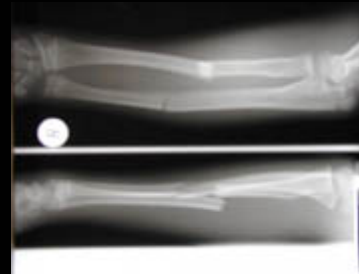
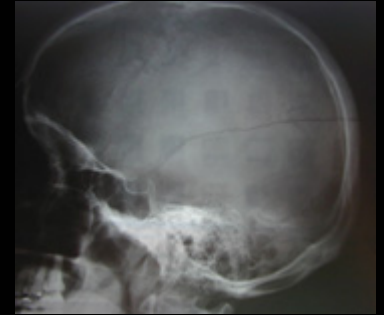
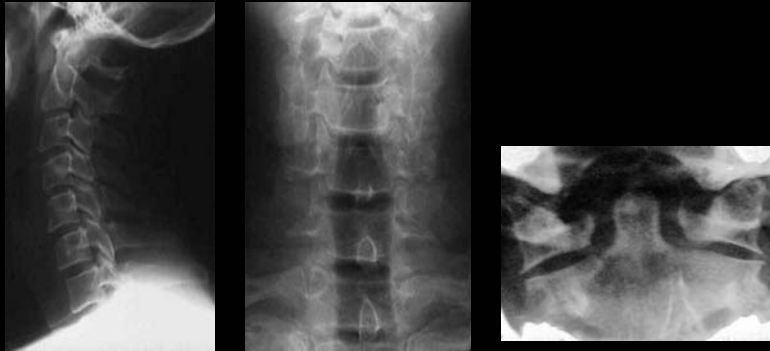




TRAVMA RADYOLOJİSİ

Dr. İbrahim İKİZCELİ
Erciyes Üniversitesi Tıp Fakültesi, Kayseri

Hedefler





Servikal Grafiler



Teknik

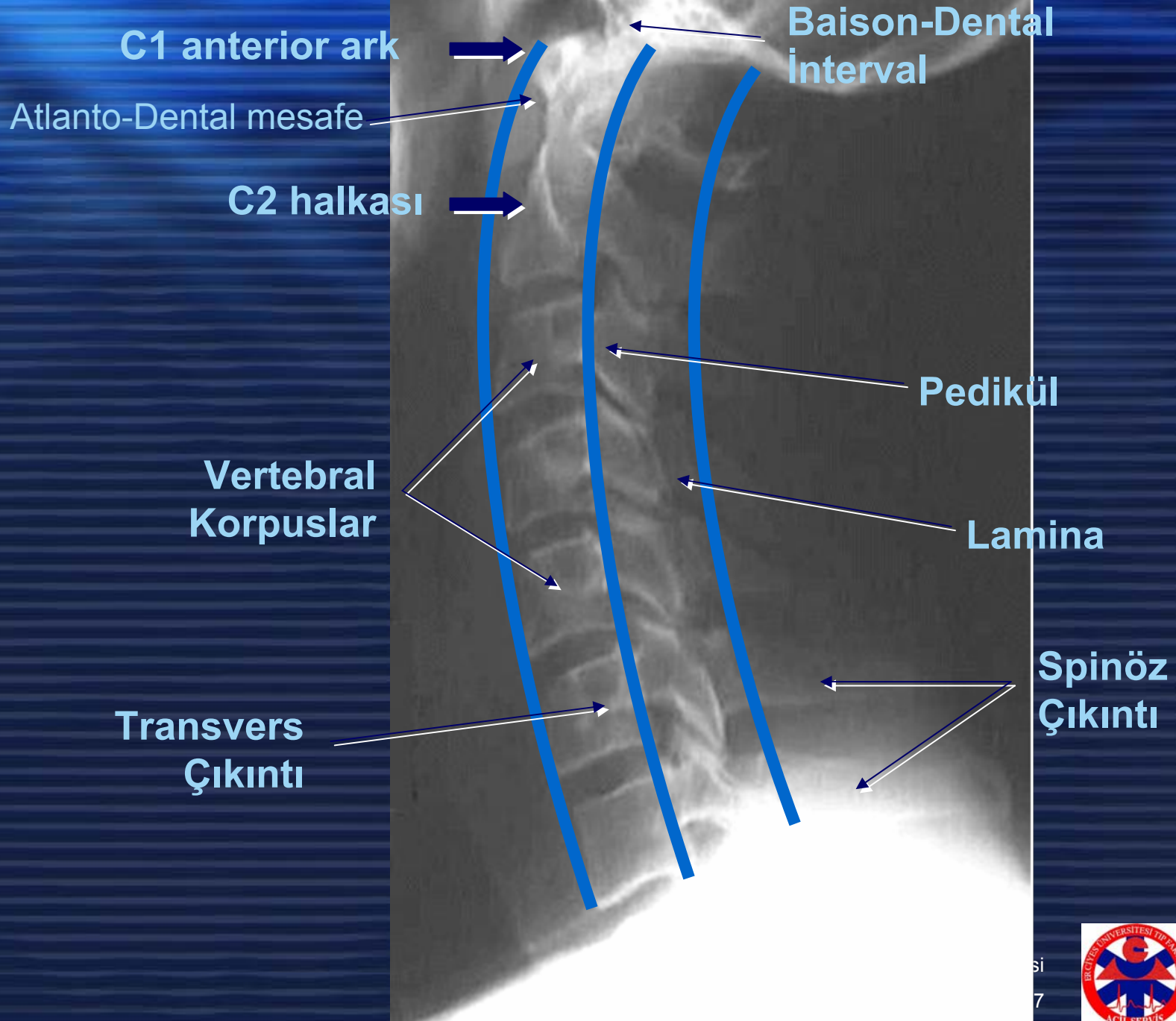
	Teknik	Uygunluk	Açıklama
Lateral	Supin İmmobilize Yandan Kollara traksiyon	Kafa tabanı – T1 üst Takılar çıkarılmış Sağ-sol lat.cisimler üstüste binmiş	Çoğu fraktür ve dislokasyonlar %85
AP	Supin İmmobilize Baş ve boyun düz Karşıdan	Boyun düzgün Spinöz çıkıntılar orta hatta	Vertebral cisim fx Uncinate çıkıntı fx Lateral cisim fx Spinöz çıkıntı fx Faset dislokasyonu
Açık-Ağız Odontoid	Supin İmmobilize Baş ve boyun düz Karşıdan	Dişler ve kafa tabanı Dens-C1-C2 ile üst üste gelmemeli Dens-C2-spinöz çıkıntı orta hatta olmalı	Jefferson fx Dens fx C1'in lateral cisim fx

Lateral Servikal Grafi

- 3 hat izlenmeli
 - Korpus ön hat
 - Korpus arka hat
 - Spinolaminar hat
- Kemik yapılar ve facet eklemleri
- Prevertebral alan
- Baisson-Dental interval
- Occiput ve mandibula



Lateral Servikal Grafi



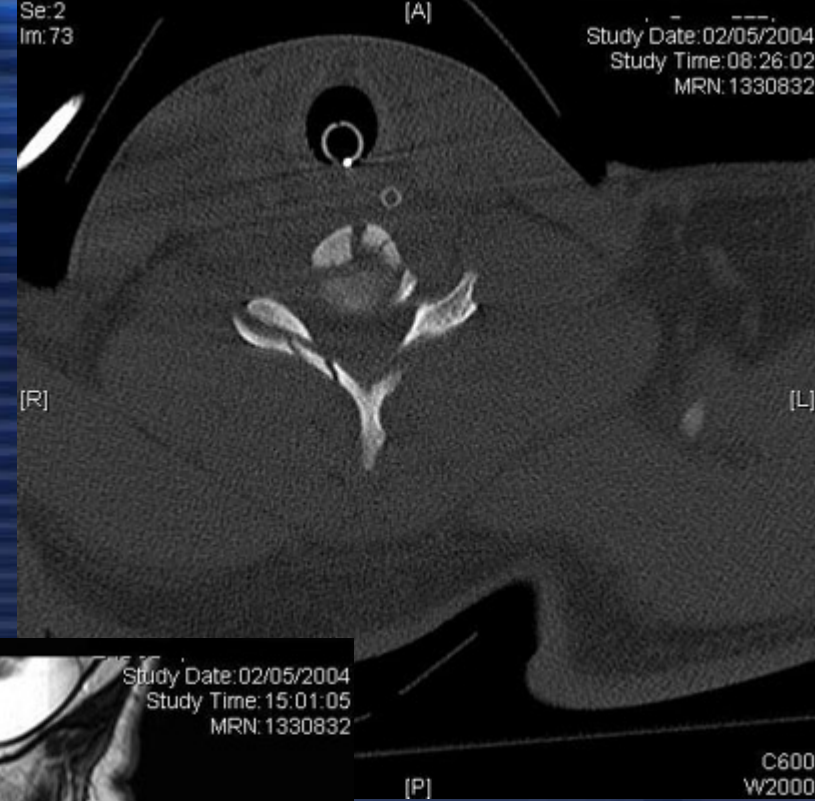




Normal giba.....

