

**SUNY DOWNSTATE MEDICAL CENTER  
UNIVERSITY HOSPITAL OF BROOKLYN  
POLICY AND PROCEDURE**

X-Ray-21

**Subject:** NEONATAL CHEST AND ABDOMEN  
PROTOCOL

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**Original Issue Date:** 3/2011

**Reviewed by:** Donna McKenzie, EMBA.,

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**Effective Date:** 2/1015

**T.J.C. Standards: PC. 01.02.15 (EP. 5,10 &12)**

**EC.02.02.** The hospital has written procedures, including the use of precautions and personal protective equipment, to follow in response to hazardous material and waste spills or exposures.  
**(EP.3)IM. 020101**

**Approved by:** H. Schwarzberg, M.D.

Harry Zinn, M.D.

**Related Policies No.** RAD-6 *Radiology Patient Safety*

**Issued by:** Radiology Department

**I. PURPOSE:**

To standardize the methodology for acquiring radiographic studies on neonatal patients

**II. DEFINITION**

None

**III. POLICY**

Images shall be maintained with limited dosage, in a manner which will produce a diagnostic image using techniques that will give the patient As Low As Reasonable Achievable (ALARA)

**IV. RESOPONSIBILITIES:**

All staff including technologies and doctors

**V. PROCEDURES/GUIDELINES**

**A. Chest**

Single frontal view collimated from lung apices to umbilicus. Side to side collimation should exclude as much upper extremities as possible. Gonadal shielding is not necessary.

\*Lateral decubitus views may be done as ordered. Collimation will be as appropriate.

**B. Abdomen-**

Single frontal view of the abdomen collimated from lower lung fields to Pubic symphysis.

- **Gonadal shielding will be used for males, by placing shield over scrotal area.**
- No gonadal shielding to be used for females.
- Cross table lateral and decubitus view may be done as ordered. Collimation as **appropriate Gonadal Shielding for males should be used.**

**C. Chest and Abdomen-**

Single AP view of the chest and abdomen, collimated from lung apices to public symphysis.

- **Side to Side collimation should exclude as much as possible to upper and lower extremities.**
- **Scrotal region should be shielded in males.**

\* Although one X-ray is obtained, **TWO** orders are necessary –**ONE** for chest and for abdomen

**VI. ATTACHMENTS:**

None

**VII: REASON FOR REVISION:**

Review

**VIII: REFERENCES**

- *TJC STANDARDS*
- *UHB Policy RAD-6 Radiology Patient Safety*

Date Reviewed	Revision Required (Check One)		Responsible Staff Name and Title
3/2011	(Yes)		J. SHANAHAN, Radiology Administrator
3/2013		(No)	O. Jardine, Acting Radiology Administrator
2/2015	(Yes)	No	.Carbone, Associate Director Radiography
	Yes	No	