

## CHILDREN'S SERVICES

**Recommendation for the use of X-rays in common Paediatric presentations and emergencies**

These guidelines are taken from The Royal College of Radiologists publication "Making the Best Use of Clinical Radiology" (2012, 7<sup>th</sup> Edition) and "Paediatric Trauma Protocols" (2014)

**IMPORTANT: MINIMISE X-IRRADIATION IN CHILDREN**

**NURSE PRACTITIONERS AND APPROPRIATELY TRAINED SENIOR PAEDIATRIC NURSES MAY REQUEST X-RAYS IN THE FOLLOWING SITUATIONS**

**1: PATIENTS WITH A CLEAR HISTORY OF MINOR TRAUMA 2: UPPER LIMB INJURIES 3: LOWER LIMB INJURIES 4: PATIENTS WHO PRESENT WITH A WOUND WITH A POTENTIAL RADIO- OPAQUE FOREIGN BODY 5: CHILDREN BETWEEN THE AGES OF 2 AND 16 6: POST REDUCTION X-RAYS**

**THE DEPARTMENT OF DIAGNOSTIC IMAGING MUST HOLD THE NAMES OF ALL SUCH STAFF. KNOWLEDGE OF IRMER REGULATIONS IS MANDATORY**

**KEY**

|                                |  |
|--------------------------------|--|
| <b>INDICATED</b>               | This shows the investigation most likely to contribute to clinical diagnosis and management  |
| <b>NOT ROUTINELY INDICATED</b> | This emphasises that while no recommendation is absolute, the request will only be carried out if a clinician gives cogent arguments for it. |
| <b>NOT INDICATED</b>           | Examination in this group are those where the supposed rationale for the investigation is untenable.   |

