELBOW:

View: Lateral Elbow

Film Size: 8" x 10" " cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Elbow flexed to 90 degrees

Thumb pointed upward

Central Ray: Center of elbow joint

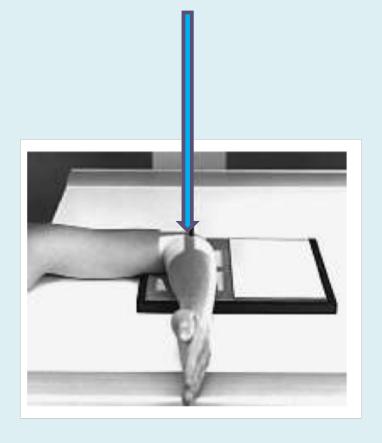
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Elbow





ELBOW:

View: Medial Oblique Elbow

Film Size: 8" x 10 " cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Elbow fully extended on cassette

Palm down

Central Ray: Center of elbow joint

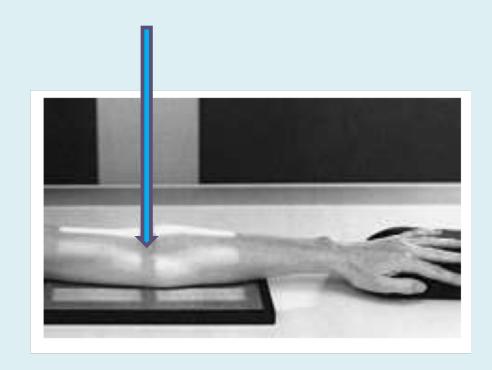
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Oblique Medial Rotation Elbow





FOREARM:

View: (AP) Anterior to Posterior Forearm

Film Size: 14" x 17" cassette on table (text advocates using half the film – If

available 7" x 14" is best)

SID: 40"

Tube Angle: No tilt

Patient Position: Arm flat to cassette palm up – include joint closest to injury

Central Ray: Center of forearm

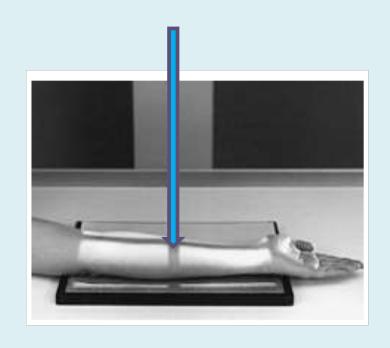
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Forearm





FOREARM:

View: Lateral Forearm

Film Size: 14" x 17" cassette on table (text advocates using half the film – If

available 7" x 14" is best)

SID: 40"

Tube Angle: No tilt

Patient Position: Lateral - Elbow flexed to 90 degrees

Thumb up - include joint closest to injury

Central Ray: Center of forearm

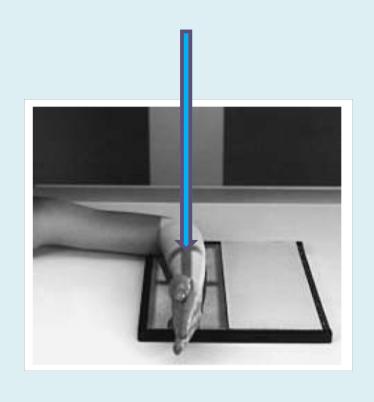
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Forearm





WRIST:

View: **(PA) Posterior to Anterior Wrist**

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Flat to cassette palm down

Fingers flex to fist

Central Ray: Center of wrist

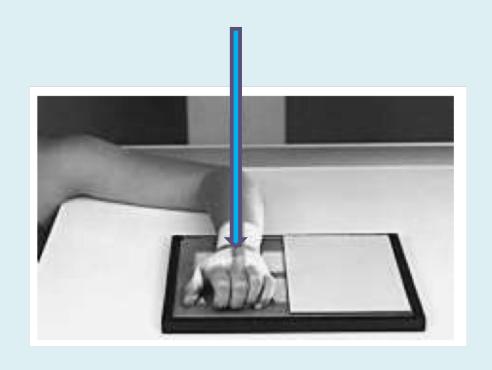
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Wrist





WRIST:

View: Lateral Wrist

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Wrist on cassette

Thumb up

Fingers flexed

Central Ray: Center of wrist

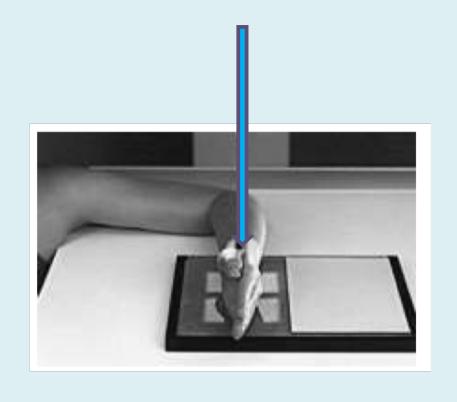
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Wrist





WRIST:

View: (PA) Posterior to Anterior Ulna Deviation Wrist

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Elbow flexed to 90 degrees

Palm flat down in ulna flexion (fingers away from midline)

