

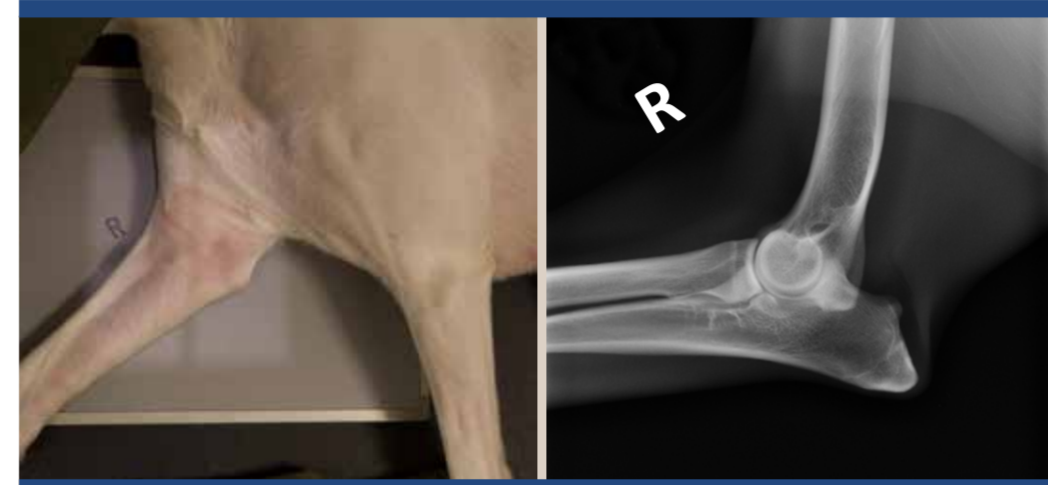
BCF Guide for hips and elbow radiographs

Required for BVA scores



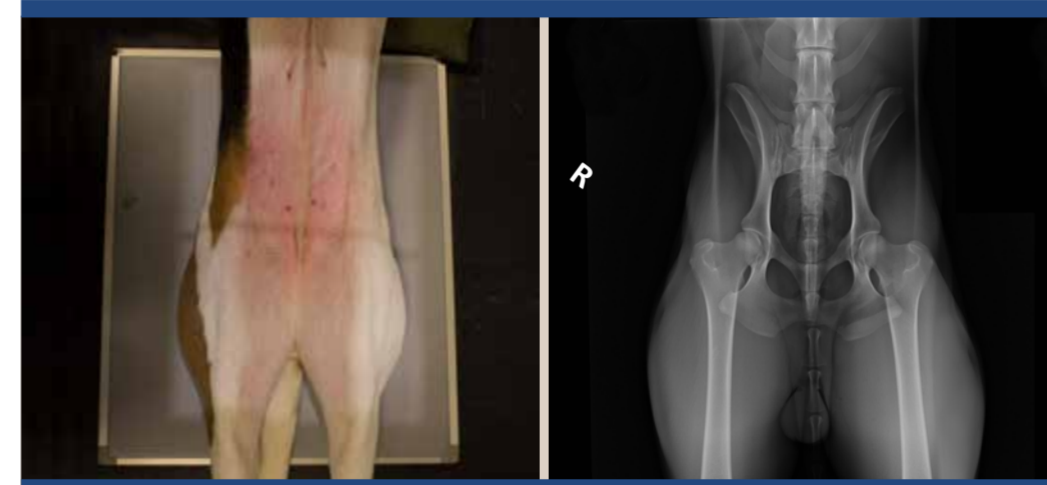
Elbow - Flexed Lateral Positioning

- Position dog in lateral recumbency, lying on side you want to X-ray
- Pull other leg back and secure
- Ensure elbow is flexed to approximately 45° - avoid over-flexing
- Use cotton wool or foam pads to ensure radius and humerus are parallel to plate
- Centre over humeral condyle and collimate to 1/3 of the way along radius/ulna distally and 1/3 of the way along humerus proximally
- You may need to use ties or sand bags to ensure leg remains correctly flexed
- Ensure L/R marker in primary beam