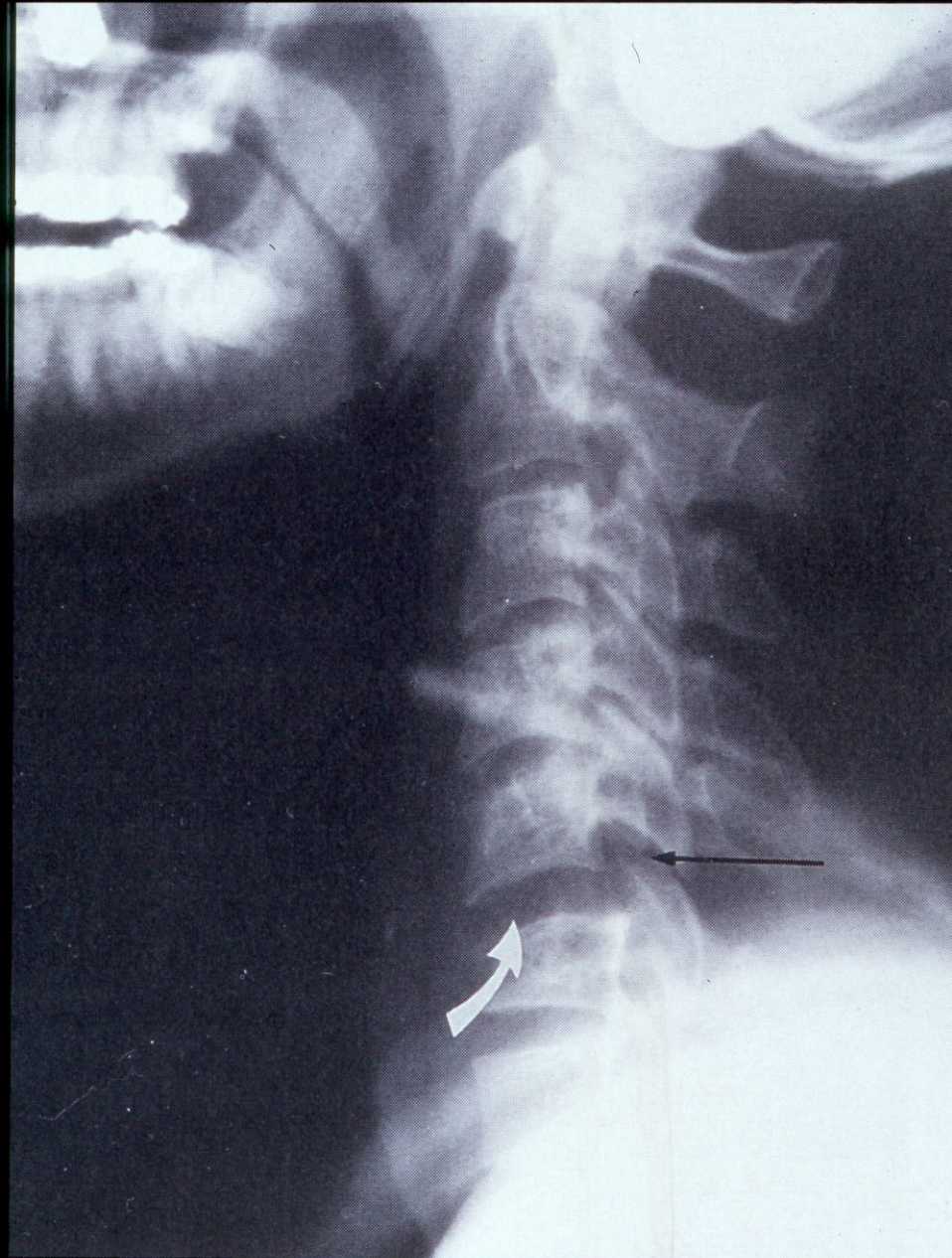


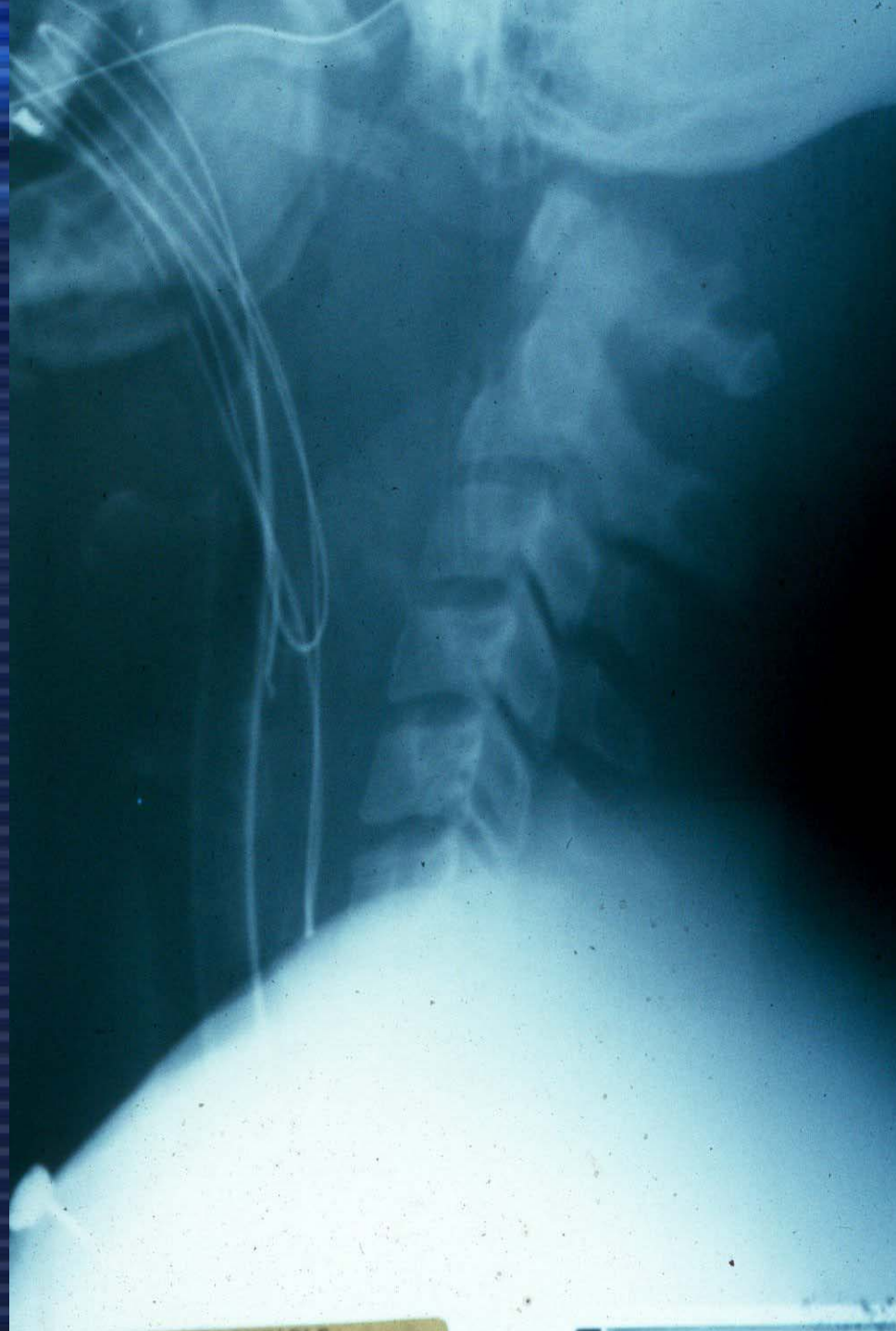
Aynı hasta C7 korpus fraktürü



C6 korpus fraktürü

C5-6 dislokasyon





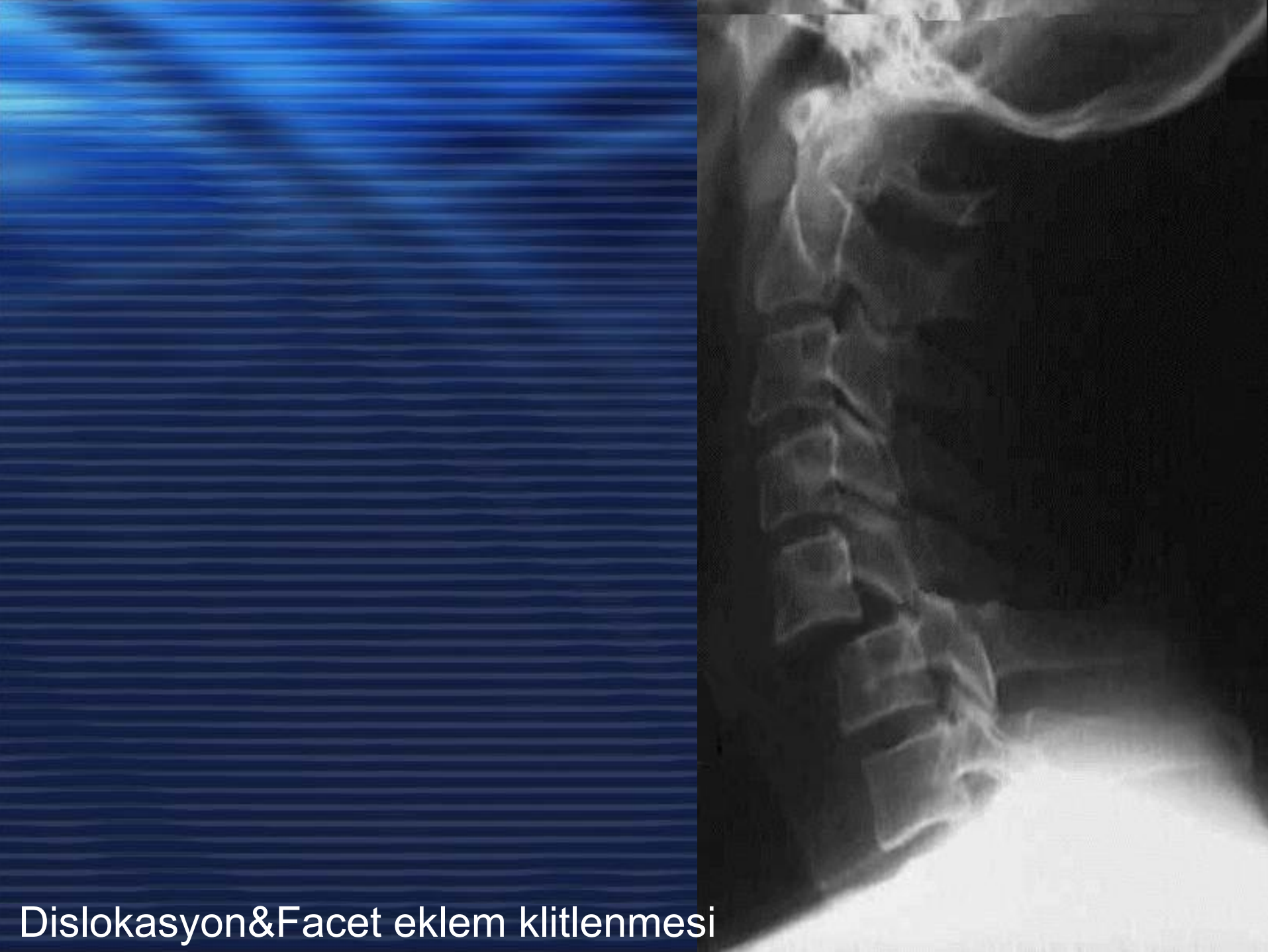
Atlanto-Occipital dislokasyon



C1 fraktörü



Atlanto-Axial Dislokasyon

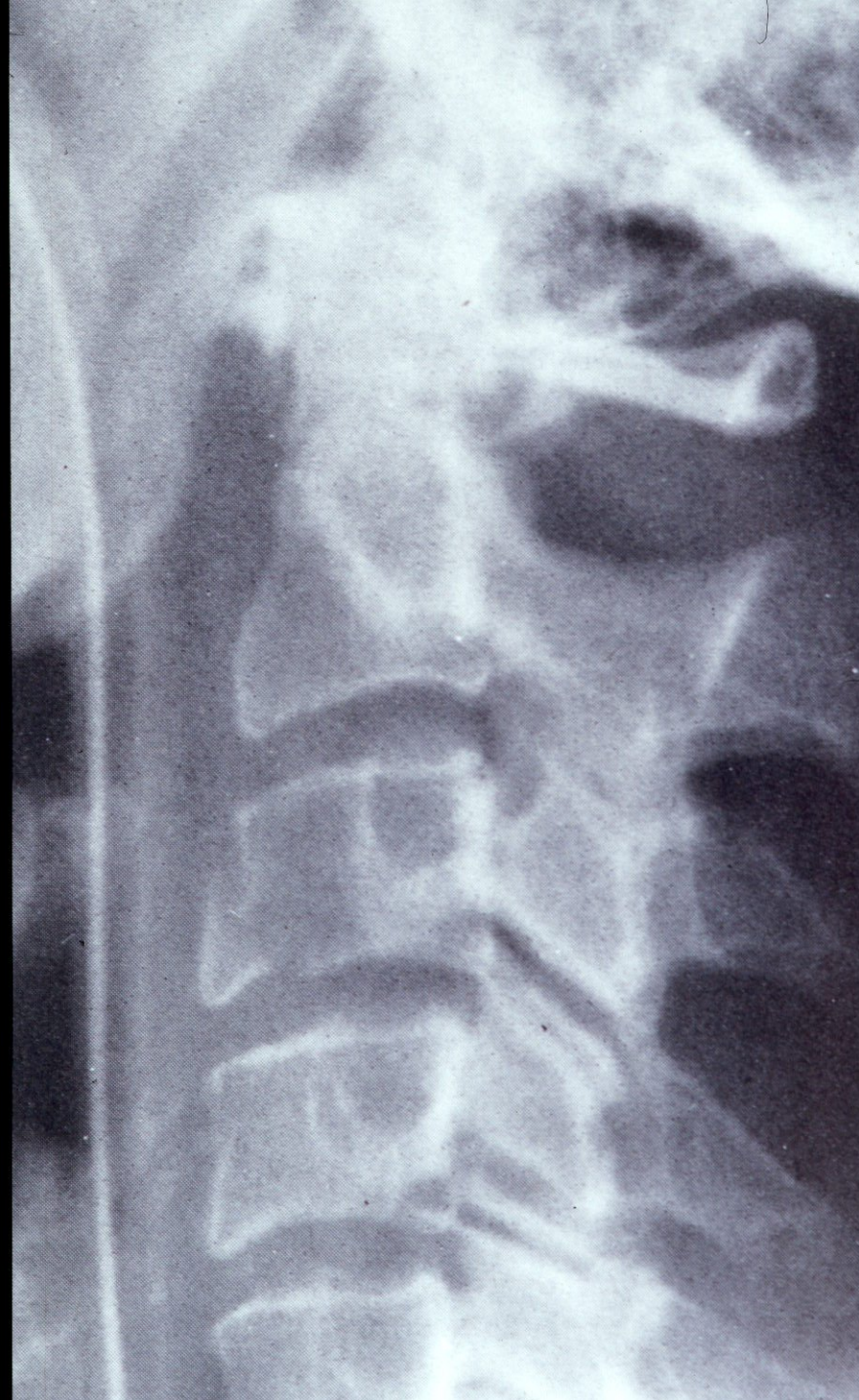


Dislokasyon&Facet eklem klitlenmesi



C2 fraktürü

C3 korpus cisim fraktürü



C7 spinöz proçes fraktürü





C5-6 dislokasyon & fraktür

AP Servikal Grafi

- 3-7 servikal omurga
- Spinöz proçesler orta hatta
- Spinöz proçes aralıkları eşit
- Korpus yükseklikleri eşit
- Faset eklem hatları düzgün
- Uncinate çıkıntılar düzgün hatta
- Yumuşak dokular





C5 korpus fraktürü





C7 transvers proçes fraktürü

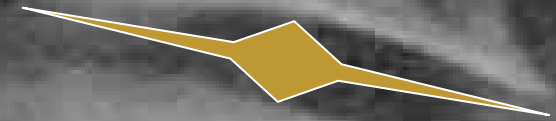
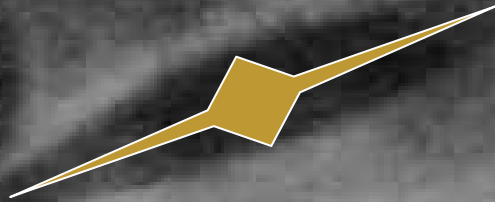
Ağız açık Odontoid Grafi

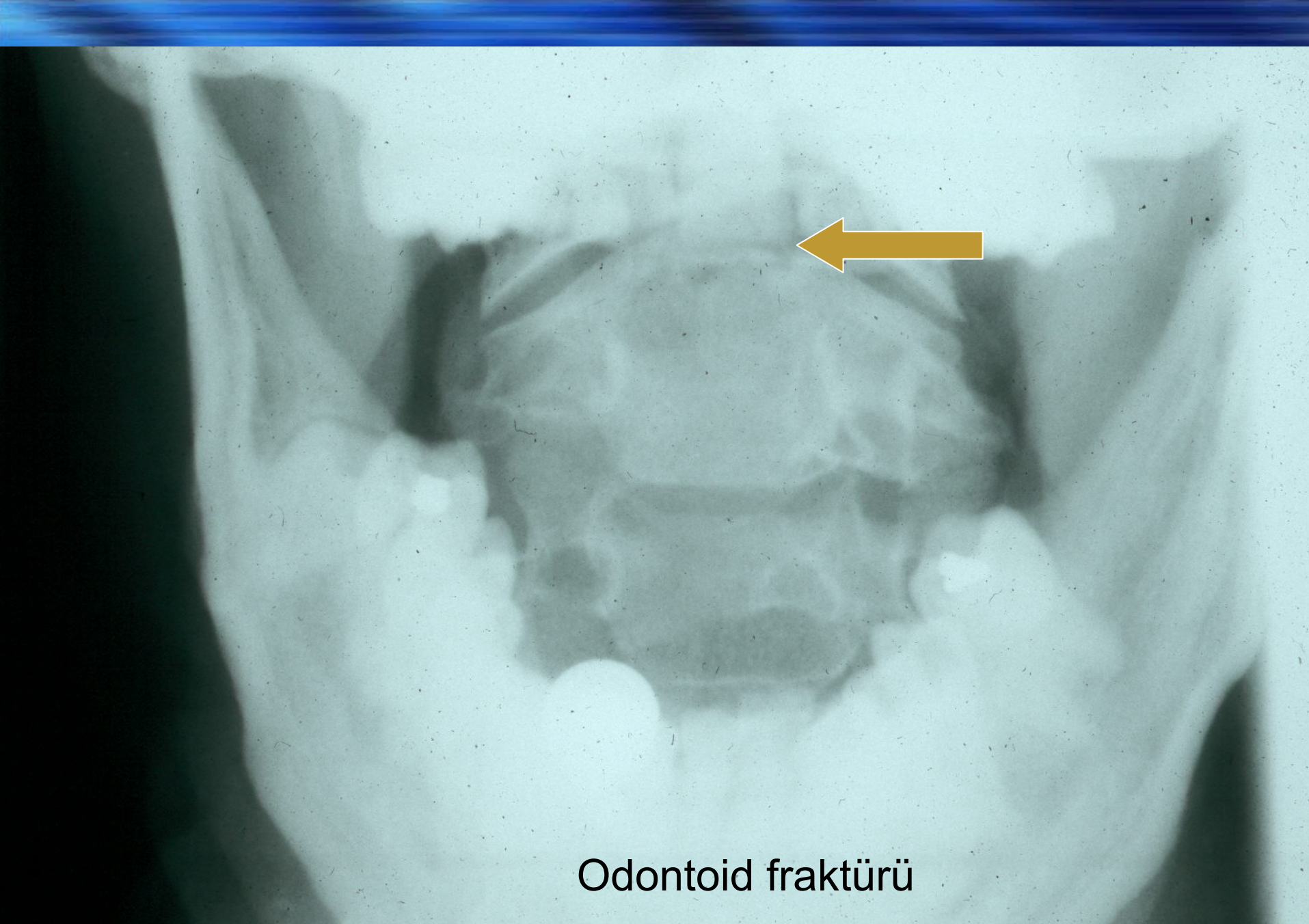
- Dens C1'in lateral cisimleri ile eşit uzunlukta olmalı
- C1 ve C2 eklem yüzeyleri eşit olmalı
- C1 lateral cisimleri ayırık olmamalı



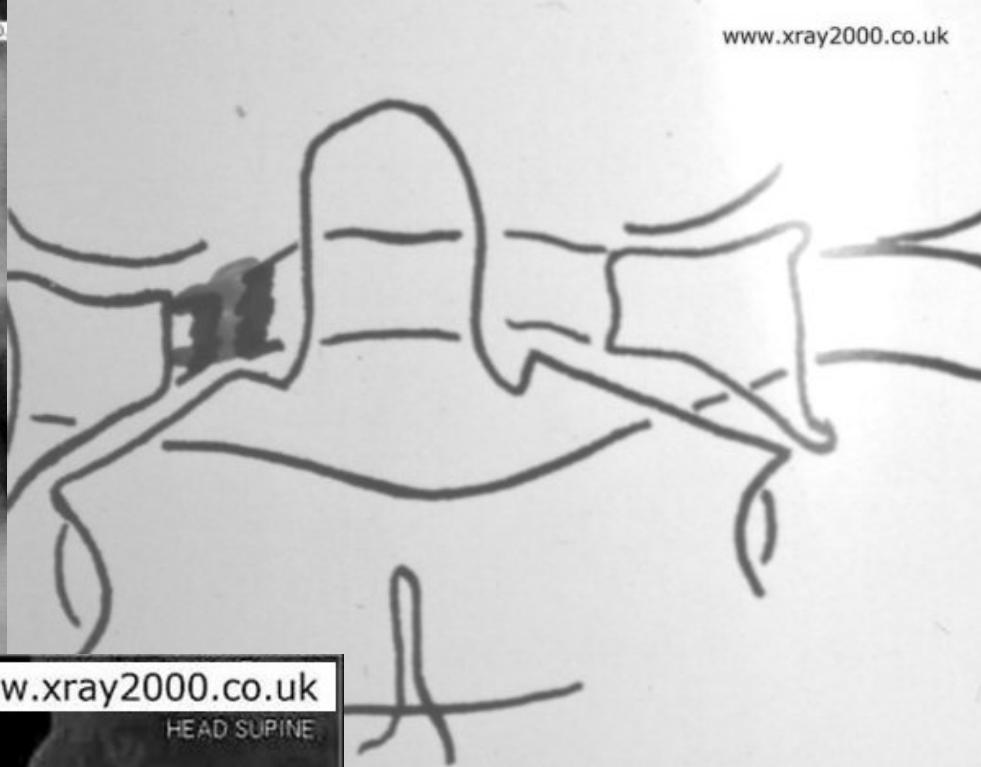
C1 lateral
cisim

Dens

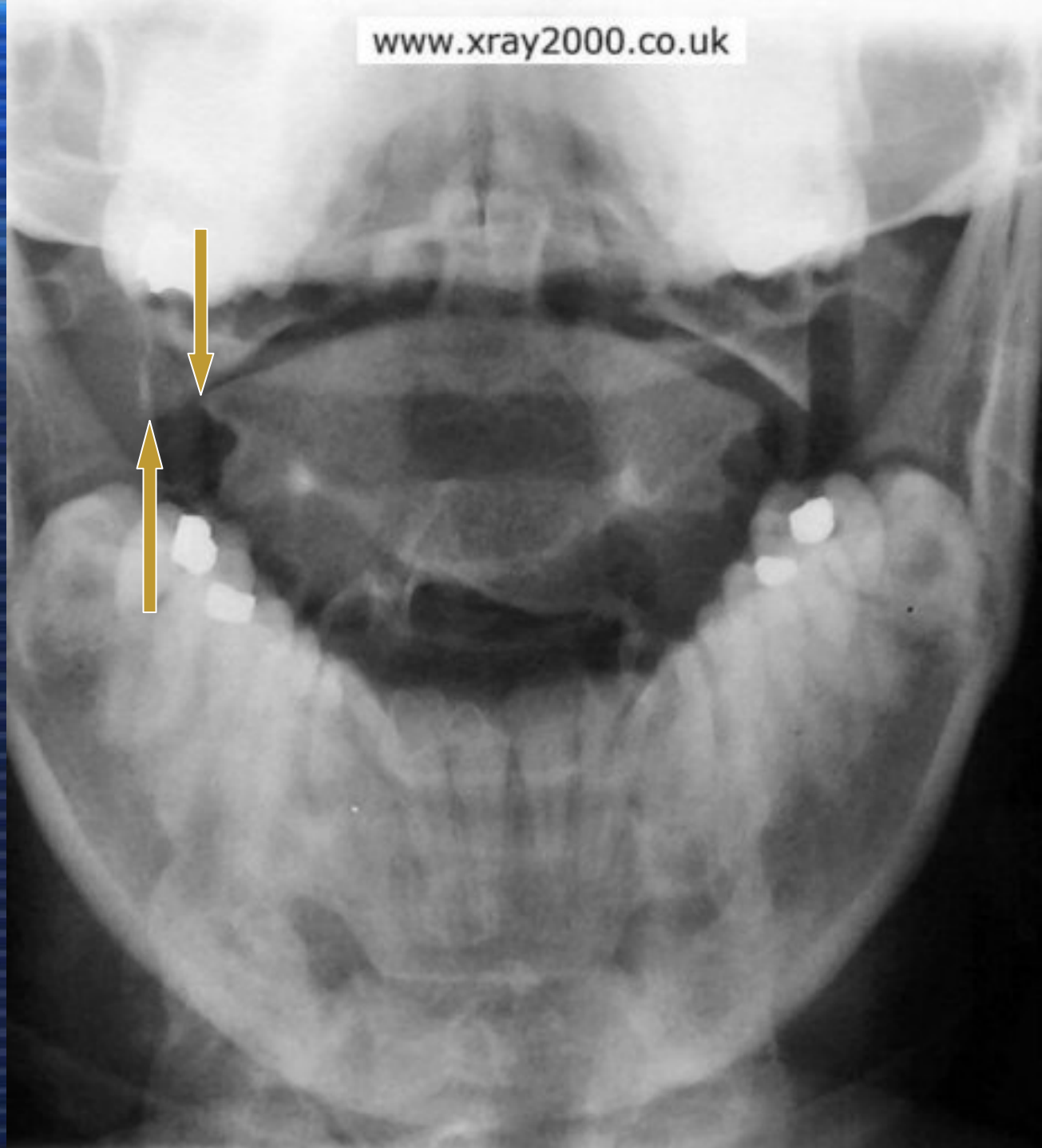




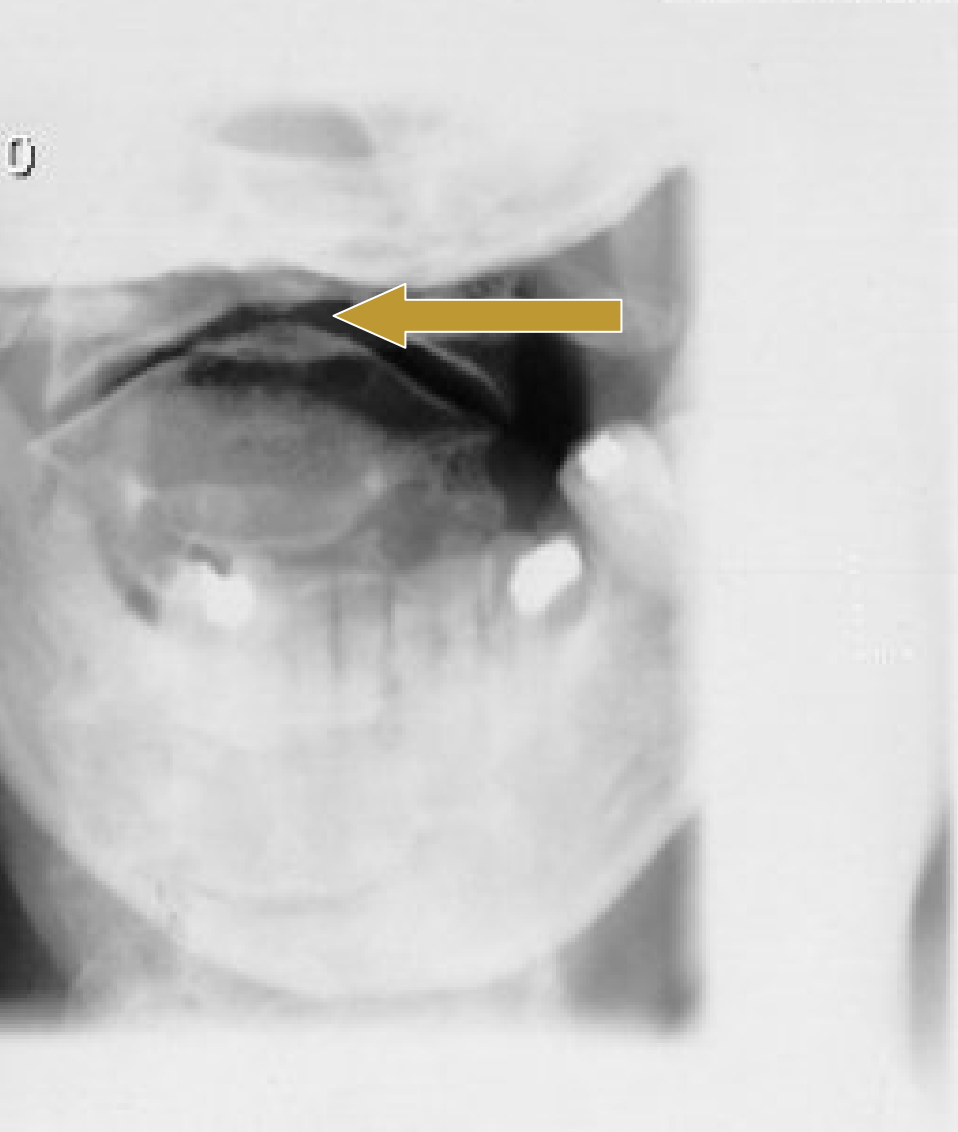
Odontoid fraktürü



C1 fraktürü



C1 fraktürü



Odontoid fraktürü

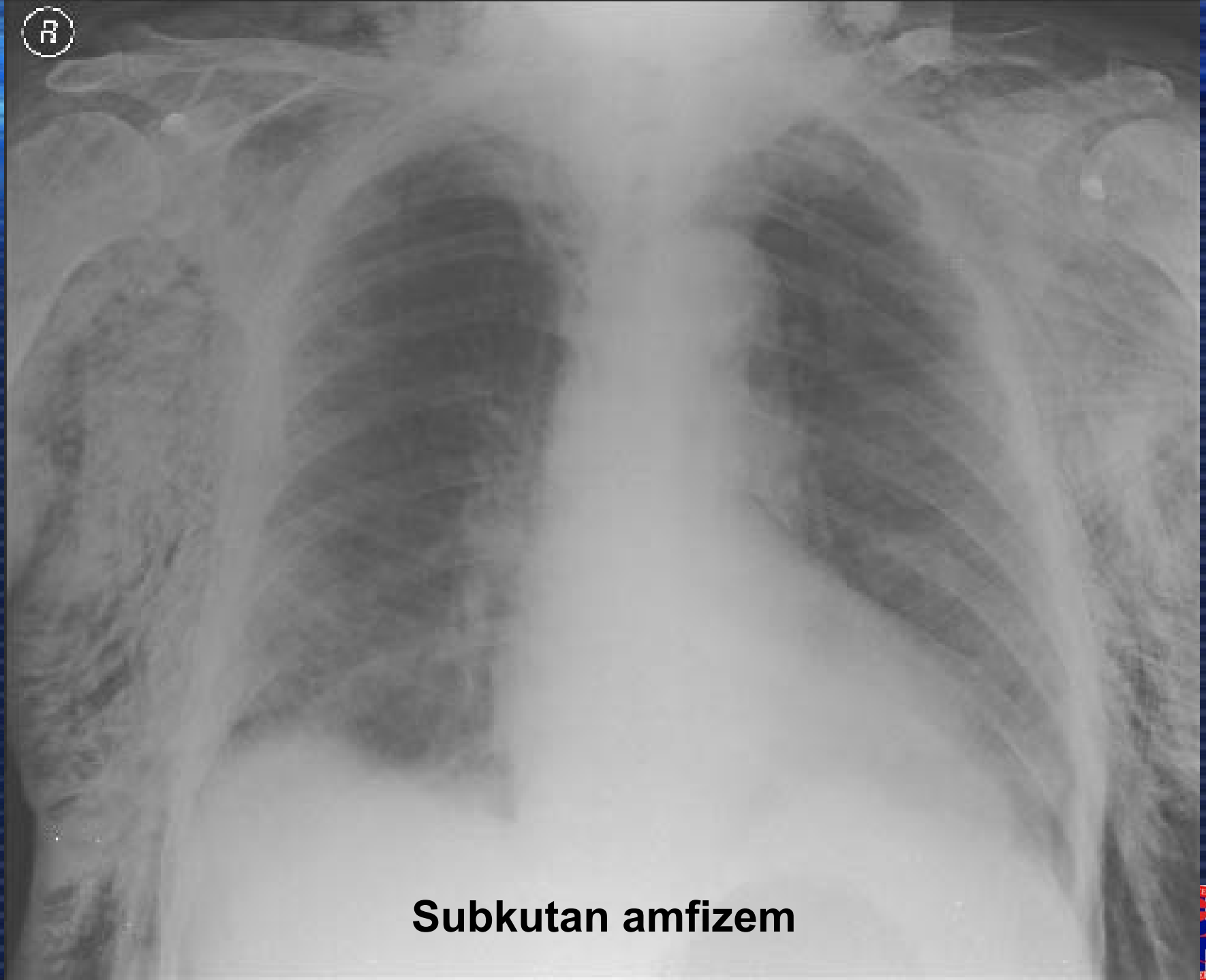


Ap Akciğer Grafisi

- Tüm toraks görülmeli
 - Dış yumuşak dokular
 - Kemik yapılar
 - Diafram
 - AC parankimi
 - Mediasten
 - Trakea
 - Kalp
- Uygun dozda olmalı (4. torakal vertebra görülür)
- Tam inspiryum
- Rotasyon olmamalı



