

<u>Chapter-7</u> part-l WARD RADIOGRAPHY





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Objectives

At the end of this lesson you should be able to;

- Identify the *main areas*, type of examination
 & disease condition which need x-ray the patient on the ward.
- Apply radiation protection measures and infection prevention techniques.
- Select appropriate equipment.
- Develop good communication skill with staffs in the ward.



Introduction

> When patients are **too ill to be moved** to the department, the patient will be x-rayed on the ward using **mobile x-ray machine**.

Ward radiography is restricted to the patient whose medical condition is impossible for them to be moved to the Xray department.



Introduction...

- The main areas where this is needed are:-
 - Intensive care unit(ICU)
 Coronary care unit
 Medical assessment unit
 - ✓ Surgical assessment unit



Introduction...

Cardiac surgery unit High dependency unit Special baby care unit Orthopedic ward Emergency ward



Radiation protection

Minimize exposure to patient, staff & relatives by:-

Ensuring that nobody enters the controlled area during exposure.

✓ Using Lead protective shields as backstops to limit the radiation field.

✓ Using of *inverse square law*.



Protecting from scatter radiation by the use of a lead-rubber aþron. ✓ **Design** of portable environment. Consider other patients on ward.





Infection control

To prevent the spread of infection, *local* established protocols should be followed:✓ Hand washing b/n patients

- Cleanliness of equipment used;
 - **Cassettes** should be cleaned and covered with plastic sheets or clean towels before & after use.
- Wearing gloves & aprons
 Facemasks and over-shoes before entering these areas.



 Depending on *power output* and the *ability to transfer* equipment, units fall broadly into two groups:-

Portable, and

Mobile x-ray units.





Portable sets :-

 Have relatively low mA settings, and
 Normally can be dismantled for transfer









Mobile sets:-

Have higher power output,
Are larger & heavier than portable sets,
Need to be motorized or pushed between locations,

Can be either mains-independent or mains-dependent.

Mobile x-ray unit



Components of mobile xray set:->The x-ray tube > The tube stand The high tension generator > The control unit > The radiographic output and the mains requirements.

X-ray equipment



*Various aids are available that can assist in positioning both the patient and cassette;

Foam pads of different sizes and shapes, such as cassette pads.

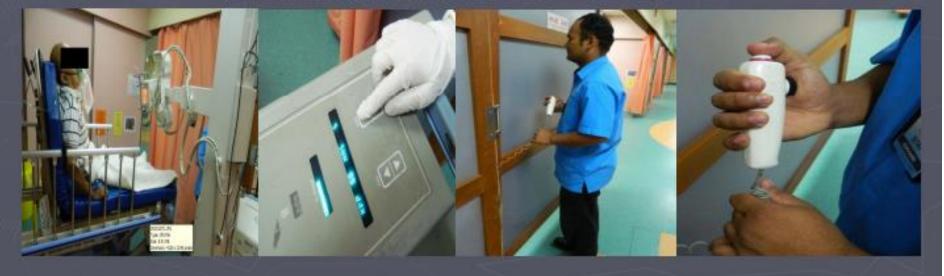
Cassette tunnels and cassette holders.
 Selection of a low-ratio (6 : 1) 30 lines
 per cm parallel stationary grid will reduce the risk of grid cut-off.

Workflow...



1.From the biomedical imaging department...

2.Positioning the patient... patient care must be the First Priority!!!



Examination performed

***Performed examination's are:-**

Chest radiographs(AP)- most common.

✓ Sometimes extremities,

• Trauma series

Chest & C-spine:- lateral, and

✓ Abdomen & pelvis.



Examinations are complicated by:-

- The patient's medical condition,
- Degree of consciousness,
- The patient's treatment; restrictions due to:

✓ life support system, drips, and chest or abdominal drains;

Iocation of electrocardiogram (ECG)
 leads;



✓ Traction apparatus,

Physical restrictions due to room size & layout of monitoring equipment,
 Adequate power supply, and
 The ability to move mobile or portable X-ray equipment in confined spaces.

Range of patients

- Pediatrics
 Abusive patients
- Elderly patients
 Trauma patients
- Confused patients Very ill patients
- Unconscious
 Immunosuppressed
 patients
 Immobile

EXAMINATIONS

Possible reasons for portable examination-chest:-

- **Chest pain**
- Pneumothorax &
 - haemopneumothorax
- Chest drain
- Cardiac arrest
- Acute pulmonary embolism
- Chest trauma (i.e. stabbing)





Positioning of NG tube ARDS

- Acute asthma/shortness of breath
- Aortic aneurism(+portable abdomen)
- >As part of a trauma series

Heart & lungs

- Common conditions include:-
 - Congestive heart failure
 - Coronary heart disease
 - Left ventricular failure
 - Pulmonary oedema
 - Pulmonary embolus
 - Pneumothorax and pleural effusion
 - o pneumonia

Heart & lung radiography I.<u>AP-chest</u>

Position of patient & cassette

- Assist the patient to setting/erect position facing the x-ray tube.
- The cassette is supported against the back using pillows.
 - If this is not possible, the patient may be positioned supine
- The msp is centered to the midline of the cassette.





AP chest...

Rotation of the patient is prevented by the use of foam pad.

⇔CR:-

 Central ray is directed perpendicular to sternal angle.

□<u>Notes:</u>

- For supine, the FFD may be restricted due to the height of the bed.
- The FFD should be higher than 120 cm,



Fig:- AP-chest





Heart & lungs- fluid levels 2. <u>PA or AP - lateral decubitus</u>

Position of patient & cassette:-

- The patient is turned to the unaffected side
- ✓A cassette is supported vertically against the anterior chest wall,
 - The msp is adjusted at right angle to the midline of the cassette
- The patient's arms are raised & folded over the head to clear the chest wall.

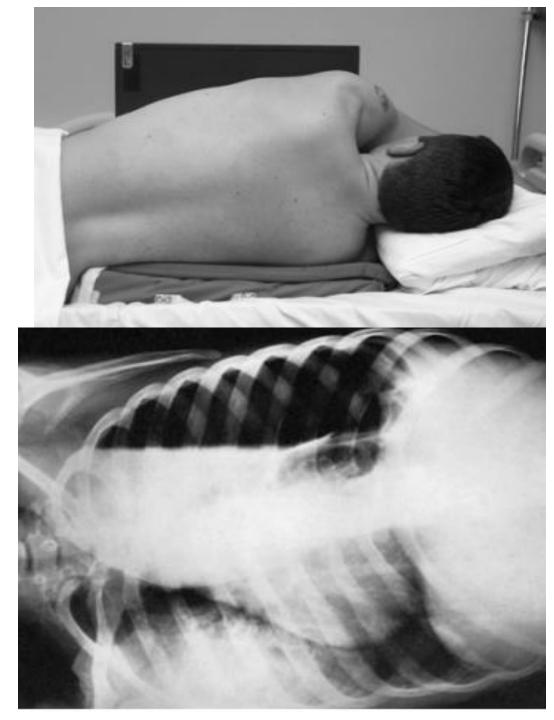


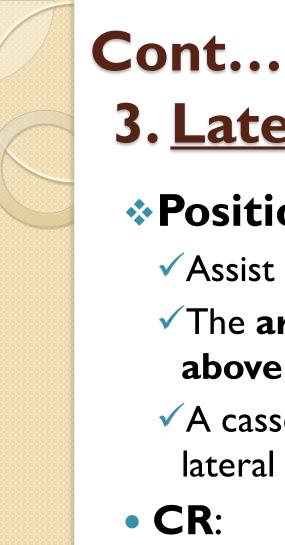


Direct the central ray horizontally
 $perpendicular to T_7$ & directed at
 right angle to the cassette.



Fig; PA-chest lateraldecubitus





3. Lateral (dorsal-decubitus)

Position of patient & cassette:

Assist the patient to supine position

The arms are extended & supported above the head

 \checkmark A cassette is supported vertically against the lateral aspect of chest of the affected side

• CR:

Directed horizontally perpendicular to **axilla** & directed right angle to the cassette.



Fig; lateral-chest (dorsal decubitus)



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Heart & lung-temporary pacemaker

- Patients suffering from heart block are often treated with an electrical pacemaker.
- The procedure may be performed in a cardiac catheter laboratory.
- This procedure of inserting a temporary pacemaker use a mobile image intensifier.



Mobile image intensifier

- The patient lies on a trolley or bed with a radiolucent top, which can accommodate the *C-arm of the intensifier*.
- The intensifier is positioned on the opposite side of the operating position.
- Control of the screening factors, screening time and radiation protection is our responsibility.



Mobile image intensifier...

Fig; Fluoroscopic image showing location of pacemaker wire







Mobile image intensifier...



<u>Heart & lungs -</u> postoperative radiography

- A series of radiographs may be required during post-operative care, shortly after surgery, this includes:-
 - ✓Endotracheal tube(AP chest)
 - Central venous pressure line(AP chest)
 - Chest drain insertions(AP erect chest)



Endotracheal tube

- AP-chest is used to assess position of an endotracheal tube.
- Exposure is made with enough penetration
- The position of the tube is checked to ensure that its distal end is not lying in the right bronchus.





Central venous pressure line

- A fine catheter is positioned in the superior vena cava as a means of:-
 - measuring central venous pressure and
 injecting drugs.

 The position of a catheter can be assessed from the **AP- chest** projection.



Central venous pressure line,,,

 The position of the catheter is checked to ensure that its distal end has not been directed into the right internal jugular vein or the right atrium of the heart.

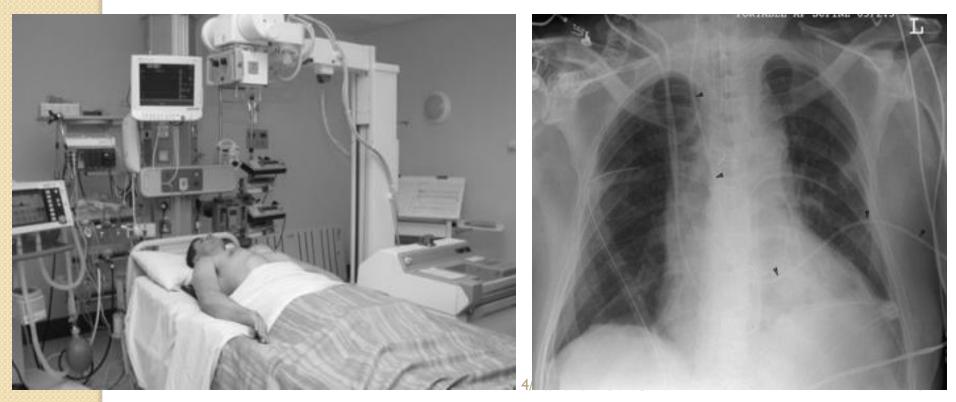


Chest drain insertions

- Chest drains are used for drainage of pneumothorax or pleural effusion,
 > either spontaneous or following surgery.
- An AP-erect image is required to show:-
 - ✓ the **position of the tube**, and
 - ✓any *residual air* within the thorax.

Fig; AP-supine radiograph show:-

- bilateral basal chest drains,
- endotracheal tube,
- right jugular central venous catheter and a pulmonary artery catheter.



<u>Abdomen</u>

- **AXR** is required in cases of *acute abdominal pain* or *following surgery*, to determine:-
 - ✓ **Gaseous distension** of any part of the GIT
 - Free gas or fluid in the peritoneal cavity
 - Fluid levels in the intestine
 - Localization of radio-opaque foreign body
 - Evidence of aortic aneurism



Recommended projections:-

- Free gas in the peritoneal cavity;
 - AP chest, patient erect
 - AP abdomen, patient supine
 - AP/PA left lateral decubitus
- Fluid levels;
 - AP abdomen, patient erect



- Radio-opaque foreign bodies;
 AP abdomen, patient supine
- Aortic aneurism:-
 - AP abdomen, patient supine
 Lateral(dorsal dicubitus)

Cont... <u>AP- supine abdomen</u>

Position of patient & cassette:-

- ✓With the *patient supine*, a grid cassette is carefully positioned under the abdomen.
- Include the symphysis pubis on the lower edge of the image.

♦ CR:-

 Direct the central ray perpendicular to iliac crest & right angle to the cassette
 Exposure made on arrested expiration



AP-supine abdomen...



AP-supine abdomen...

A) Supine abdomen x-ray showing *small bowel obstruction*



B) Supine abdomen xray showing **distal colonic obstruction**





AP erect abdomen

Position of patient & cassette:-

- Depending on the *patient's medical condition*, assist the patient to adopt an
 erect or semi-erect position.
- The patient's thighs are moved out of the beam
- ✓A 35x43-cm grid cassette is placed against the posterior aspect of the patient,





AP erect abdomen...

CR:-

Direct the central ray horizontally to the center of the cassette,

With care taken to avoid grid cut-off



• **AP-erect** radiograph of abdomen showing *small bowel obstruction*.







AP (left lateral decubitus)

Position of patient & cassette:-

- The patient is turned on to the left side, ideally for 20 minutes.
- The grid cassette is supported vertically against the posterior aspect of the patient

⇔CR:-

✓ Directed horizontally at right angle to the center of a 35x43 cm cassette.

AP (left lateral decubitus)...

• **AP-**left lateral decubitus image of the abdomen showing **free air** in the abdominal cavity.





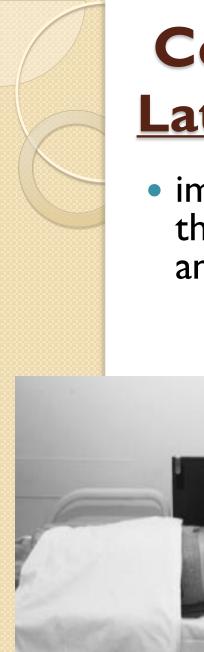
Lateral-dorsal decubitus-supine

Position of patient and cassette:-

- The patient lies supine position
- The arms are extended and supported above the head
- A grid cassette is supported vertically against the lateral aspect of the abdomen

CR:

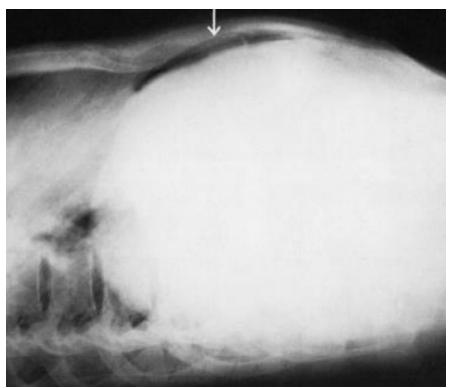
Direct the central ray horizontally
 perpendicular to the center of the cassette



Lateral dorsal decubitus...

 image of the abdomen showing free air in the peritoneal cavity lying adjacent to the anterior abdominal wall