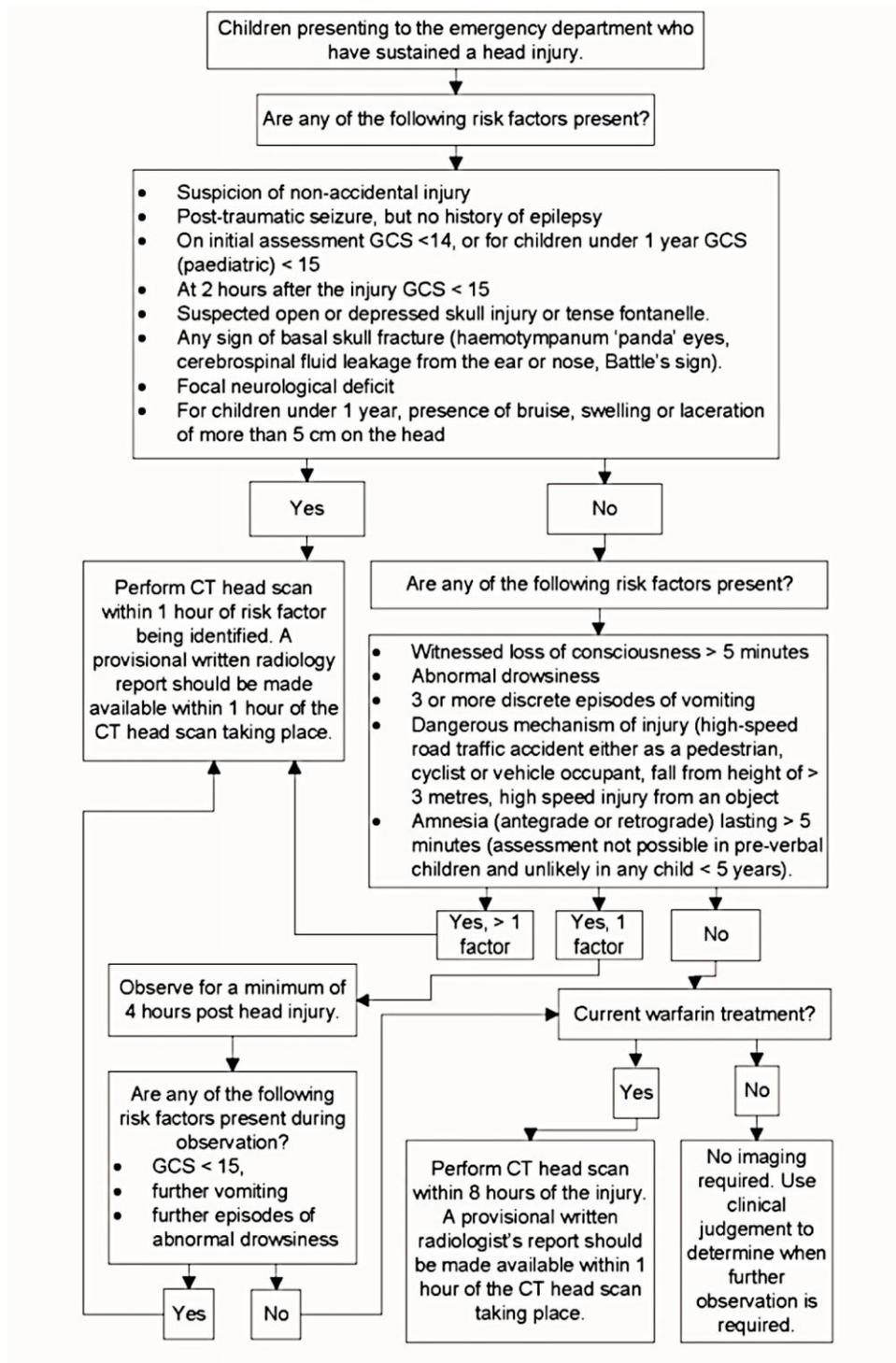






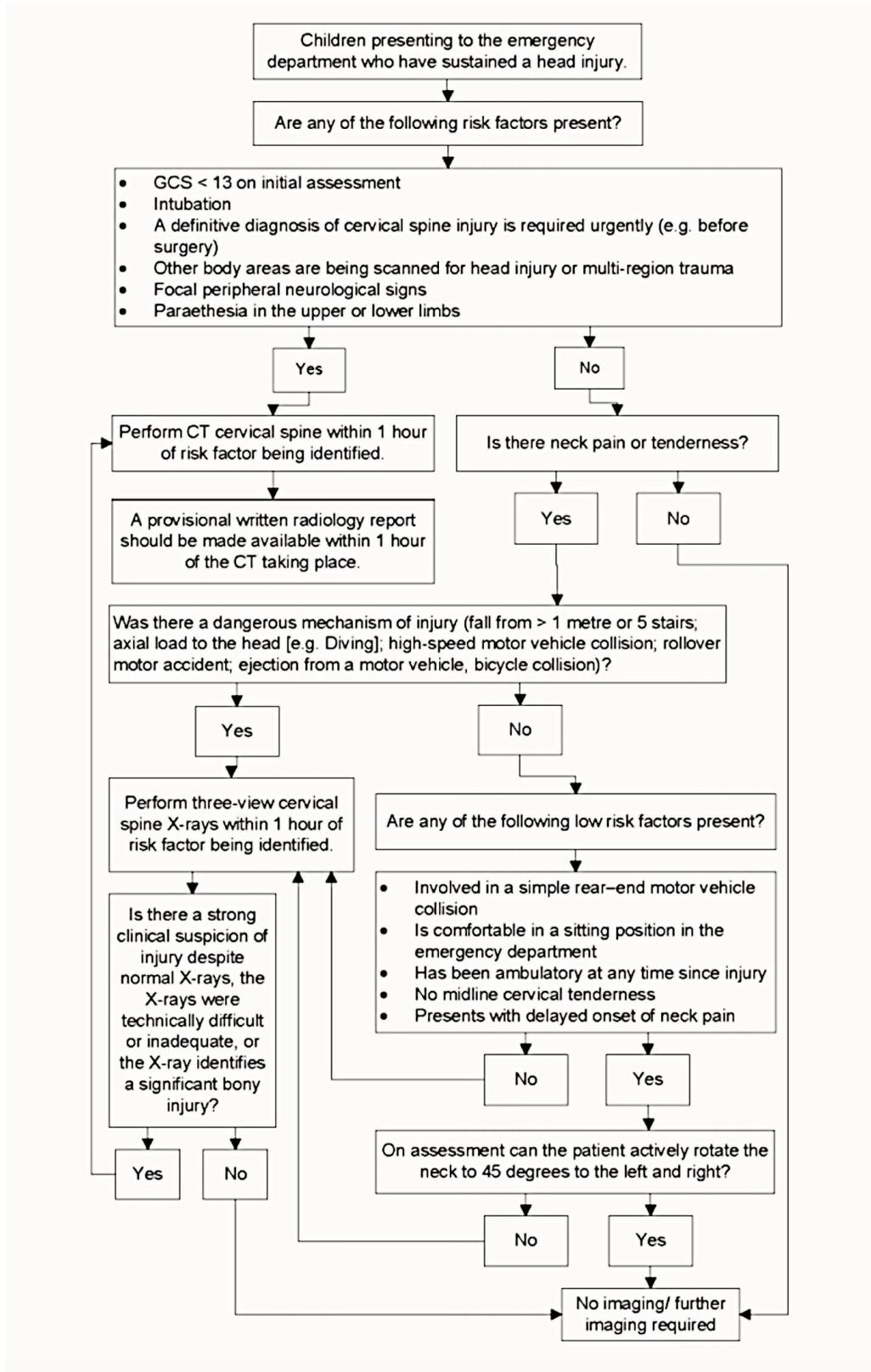


Fig 1: Selection of children for CT head



National Institute for Health and Care Excellence. CG 176: Triage, assessment and early management of head injury in children, young people and adults: NICE 2014

Fig 2: Selection of children for imaging of the cervical spine



*Updated:*

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In place of "Recommendations for the use of X-rays in common  
paediatric emergencies" July 2011*

*Review date:*

*November 2017*