

# PEDIATRIC TRAUMA SURVEY

**ROUTINE:** See views below.

**DISTANCE:** 40"

**BUCKY:** NO

**FOCAL SPOT:** Small

**IMAGING PLATE:** Appropriately sized CR cassettes or DR detector.

## **CENTRAL RAY:**

1. Perpendicular to the IR centered on appropriate part.

## **ADDITIONAL COMMENTS:**

1. For small children, an entire extremity may be done on one image.
2. Very important to get marker on image and visualized on appropriate side.

## **Views Taken**

- AP and Lateral Skull
- PA/AP Chest
- RPO Chest
- LPO Chest
- KUB
- Lateral Cervical Spine
- Lateral Thoracolumbar Spine
- PA Right and Left Hands (may be done on one image)
- AP Right and Left Feet (may be done on one image)
- AP and Lateral Right and Left Humerus
- AP and Lateral Right and Left Forearms
- AP and Lateral Right and Left Femurs
- AP and Lateral Right and Left Tibia/Fibulas

If the patient comes from the floor for a Pediatric Trauma Survey – they will most likely come with an electronic monitoring device in place. Our protocol will be to call the floor and have them remove the bracelet, so it will not interfere with the images and this also means that staff from the floor will need to accompany the patient for safety reasons.

*Updated 08/13/2020 rsj*