

Reading Hospital School of Health Sciences
Medical Imaging Program
MI 243 Clinical Seminar IV
2021

Sacrum

Routine:	AP Axial and Lateral
Position/ Projection:	Supine (AP Axial)
Patient Prep:	Remove everything except underwear, socks, and shoes.
Technique:	90 kVp $\text{O} \bullet \text{O}$: non AEC 14 mAs (Bucky)
SID:	40" SID
Collimation:	10 x 12 Portrait (Lengthwise)
Patient Position:	Place the patient supine on the table. Adjust patient so both ASIS are equidistance from the table. Merrill's recommendation is to place a support under the patients' knees.
Central Ray:	Central ray angled 15° cephalad. Center 2 inches superior to pubic symphysis (midway between symphysis pubis and ASIS).
Marker Placement:	Appropriate right or left marker should be placed on the image.
Shielding:	You do not shield for this view.
Breathing Instructions:	Suspended expiration- RH Protocol Suspended respiration- Merrill's
Purpose/ Structures:	Entire sacrum free of superimposition.

Evaluation Criteria:

- Evidence of proper collimation and presence of the side marker placed clear of anatomy of interest
- Bony trabecular detail and surrounding soft tissues
- Sacrum centered and seen in its entirety
- Sacrum free of foreshortening, with the sacral curve straightened
- Pubic bones not overlapping the sacrum
- No rotation of the sacrum, as demonstrated by symmetric alae

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Sacrum

Routine:	AP Axial and Lateral
Position/ Projection:	Left Lateral (Lateral)
Patient Prep:	Remove everything except underwear, socks, and shoes.
Technique:	96 kVp $\odot \bullet \odot$: non AEC 45 mAs (Bucky)
SID:	40" SID
Collimation:	10 x 12 Portrait (Lengthwise)
Patient Position:	Patient should lay on left side with hips and knees flexed.
Central Ray:	Central ray is perpendicular. Center at a point 3 ½ inches posterior to the ASIS.
Marker Placement:	Place left marker anteriorly.
Shielding:	You do not shield for this view.
Breathing Instructions:	Suspended expiration- RH Protocol Suspended respiration- Merrill's
Purpose/ Structures:	Entire sacrum in a lateral projection.

Evaluation Criteria:

- Evidence of proper collimation and presence of the side marker placed clear of anatomy of interest
- Sacrum
- Closely superimposed posterior margins of the ischia and ilia, demonstrating no rotation
- Bony trabecular detail and surrounding soft tissues

Merrill's Note:

- Place a lead rubber absorber behind the patient to absorb scatter radiation.

Additional Note:

- RH:
 - If physician orders only a sacrum, or only a coccyx, continue to image both areas.

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Coccyx

Routine:	AP Axial and Lateral
Position/ Projection:	Supine (AP Axial)
Patient Prep:	Remove everything except underwear, socks, and shoes.
Technique:	85 kVp $\text{\textcircled{O}}$ $\text{\textcircled{\bullet}}$: non AEC 14 mAs (Bucky)
SID:	40" SID
Collimation:	6 X 8 Portrait (Lengthwise)
Patient Position:	Place the patient supine on the table. Adjust patient so both ASIS are equidistance from the table. Merrill's recommendation is to place a support under the patients' knees.
Central Ray:	Central ray 10° caudad. Center to a point about 2 inches superior to pubic symphysis
Marker Placement:	Appropriate right or left marker should be placed on the image.
Shielding:	You do not shield for this view.
Breathing Instructions:	Suspended expiration- RH Protocol Suspended respiration- Merrill's
Purpose/ Structures:	Entire coccyx free of superimposition.

Evaluation Criteria:

- Evidence of proper collimation and presence of the side marker placed clear of anatomy of interest
- Bony trabecular detail and surrounding soft tissues
- Coccyx centered and seen in its entirety
- Coccygeal segments not superimposed by pubic bones
- No rotation of coccyx, as demonstrated by distal segment in line with pubic symphysis

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Coccyx

Position/ Projection:	Left Lateral (Lateral)
Patient Prep:	Remove everything except underwear, socks, and shoes.
Technique:	85 kVp $\text{O} \bullet \text{O}$: non AEC 40 mAs (Bucky)
SID:	40" SID
Collimation:	6 X 8 Portrait (Lengthwise)
Patient Position:	Patient should lay on left side with hips and knees flexed.
Central Ray:	Central ray perpendicular. Center to a point 3 ½ inches posterior to ASIS and 2 inches inferiorly.
Marker Placement:	Place left marker anteriorly.
Shielding:	You do not shield for this view.
Breathing Instructions:	Suspended expiration- RH Protocol Suspended respiration- Merrill's
Purpose/ Structures:	Entire coccyx in a lateral projection.

Evaluation Criteria:

- Evidence of proper collimation and presence of the side marker placed clear of anatomy of interest
- Coccyx
- Closely superimposed posterior margins of the ischia and ilia, demonstrating no rotation
- Bony trabecular detail and surrounding soft tissues

Merrill's Note:

- Place a lead rubber absorber behind the patient to absorb scatter radiation.