Central Ray: Center of wrist

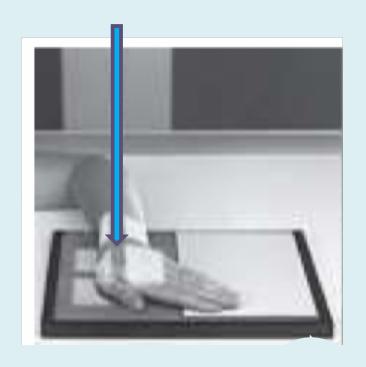
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Ulna Deviation Wrist



WRIST:

View: Medial Oblique Wrist

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Wrist partially palm down

45 degrees fingers to cassette and slightly curved

Thumb pointing upwards

Positioning foam support recommended

Central Ray: Center of wrist

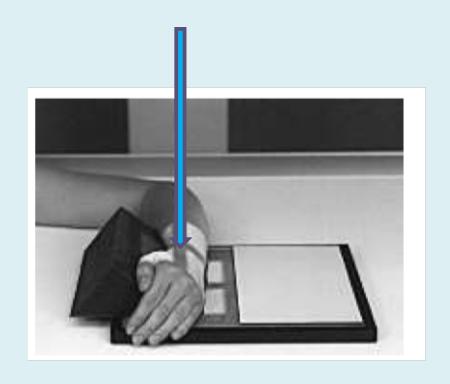
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Oblique Wrist





WRIST:

View: (AP) Anterior to Posterior Carpal Tunnel View

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: 45 degrees caudal

Patient Position: Hand flexed and held to as close to 90 degrees as possible

Wrist as flat to cassette as possible

May use a strap to stabilize

Central Ray: Through tunnel

Collimation: To just outside skin line

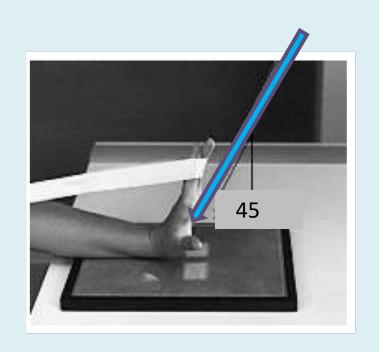
Shielding: None

Marker: R or L

Instruction: "Do not move"

Text: Page 148 Alternate view is PA

AP Carpal Tunnel Syndrome View (Tangential Wrist)





WRIST:

View: (PA) Posterior to Anterior Carpal Tunnel View

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: 45 degrees caudal

Patient Position: Hand flat on Cassette

Flex to 90 degrees or as close as possible

Central Ray: Through tunnel

Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

HAND:

View: **(PA) Posterior to Anterior Hand**

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Flat to cassette palm down

Fingers slightly spread

Central Ray: Center of distal part of 3rd metacarpal

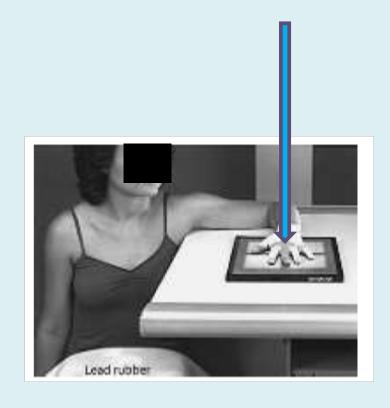
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Hand





HAND:

View: Lateral Hand

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Hand on cassette

Thumb up

Fingers extended

Central Ray: Distal metacarpals

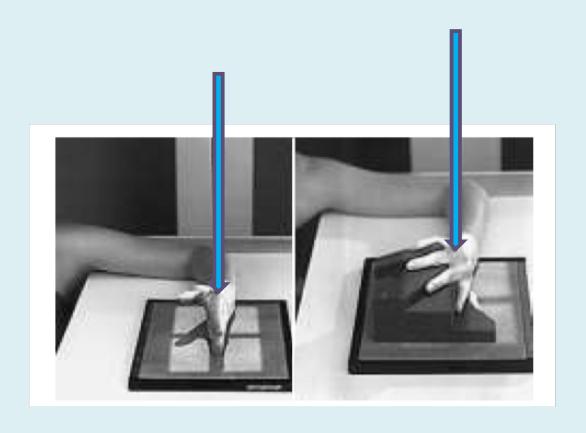
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Hand





HAND:

View: **Medial Oblique Hand**

Film Size: 10" x 12" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position Hand partially palm down

45 degrees fingers to cassette and slightly curved

Thumb slightly touching cassette

Positioning foam support recommended

Central Ray: Distal 3rd metacarpal

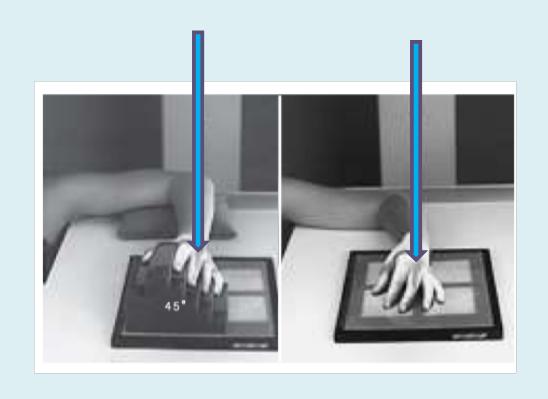
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Oblique Hand





Upper Extremity Positioning

DIGITS:

View: **(PA) Posterior to Anterior Digits**

Film Size: 8" x 10" cassette on table (text advocates using half the film)

SID: 40"

Tube Angle: No tilt

Patient Position: Isolate finger to be imaged

Central Ray: Center of digit to be imaged

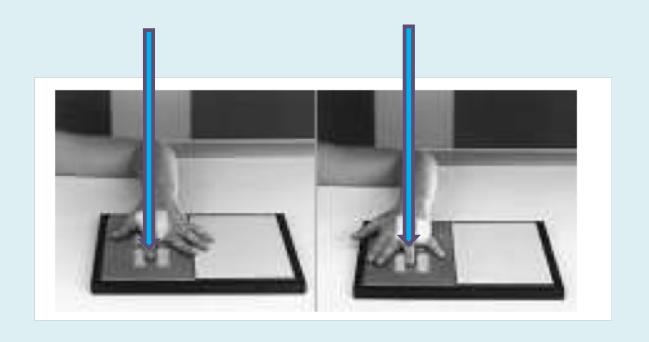
Collimation: To just outside skin line

Shielding: None

Marker: R or L

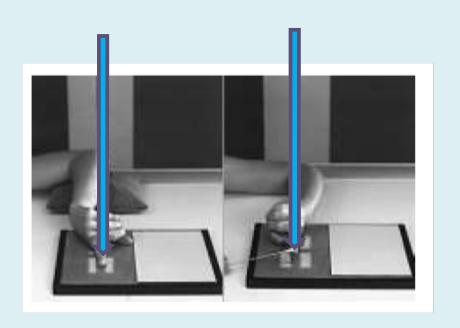
Instruction: "Do not move"

PA 2nd – 5th Digits





Lateral 2nd – 5th Digits



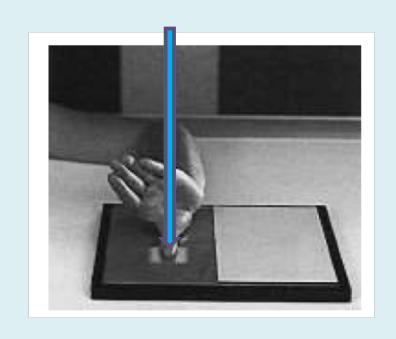


PA Oblique 2nd – 5th Digits



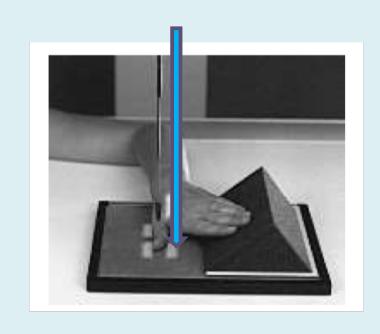


AP 1st Digits



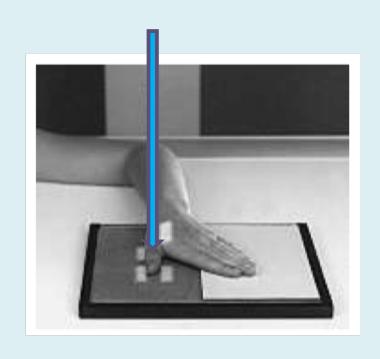


Lateral 1st Digits





PA Oblique 1st Digits





Study Guide

Lower Extremity Views:

SID 40" All

Cassette/Film: 14" x 17 " AP Bilateral Hip (HORIZONTALLY in Bucky)

AP and Lateral Leg

10" x 12" AP Ankle SPLIT

AP Foot

if too large for 8" x 10"

Medial Oblique Ankle SPLIT

Medial and Lateral Oblique Foot

if foot too large for 8" x 10"

8" x 10" All Others

Study Guide Lower Extremity Views:

Cassette Orientation: Bilateral AP Hip Horizontal

All Shoulder views use a Bucky

All Vertical

No Bucky-On a Table All Others

Tube Tilt: Cephalad

5 Degrees AP Knee

45 Degrees Sunrise Knee

5-10 Degrees AP Foot

40 Degrees Tangential Calcaneus

Caudal

45 Degrees Tunnel Knee

No Tilt All Others

Instructions: "Breath out and hold" AP Bilateral Hip

"Don't Move" All Others

Bilateral Hip:

View: (AP) Anterior to Posterior (Pelvis) Bilateral Hip

Film Size: 14" x 17" placed in Bucky **horizontally**

SID: 40"

Tube Angle: No tilt

Patient Position: Back to the Bucky - Parallel to film

Arms crossed and hands on shoulders.

Central Ray: 1½ inches above superior margin of Symphysis Pubis

Alternate 1 to 2 inches above Iliac Crest

Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP (Pelvis) Bilateral Hip





KNEE:

View: (AP) Anterior to Posterior (R or L) Knee

If unable to full extend use (PA) option

Film Size: 8" x 10" cassette on table with Bucky

(AP may be standing if Bucky and Tube go low enough)

SID: 40"

