| ACUTE/TRAUMA STANDARDIZED IMAGING ORDERS |  |  |
| :---: | :---: | :---: |
|  | VIEWS | POSITIONING INSTRUCTIONS |
| SHOULDER | - True AP Glenohumeral (Grashey) <br> - Trans-scapular Y lateral <br> - Axillary view (or Velpeau) * | *Attempt axillary view first; Velpeau view only if unable to complete axillary view |
| CLAVICLE | - AP <br> - AP cephalad of clavicle |  |
| AC JOINT | - Bilateral AC with and without weights |  |
| HUMERUS | - AP <br> - Lateral |  |
| ELBOW | - AP <br> - Lateral <br> - Oblique (radial head) | - Angle view if unable to unable to straighten arm for oblique view |
| FOREARM | - AP <br> - Lateral |  |
| WRIST | - PA (neutral if possible) <br> - Lateral anatomic tilt of distal radius (neutral if possible) <br> - Oblique <br> - +/- Scaphoid view | - Add scaphoid view only if indicated on requisition |
| HAND | - PA <br> - Lateral <br> - Oblique | - Try to have fingers well separated on lateral |
| SCAPHOID | - PA wrist in ulnar deviation (coned on scaphoid) <br> - +/- Wrist views |  |
| DIGITS 2-5 | - AP <br> - Lateral <br> - Oblique |  |
| THUMB | - AP <br> - Lateral <br> - Oblique |  |
| PELVIS | - AP |  |
| PELVIC INLET/OUTLET | - Inlet/Outlet | - Generally, only completed for "pelvic fractures" and some "acetabular fractures" |
| ACETABULUM | - AP pelvis <br> - Judet views of pelvis | - Generally, only completed for "acetabular fractures" |
| HIP | - AP pelvis <br> - AP hip <br> - Shoot through lateral of hip |  |
| FEMUR | - AP <br> - Lateral |  |
| KNEE | - AP (non-WB) <br> - Cross-table lateral <br> - Oblique (non-WB) | - Aim for AP tibial plateau if patient cannot fully extend <br> - May do AP standing if patient can weight bear |
| TIBIA/FIBULA | - AP <br> - Lateral |  |
| ANKLE | - AP (non-WB) <br> - Lateral (non-WB) <br> - Oblique (mortise view) | - May do AP standing if patient can weight bear |
| FOOT | - AP (non-WB) <br> - Lateral (non-WB) <br> - Oblique | - May do AP and lateral standing if patient can weight bear |
| CALCANEUS | - Axial of calcaneus <br> - Broden's view | - Typically done as add-on to foot/ankle |

General notes: Joint series should position joint in center of image; if no history from ordering physician, default to trauma views; if able to weight bear comfortably, complete chronic views.

| CHRONIC/DEGENERTIVE STANDARDIZED IMAGING ORDERS |  |  |
| :---: | :---: | :---: |
|  | VIEWS | POSITIONING INSTRUCTIONS |
| SHOULDER | - True AP glenohumeral in neutral <br> - True AP in internal rotation <br> - Lateral (trans scapular-y) <br> - Axillary | SHOULDER CONSULT (from orthopedic surgeons only): <br> - AP shoulder <br> - Glenoid projection (Grashey) <br> - Glenoid with 20 to 30degrees abduction holding 5 pound weight <br> - AP angled 30 degrees <br> - Supraspinatus (lateral Y with 12 -degree caudad angle) <br> - Axillary projection |
| ELBOW | - AP <br> - Lateral |  |
| FOREARM | - AP <br> - Lateral |  |
| WRIST | - PA (neutral rotation) <br> - Lateral anatomic tilt of distal radius (neutral rotation) <br> - +/- scaphoid | - No oblique |
| HAND | - PA <br> - Lateral <br> - Oblique |  |
| SCAPHOID | - PA wrist in ulnar deviation <br> - $\quad$ /- scaphoid wrist views as above |  |
| HANDS/WRISTS (for ? erosive arthropathy) | - PA <br> - Lateral <br> - Ball catcher | - Single cassette for both hands/wrists for ball catcher's view, with separate views for PA and lateral for each hand/wrist |
| HIP | - AP pelvis <br> - AP hip <br> - Shoot through lateral hip |  |
| KNEE | - Standing AP <br> - Standing or non-WB lateral <br> - Skyline <br> - Standing Rosenberg | - UNILATERAL IMAGING ONLY; DO NOT COMPLETE BILATERAL knees on the same cassette <br> - Rosenberg must be shot down the joint line; tibial plateau free of superimposition; femoral condyles free of superimposition, with the intercondylar fossa in profile |
| ANKLE | - AP (WB) <br> - Lateral (WB) <br> - Oblique (WB) |  |
| FOOT | - AP (WB) <br> - Lateral (WB) <br> - Oblique (non-WB) |  |


| PRE-OP TEMPLATING AND POST-OP ARTHROPLASTY F/U STANDARDIZED IMAGING ORDERS |  |  |
| :---: | :---: | :---: |
|  | VIEWS | POSITIONING INSTRUCTIONS |
| PRE-OP SHOULDER ARTHRO. (FOR TEMPLATING) | - All images with ball <br> - Glenoid to include $1 / 3$ of humerus <br> - Axillary place ball on anterior surface of humeral head |  |
| POST-OP/ Follow-up SHOULDER ARTHRO. | - AP <br> - Lateral Trans-scapular $Y$ <br> - Axillary |  |
| PRE-OP HIP ARTHRO. (FOR TEMPLATING) | - Standing AP pelvis ASIS down to include proximal $1 / 3$ of femur with ball <br> - Cross-table lateral hip with ball | - Ensure entire ball on image <br> - Ensure that osseous portion of hip joint and proximal $1 / 3$ of femur is adequately visualized <br> - If visualization is not ideal due to patient body habitus, complete additional view of unilateral hip including proximal $1 / 3$ of femur with entire ball visible on image |
| POST-OP/Follow-up HIP ARTHRO. | - AP pelvis (ASIS down) <br> - Shoot through lateral | - Include all hardware <br> - Same for immediate post op and follow-up |
| PRE-OP KNEE ARTHRO. (FOR TEMPLATING) | - All images with ball <br> - Lateral knee | - Ensure entire ball on image <br> - Ensure true lateral |
| POST-OP/Follow-Up KNEE ARTHRO. | - $\quad$ AP (non-WB) <br> - Lateral (non-WB) |  |

