

Scoliosis Series X-ray Guideline

Routine (Initial Workup): 2 view

- AP ERECT: Patient flat footed and bare foot. Include top of crest and entire thoracic and lumbar spine. On tall patients use 14 x 17 from crest up and do separate film for T1 or use large cassette with stitching at reader (see notes below). If patient unable to stand then AP sitting.
 - Shielding: Shield gonadal region without obscuring area of interest. For younger patients, use breast shield. Shadow shield placed on collimator may be used.
- LATERAL ERECT: Patient flat footed and bare foot. Include top of crest and entire thoracic and lumbar spine. On tall patients use 14 x 17 from crest up and do separate film for T1 or use large cassette with stitching at reader (see notes below). If patient unable to stand then do lateral sitting.
 - Shielding: Place contact shield or shadow shield over gonads without obscuring area of interest, Use breast shield for younger female patients.

Routine (Follow up): 1 view

- AP ERECT. Patient flat footed and bare foot. Include top of crest and entire thoracic and lumbar spine. On tall patients use 14 x 17 from crest up and do separate film for T1 or use large cassette with stitching at reader (see notes below). If patient unable to stand then do AP sitting.
 - Shielding: Shield gonadal region without obscuring area of interest. For younger patients, use breast shield. Shadow shield placed on collimator may be used.

Notes about Stitching:

With stitching, ONE exposure is taken for AP or Lateral to produce 2-3 images that are joined together during post processing at the CR or DR unit (see examples below). All images are to be sent to PACS. This is still considered a 2 VIEW SCOLIOSIS SERIES.

AP:

Stitched



Images used for final stitched image:



LATERAL:

Stitched



Images used for final stitched image:

