

## CHEST-PORTABLE

**ROUTINE:** AP Chest done bedside.

**DISTANCE:** 48"

**BUCKY:** NO- Use a Grid

**FOCAL SPOT:** Large

**IMAGING PLATE:** CR-14x17 Cassette or DR detector

**CENTRAL RAY:**

AP: Perpendicular to T-7 (7-8" below vertebral prominence)

**Requests for Nipple Markers:**

At the request of the Radiologists, these exams should NOT be done portably. PA and lateral views should be done in the department.

**Post PICC Line placement Chest X-rays**

At the request of the Radiologists, the procedure for post PICC line placement chest x-ray is as follows: The procedure does NOT include the arm, but does include the entire chest. First attempt an AP and if the line is not visible turn the patient slightly into the RPO position. Keep the KVP low to produce an image with more contrast. The film should visualize through mediastinum without burning out the lungs. These films should be marked **STAT** and checked by a Radiologist immediately. The IV Therapy Nurse Phone # is: 50433.

**Post Pectus Repair Chest X-rays**

If a chest is ordered for s/p pectus repair-a **Portable AP & Cross-table Lateral Chest** may be ordered to be done in PAR after surgery. Don't roll, log roll or twist the patient when placing the cassette.

Updated 12/05/2019

## CHEST-CHILD PORTABLE

**ROUTINE:** AP Supine Chest done bedside. Cross-table Lateral done if ordered.

**DISTANCE:** 48"

**BUCKY:** NO

**FOCAL SPOT:** Large

**IMAGING PLATE:** 8x10 or 10x12 CR  
Cassette or DR detector

**CENTRAL RAY:**

AP: Perpendicular to Cassette

**Doing a baby in an open Isolette:**

Put cassette in the tray that slides out from under the isolette, use the numbers and letters on the tray to line up the cassette. The nurse should place the shield & marker.

**Doing a baby in a closed Isolette:**

Put cassette in a cloth diaper and place directly under the patient. You may have to move the baby away from the part of the isolette that is curved over them- Don't have the CR going through that curved portion of the isolette. The nurse should place the shield & marker.

**ALWAYS MAKE SURE THE BABY IS SHIELDED-IF POSSIBLE.**

**ALWAYS WASH YOUR HANDS WHEN ENTERING THE NICU/PICU/NURSERY.**

**ALWAYS MAKE SURE THAT THE XRAY IS MARKED AND ANNOTATED CORRECTLY.**

Reviewed 10/01/2019