Tube Angle: 5 degree cephalad

Patient Position: Fully extended knee

PA option with foam Positioning Device

Central Ray: ½ inch below patella

Collimation: To just outside skin line

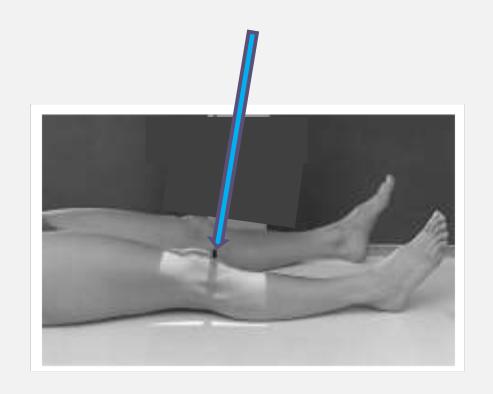
Shielding: None

Marker: R or L

Instruction: "Do not move"

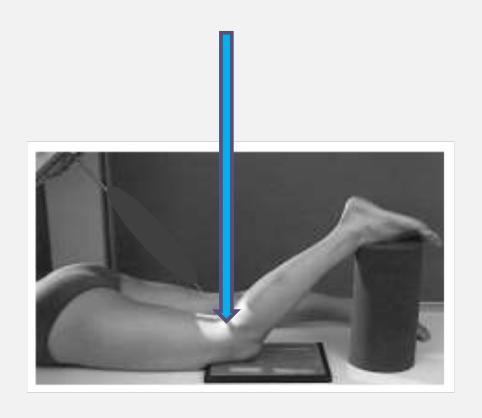
Text: Page 151 and 152

AP Knee





PA Option for Knee



KNEE:

View: Lateral (R or L) Knee

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Patient on side to be imaged

Knee at 30 degrees

Other leg back or forward depending on patient comfort

Central Ray: Center to knee joint

Collimation: To just outside skin line

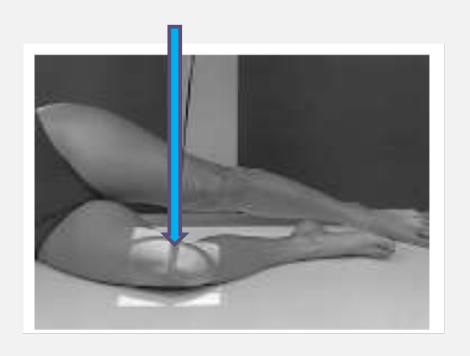
Shielding: None

Marker: R or L

Instruction: "Do not move"

Text: Page 151 and 152

Lateral (R or L) Knee





KNEE:

View: (PA) Posterior to Anterior Intercondylar or Tunnel View Knee

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: 45 degree caudal

Patient Position: Patient prone

Knee flexed to 45 degrees

Foot supported with foam Positioning Device

Central Ray: Center to knee joint

Collimation: To just outside skin line

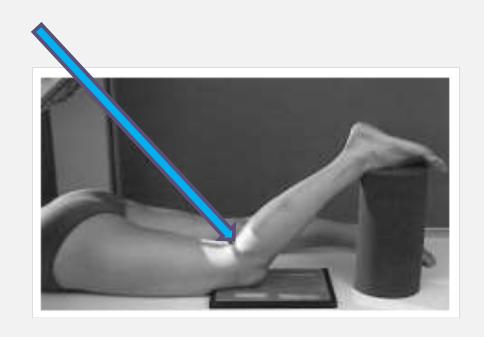
Shielding: None

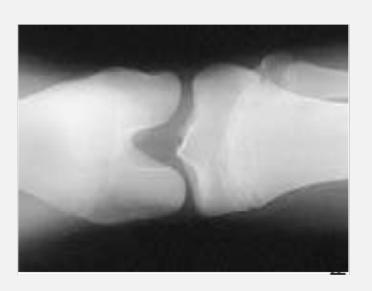
Marker: R or L

Instruction: "Do not move"

Text: Page 151 and 152

PA Axial (Intercondylar or Tunnel View) Knee





KNEE:

View: (AP) Anterior to Posterior Axial Patella (Sunrise) (Hughston Tech) Knee

Alternate Tech see page 151

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: 45 degree cephalad

Patient Position: Patient prone

Knee flexed to 60 + degrees

Leg held in flexion by belt

Central Ray: Center to patellar

Collimation: To just outside skin line

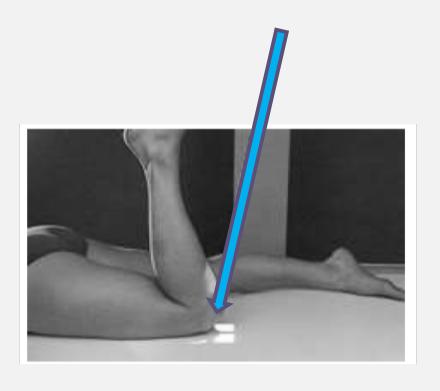
Shielding: None

Marker: R or L

Instruction: "Do not move"

Text: Page 151 and 152 **Alternate Axial view**

Patella (Sunrise)





LEG:

View: (AP) Anterior to Posterior (R or L) Leg

Film Size: 14" x 17 " cassette on table

SID: 40"

Tube Angle: No Tilt

Patient Position: Fully extended knee

Central Ray: Center to mid-line of leg

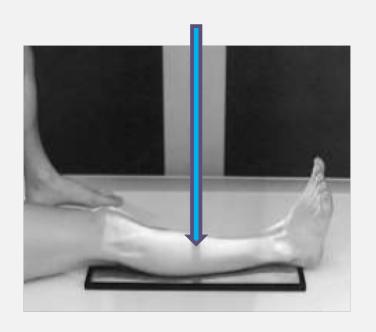
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Leg





LEG:

View: Lateral (R or L) Leg

Film Size: 14" x 17" cassette on table

SID: 40"

Tube Angle: No Tilt

Patient Position: Fully extended knee

Lateral aspect of the leg to the Cassette

Central Ray: Center to mid-line of leg

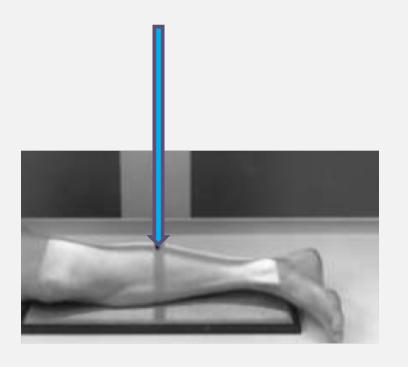
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Leg





ANKLE:

View: (AP) Anterior to Posterior Ankle

Film Size: 10" x 12" cassette on table (text advocates using half the film)

Option is to use an 8" x 10"

SID: 40"

Tube Angle: No tilt

Patient Position: Patient supine

Leg flat

Foot pointing superiorly

No rotation

Central Ray: Center to ankle joint

Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Ankle





ANKLE:

View: (AP) Anterior to Posterior Medial Oblique Ankle

Film Size: 10" x 12" cassette on table (text advocates using half the film)

Option is to use an 8" x 10"

SID: 40"

Tube Angle: No tilt

Patient Position: Patient supine

Leg rotated medially 45 degrees

Central Ray: Center to ankle joint

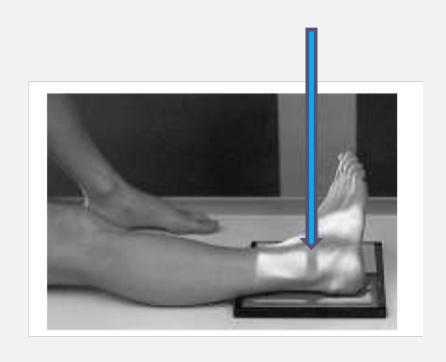
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Oblique (Medial Rotation) Ankle





ANKLE:

View: Lateral (R or L) Ankle

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Patient on side to be imaged

Foot and leg flat on cassette

Central Ray: Center of ankle (Inferior medial malleolus)

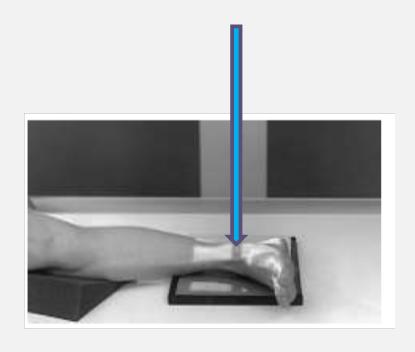
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Ankle





FOOT:

View: (AP) Anterior to Posterior Foot

Film Size: 8" x 10" or 10" x 12" depending on foot size - cassette on table

SID: 40"

Tube Angle: 5 to 10 degrees cephalad

Patient Position: Patient supine

Knee flexed

Sole of foot flat to cassette

Central Ray: Center to foot

Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP (or AP Axial) Foot





FOOT:

View: (AP) Medial Oblique Foot

Film Size: 8" x 10" or 10" x 12" depending on foot size - cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Patient supine

Medial side to cassette

Knee flexed and rotated **internally** placing sole at 45 degrees to cassette

Central Ray: Center to foot

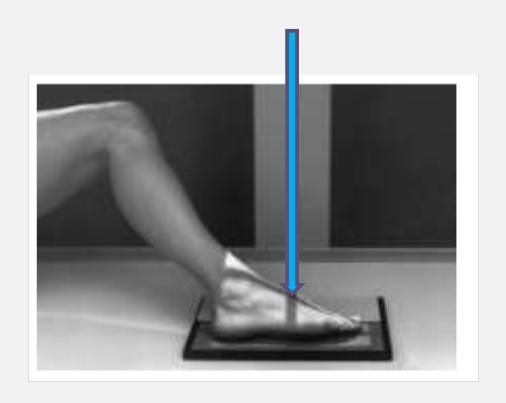
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Oblique Medial Rotation Foot





FOOT:

View: (AP) Lateral Oblique Foot

Film Size: 8" x 10" or 10" x 12" depending on foot size - cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Patient supine

Lateral side to cassette

Knee flexed and rotated **externally** placing sole at 45 degrees to cassette

Central Ray: Center to foot

Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lower Extremity Positioning

Foot:

View: Lateral (R or L) Foot

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: No tilt

Patient Position: Patient on side to be imaged

Foot and leg flat on cassette

Central Ray: Center of foot

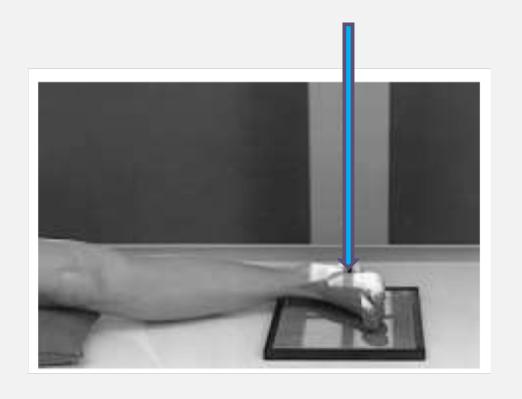
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Lateral Foot





