**Appendix**

**Skeletal survey: standard views to be obtained**

**Head, chest, spine and pelvis:**

* Anterior-posterior (AP) and lateral skull
* AP chest (to include shoulders) and both obliques (obliques to include all ribs, left and right, 1 – 12)
* AP abdomen and pelvis
* Lateral views to include the whole spine. (For children under one year, this may be possible with one view, for larger children and those over one year, separate views will probably be required.)

**Upper limbs:**

Where possible:

* AP of the whole arm (centred at the elbow if possible)
* Coned lateral elbow
* Coned lateral wrist
* Posterior-anterior (PA) hand and wrist

In larger children where a single whole arm view is not possible:

* AP humerus (including the shoulder and elbow)
* AP forearms (including elbow and wrist)
* Coned lateral elbow
* Coned lateral wrist
* DP hand and wrist

**Lower limbs:**

Where possible:

* Whole AP lower limb, hip to ankle
* Coned lateral knee and ankle
* Coned AP ankle (mortise view)
* DP foot

For larger children

* AP femur
* AP tibia and fibula
* AP knee
* Coned lateral knee
* Coned lateral ankle
* DP foot

**Follow-up imaging**

* Follow-up radiographs should be performed of any abnormal or suspicious areas on the initial skeletal survey

**Chest:**

* Chest AP and both obliques (to include the shoulders and all ribs, left and right, 1 – 12)

**Upper limbs:**

Where possible:

* AP whole arm (centred at the elbow if possible)

In larger children where a single whole arm view is not possible:

* AP humerus (including the shoulder and elbow)
* AP forearms (including elbow and wrist)

**Lower limbs:**

Where possible:

* Whole AP lower limb, hip to ankle

For larger children:

* AP femur
* AP tibia and fibula