R

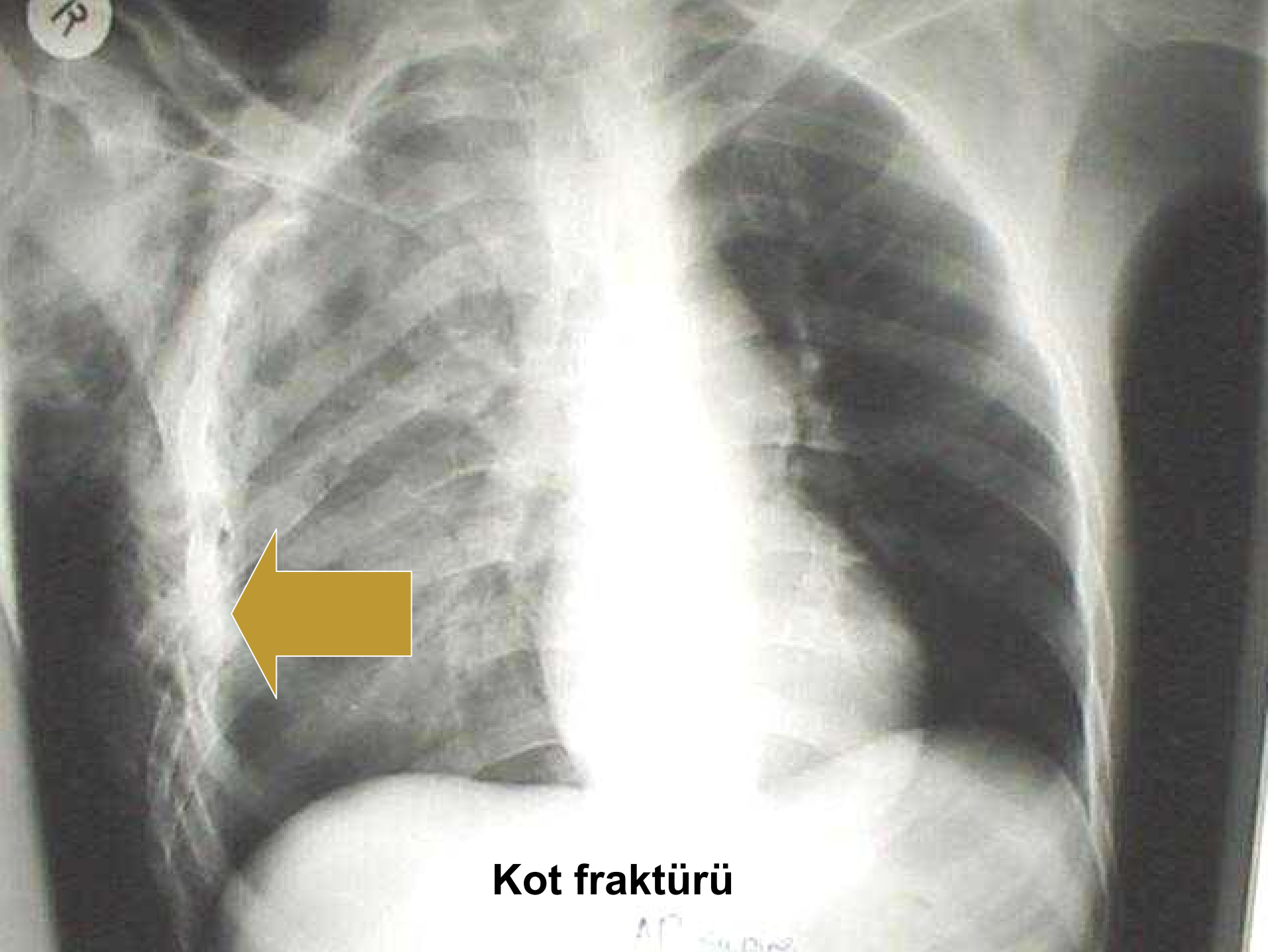


Subkutan amfizem



R
LMG

Kontüzyon

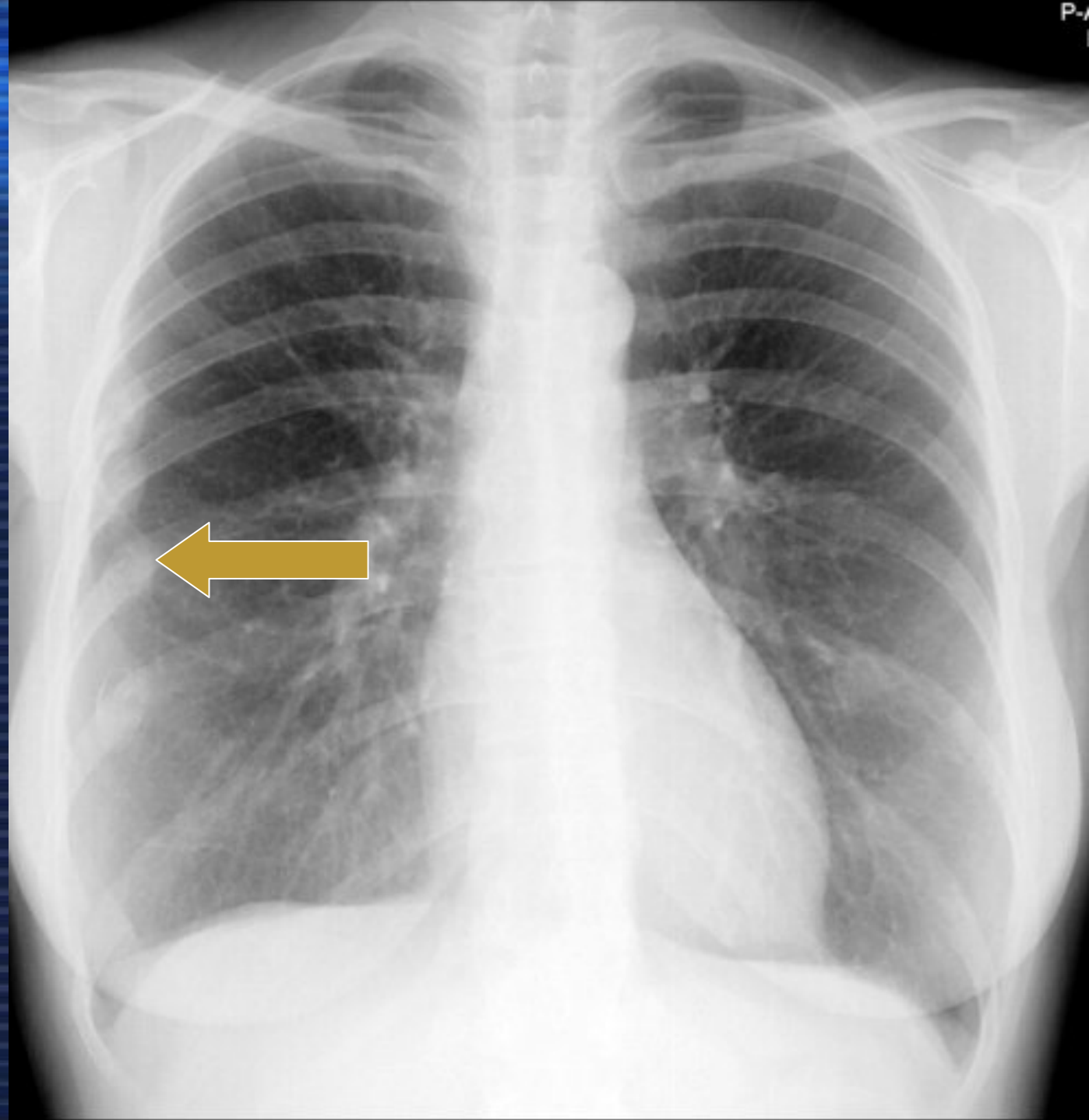


Kot fraktürü

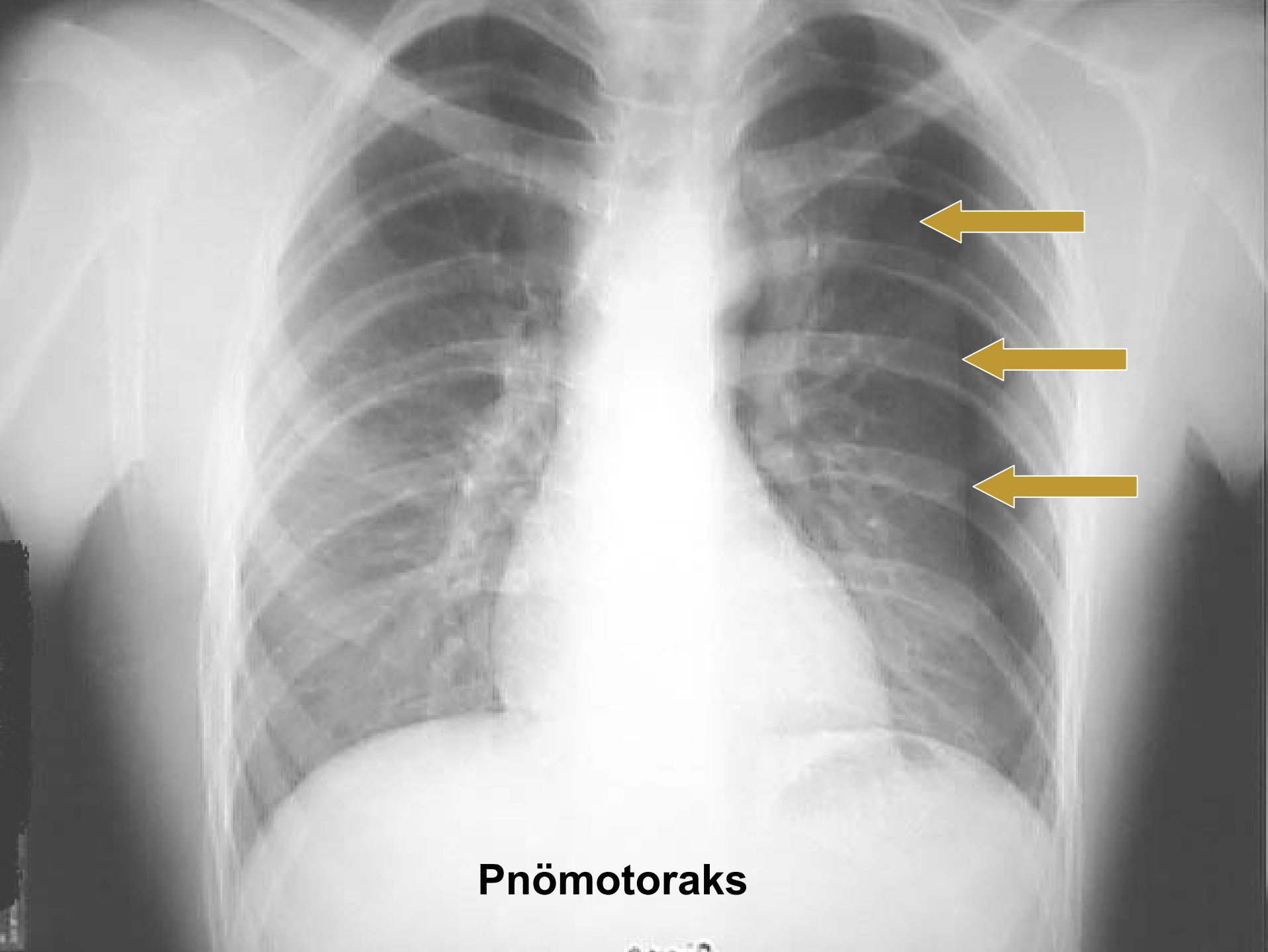