Lower Extremity Positioning

Calcaneus:

View: Tangential (R or L) Calcaneus

Film Size: 8" x 10" cassette on table

SID: 40"

Tube Angle: 40 degrees cephalad

Patient Position: Patient supine leg fully extended

Ankle flexed to 90 degrees on cassette held by a belt

Central Ray: Arch - heel junction

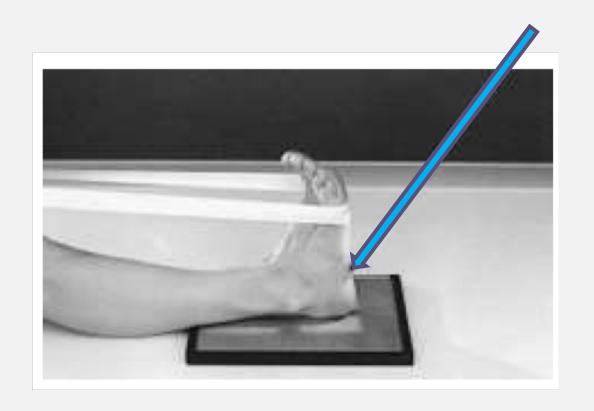
Collimation: To just outside skin line

Shielding: None

Marker: R or L

Instruction: "Do not move"

Axial Calcaneus





Ribs Positioning

View: (AP or PA) Anterior to Posterior or Posterior to Anterior Ribs

Position determined by rib in question

Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: Back or front to Bucky (AP or PA)

Arms away from field

Central Ray: Suspected rib above diaphragm (1-8)

Cassette 1 inch above shoulders

Suspected rib below diaphragm (8-12)

Cassette bottom at Iliac Crest

Collimation: To film size

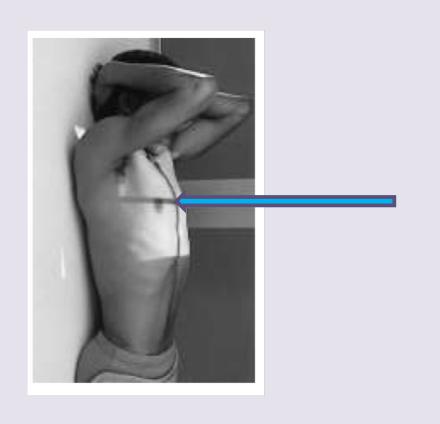
Shielding: None

Marker: R or L

Instruction: "Take a deep breath in and hold" for ribs 1 8

"Deep Breath in, blow it all the way out and hold" for ribs 8-12

AP Ribs





PA Ribs





Ribs Positioning

View:	(AP or PA) Anterior to Posterior or Posterior to Anterior	Oblique Ribs
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Film Size: 14" x 17" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Patient Position: 45 degree with affected area to Bucky

raise arm nearest Bucky

opposite hand on hip

Central Ray: Above diaphragm ribs (1-8) place CR at T6

Above diaphragm ribs (8-12) place CR at T10

Collimation: To film size

Shielding: None

Marker: RPO or LPO – RAO or LAO

Instruction: "Take a deep breath in and hold" for above the diaphragm

"Deep Breath in, blow it all the way out and hold" for below the

diaphragm

AP RPO and LPO Ribs





PA RAO and LAO Ribs





Chest Positioning

View: (PA) Posterior to Anterior Chest

Film Size: 14" x 17" Placed in film holder vertically - **NO BUCKY**

SID: **72"**

Tube Angle: No tilt

Patient Position: Chest against film- Chin over top of film

Hands on hips –arms rotated forward

Central Ray: Center to film

Collimation: To film size

Shielding: None

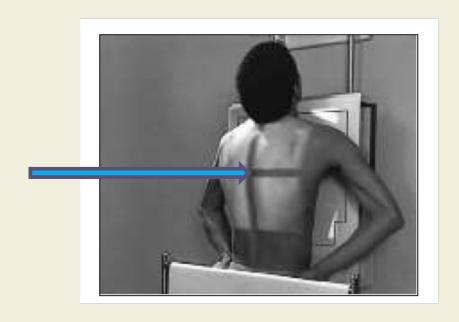
Marker: R over right shoulder

Instruction: "Take a deep breath in and hold"

Text: Page 137

Note: Generally 1/10 of a second or less exposure with 100 to 110 kVp

PA Chest





Chest Positioning

View: Lateral Chest (Left Lateral is routine (heart closet to to film)

Film Size: 14" x 17" Placed in film holder vertically - **NO BUCKY**

SID: **72"**

Tube Angle: No tilt

Patient Position: Left Lateral

Arms on head

Central Ray: Top of film 2 inches above shoulders

Center to film

Collimation: To film size

Shielding: None

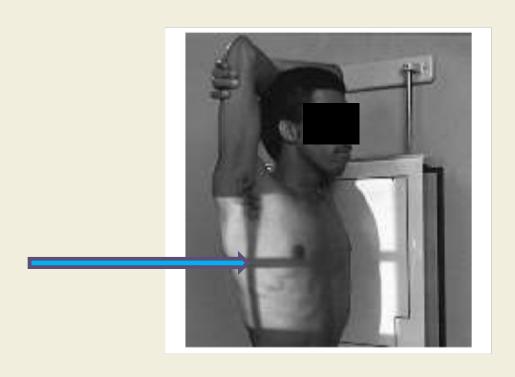
Marker:

Instruction: "Take a deep breath in and hold"

Text: Page 137

Note: Generally 1/10 of a second or less exposure with 100 to 110 kVp

Lateral Chest





Chest Positioning

View: (RAO & LAO) Right or Left Anterior Oblique

Film Size: 14" x 17" Placed in film holder vertically - **NO BUCKY**

SID: **72**"

Tube Angle: No tilt

Patient Position: Body turned 25 degrees (Chest)

60 degrees (Heart)

Arm closest to film reaches down by side holding Bucky

Arm away from Bucky over head

Central Ray: Top of film 2 inches above shoulders

Center to film

Collimation: To film size

Shielding: None

Marker: RAO or LAO

Instruction: "Take a deep breath in and hold"

Text: Page 137

Note: Generally 1/10 of a second or less exposure with 100 to 110 kVp

Chest Positioning

View: (PA Apex) Posterior to Anterior Apex Lordotic

Film Size: 14" x 17" Placed in film holder vertically (book states horizontally)

NO BUCKY

SID: **72"**

Tube Angle: 25 to 35 degrees cephalad (option lean patient)

Patient Position: Back to film – arms by side

Central Ray: Center of Sternum

Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Take a deep breath in and hold"

Text: Page 137

Note: Generally 1/10 of a second or less exposure with 100 to 110 kVp

Apical Chest





Skull Positioning

View: Submentovertical Skull (Axial or Base Vertex Skull)

Film Size: 8" X 10" placed in Bucky vertically

SID: 40"

Tube Angle: No tilt

Alternate - tube tilt based on patient's extension capabilities

Patient Position: Back flat to Bucky body

Head in full extension

Cantho-Meatal (CM) line as parallel as possible to Bucky

Alternate - less extension-CR perpendicular to to CM line

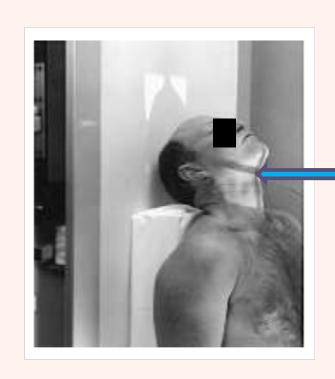
Central Ray: Center to film

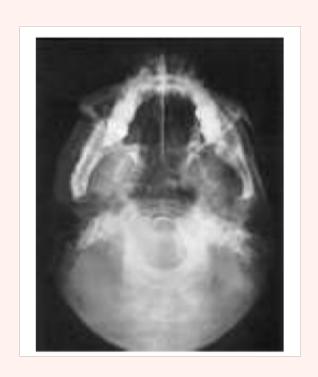
Collimation: To tissue line

Marker: R or L

Instruction: "Don't move"

Submentovertical Skull





Skull Positioning

View: (AP) Anterior to Posterior Skull (Towne)

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: 30 to 35 degrees caudally

Patient Position: Back of head to Bucky

No rotation

Central Ray: Hairline (upper forehead) to External Occipital Protuberance (EOP)

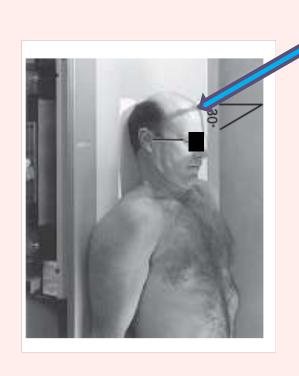
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Do not move"

AP Axial Skull (Towne)





Skull and Sinus Positioning

View: (PA) Posterior to Anterior Skull - Sinus (Caldwell)

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: 15 degrees caudally

Patient Position: Forehead and nose to Bucky

Central Ray: EOP to Glabella

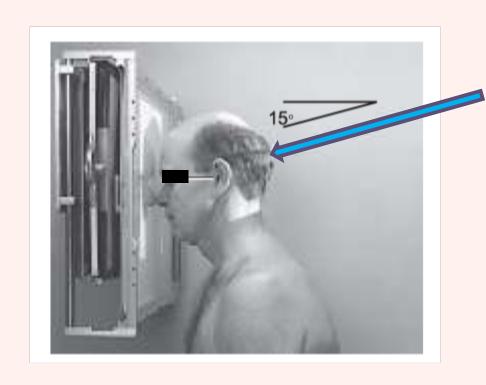
Collimation: To film size

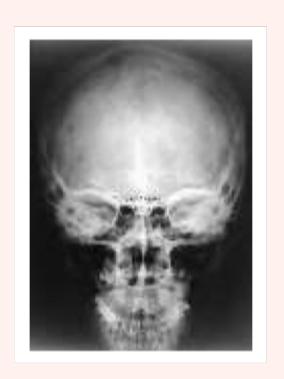
Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Skull - Sinus (Caldwell)





Skull and Sinus Positioning

View: Lateral (R or L) Skull – Sinus (both are required)

Film Size: 10" x 12" placed in Bucky **horizontally**

SID: 40"