Elbow - Extended Lateral Positioning

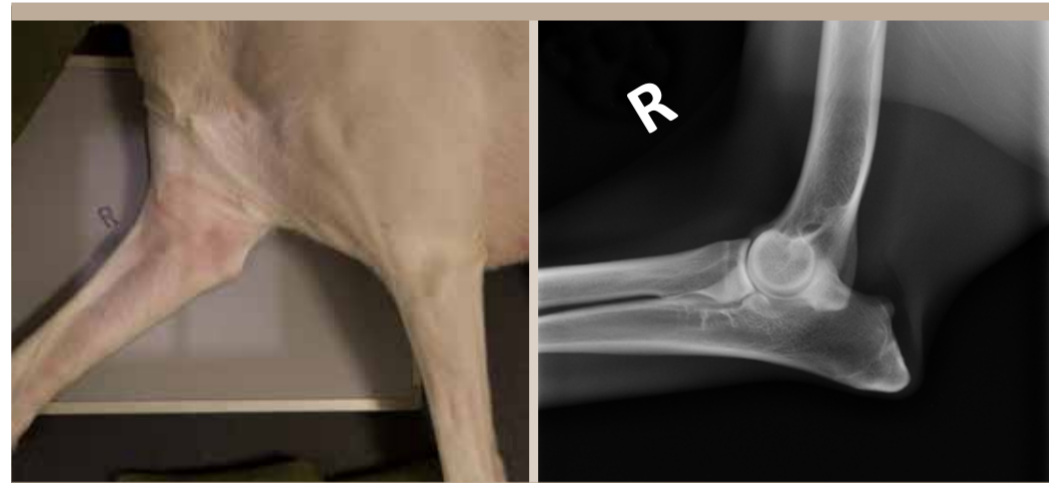
- Position dog in lateral recumbency, lying on side you want to X-ray with leg to be radiographed against plate parallel to the plate
- Pull other leg back and secure
- Ensure elbow is extended to approximately 110°
- Use cotton wool or foam pads to ensure radius and humerus are lying parallel to the plate
- Centre over the humeral condyle and collimate to 1/3 of the way along the radius/ulna distally and 1/3 of the way along humerus proximally
- You may need to use ties, or sand bags to ensure leg remains correctly extended
- Ensure L/R marker in primary beam



Hips - Ventrodorsal (VD) Positioning

- Dorsal recumbency
- Dog ideally in a trough
- Fully extend the hind legs and adduct, so the femurs lie parallel to each other and parallel to the film/cassette
- The legs should be rotated inwards, patellae central - over the trochlea groves
- Align the tail straight between the thighs
- Centre in the mid line, over the level of the cranial edge of the pubis, directly between the femoral heads
- Use ties and tape to retain this position
- Ensure L/R marker in primary beam

Standard views



Elbow - Lateral Positioning

- Position dog in lateral recumbency, lying on the side you want to X-ray
- Pull other leg back and secure
- Use cotton wool or foam pads to ensure radius and humerus are parallel to the plate
- Centre over humeral condyle and collimate to 1/3 of the way along the radius/ulna distally and 1/3 of the way along the humerus proximally; this can be extended further if a fracture is suspected
- Elbow should be in a neutral position, i.e. flexion of around 90°
- Ensure L/R marker in primary beam



Elbow - Craniocaudal (CrCa) Positioning

- Sternal recumbency with leg to be radiographed extended forward
- Use sandbags and wedges as required to maintain position
- Use a leg tie to prevent the elbow from abducting (see photo)
- Turn head away from leg you are imaging
- Position paw in DP
- Centre midway between condyles and collimate to cover 1/3 of the way along humerus proximally and 1/3 of the way along radius and ulna distally
- Ensure L/R marker in primary beam



Pelvis - Lateral Positioning

- Dog in lateral
- Use pads or sandbags to ensure femurs parallel to table top
- Ensure femurs superimposed, and tail out of region of interest
- If trauma case ensure hind limbs pulled back to allow visualisation of pelvis
- Centre over the hip
- Collimate to include the entire pelvis
- Ensure L/R marker in primary beam

Full range of X-ray positioning guides available to download for free on the learning section of the BCF website



X-ray views also built into the Vita Flex CR X-ray system software as standard; exclusively available from BCF Technology

Visit www.bcftechnology.com