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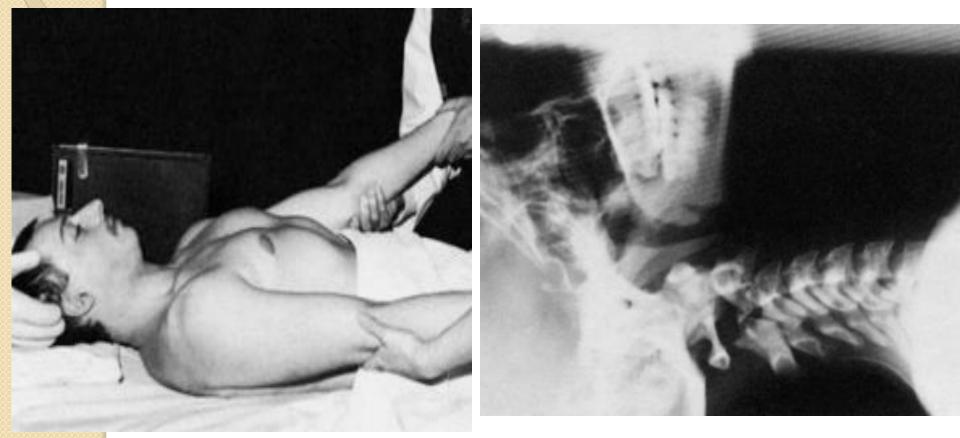
Lateral-supine

- Position of patient and cassette
 - With the patient in the **supine position**, cassette is supported vertically against either shoulder.
 - The cassette is secured in position using a holder.
 - The patient's shoulders must be depressed.
- *CR:

Direct the horizontal central ray perpendicular to C_{4.}



Cont... Lateral spine



Fractured lower limbs and pelvis

For the limbs, two radiographs are taken at right angles to each other to:-

Check on the position, and

Alignment of fractured bones.

Using weights and a metal pulley rope structure that is connected to the patient's bed.





Position of patient and cassette:-

The cassette is carefully positioned under the femur or lower leg.

The cassette is supported parallel to the femur or lower limb by the use of non-opaque pads.





AP

⇔CR:-

Direct the central ray at right angle to the midline of the cassette.
 With the central ray at right angles to the long axis of the bones in question.



AP

Fig; AP postoperative image of hip joint following arthroplasty.





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Fractured femur - Lateral

Position of patient and cassette:-

When the examination is for the distal two-thirds of the femur,

 the cassette may be positioned vertically against the medial side.

When the proximal part of the shaft or the neck of the femur is being examined,

 the cassette is positioned vertically against the lateral side of the thigh.



- For the distal two-thirds of the femur,
 - the horizontal central ray is centered to the middle of the cassette.
- For the neck of femur,
 - direct the CR perpendicular to midway between the femoral pulse and greater trochanter.

Fractured femur – Lateral...

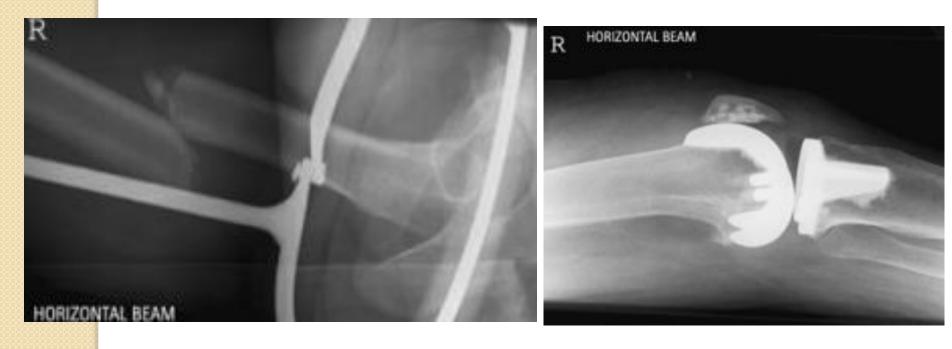
 Patient positioned for *lateral femur* (knee up). Patient positioned for *lateral hip* with pelvis raised resting on a cassette tunnel device



Fractured femur – Lateral...

Lateral image of a right fractured femur

 Lateral image of the knee following joint replacement





The end...



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