Tube Angle: No tilt

Patient Position: Head turned to side to Bucky

Cantho-Meatal CM) in line parallel to Bucky

Perpendicular to midline of Bucky

Central Ray: 1 inch superior to CM

Collimation: To film size

Shielding: None

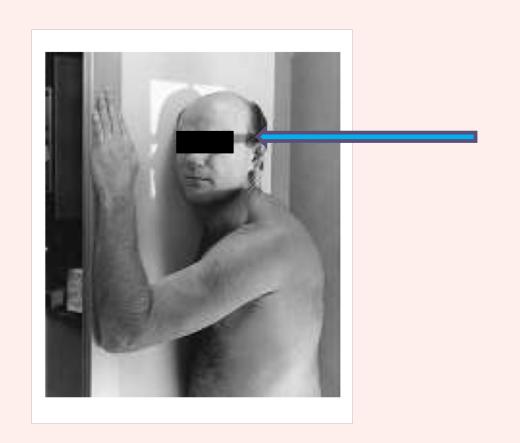
Marker: R or L

Instruction: "Do not move"

Text: Page 140

Note: Caldwell, Towne and Laterals are considered a routine study

Lateral (R or L) Skull - Sinus





Sinus Positioning

View: (PA) Posterior to Anterior Sinus (Waters)

Film Size: 10" x 12" placed in Bucky vertically

SID: 40"

Tube Angle: 30 to 35 degrees caudally

Alternate - no tilt-head in extension

Patient Position: Facing Bucky – Chin to Bucky -

Central Ray: Center to film

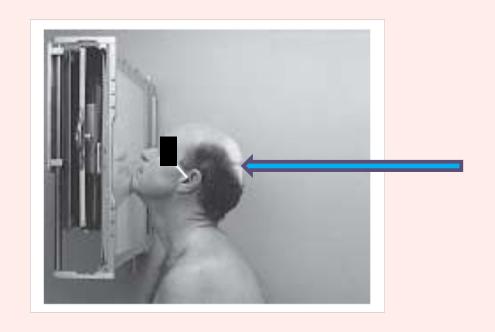
Collimation: To film size

Shielding: None

Marker: R or L

Instruction: "Do not move"

PA Sinus (Waters)





Emergency Procedures:

Stroke Signs:

F.A.S.T.

```
"F" face = Ask person to smile
"A" arms = Ask person to raise both arms. Dies one drift down?
"S" speech = Ask person to repeat a phrase to detect slurred speech.
"T" time = If any of the above call 911 immediately
"T" also tongue = Ask person to stick out tongue. Observe if it deviates to one side.
```

Cassette Positions Tells a Story:

Disclaimer...this procedure differs from the book

Outside the Darkroom:

A point of procedure have a designated place to indicate those cassette that are not exposed, from those that are exposed, e.g. unexposed cassettes left of the control panel, front forward and exposed cassettes to the right backs forward.

Inside the Darkroom:

- Exposed Cassette are placed with lock bars or lock tabs facing up, hinge toward the wall.
 This Position indicates film needs to be processed.
- After removing the exposed Film place the Cassette aside, leave the door ajar, not locked and fully opened.

This position indicate the Cassette is empty and needs Film.

Once a new Film is placed inside, lock the Cassette and turn it over.

This position indicates the cassette has new film inside.

Cassette Positions Tells a Story inside the Darkroom:

Cassette are placed with lock bars or lock tabs facing up, hinge toward the wall.

This Position indicates film needs to be processed.



Cassette Positions Tells a Story inside the Darkroom:

Place Cassette aside but leave the door ajar but not locked or fully opened.

This position indicate the Cassette is empty and needs Film.





Cassette Positions Tells a Story inside the Darkroom:

Once film is placed inside, lock the Cassette and turn it over.

This position indicates the cassette has new film inside.





Chapter 2 - Sections 2-3-4 (with subsections)

- 1. Before taking any X Rays, turn the processor on.
- 2. Complete the ID Flasher Card.
- 3. Once all of the views have been completed, bring the exposed Cassettes to the Darkroom.
- 4. Cassette are placed on the counter with lock bars or lock tabs facing up, hinges toward the wall.

 This Position indicates film needs to be processed.
- 5. Place the ID Flasher Card in the ID Flasher.
- 6. Run at least one blank Film through Processor.
- 7. Close the door, turn off the regular light and turn on the Safelight. (it will take a minute for your eyes to adapt)

Steps to Process an Exposure continued:

Chapter 2 - Sections 2-3-4 (with subsections)

- 8. Remove the Film from the Cassette by sliding it out with the cover <u>partially</u> open. Avoid touching the screens with your fingers. As you know, your oils and perspiration can mark the screen. (this differs from the book.)
- 9. One the Film is out of the Cassette place it with the loosely closed cover to the side, do not lock it (this differs from the book.)

This position indicate the Cassette is empty and needs Film.

- 10. Align the proper corner of the Film in the ID Identification Flasher and "flash" the ID info onto the Film **BEFORE** processing.
- 11. Place Film onto the feeder tray of the Processor.
- 12. Open Film Bin and reload Cassette.
- 13. Once Film is placed inside the Cassette, lock the Cassette and turn it over.

This position indicates the cassette has new film inside.

- 14. Wait for the beep and/or light before feeding in the next Film.
- 15. Repeat as needed.