Kot fraktürü&Yelken Göğüs

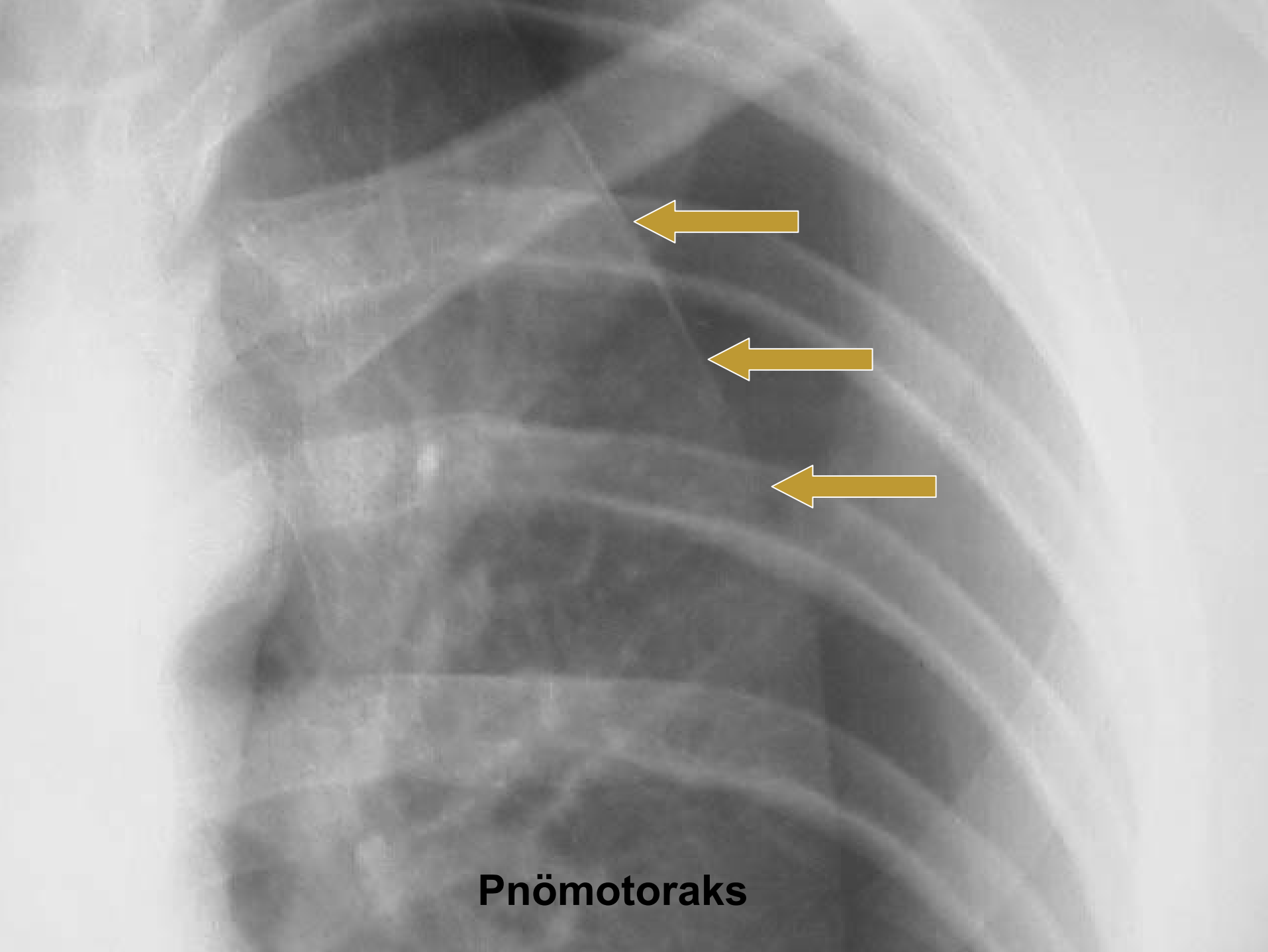
SUPINE



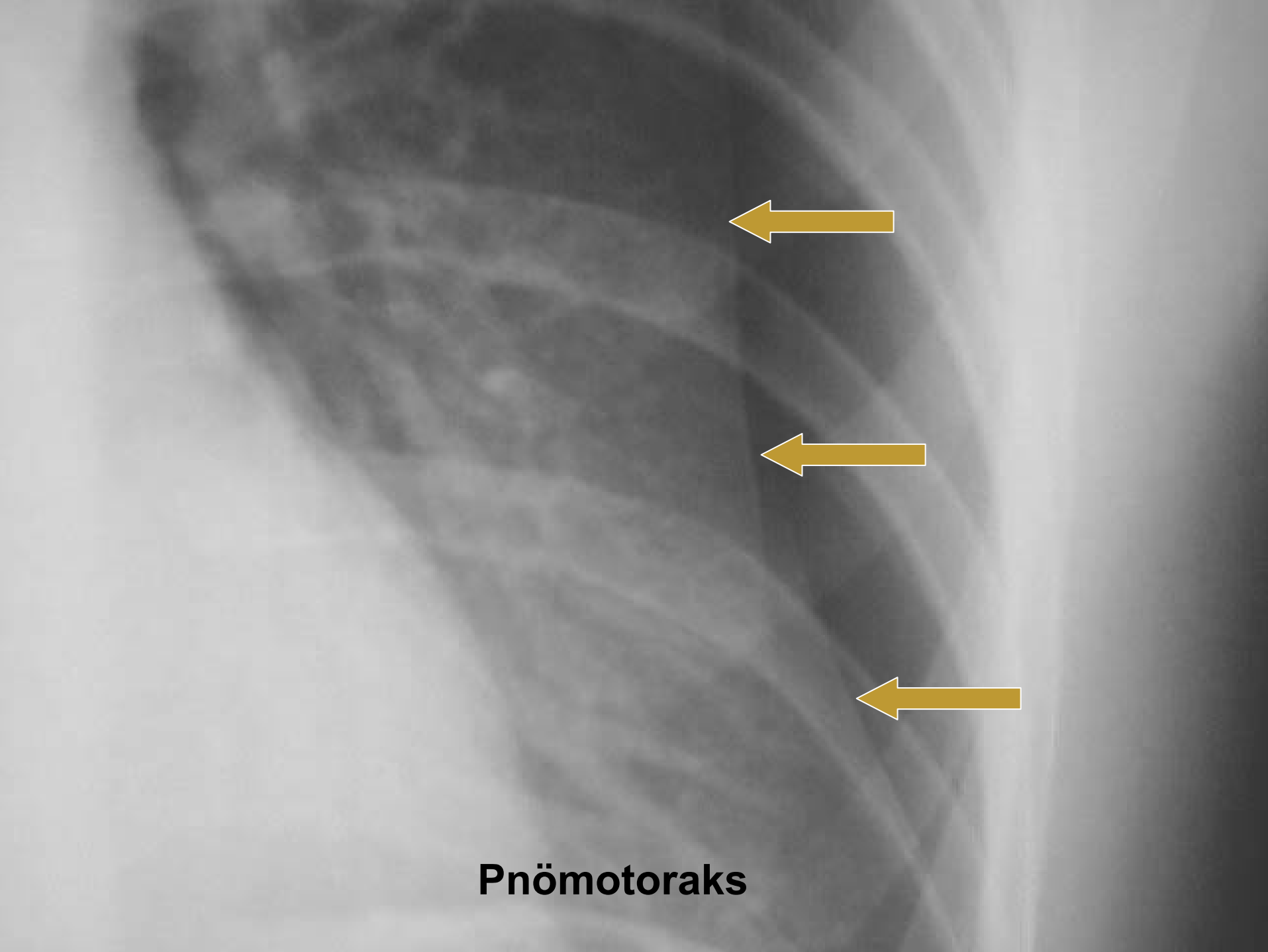
Eski kot fraktürü



Pnömotoraks



Pnömotoraks



Pnömotoraks

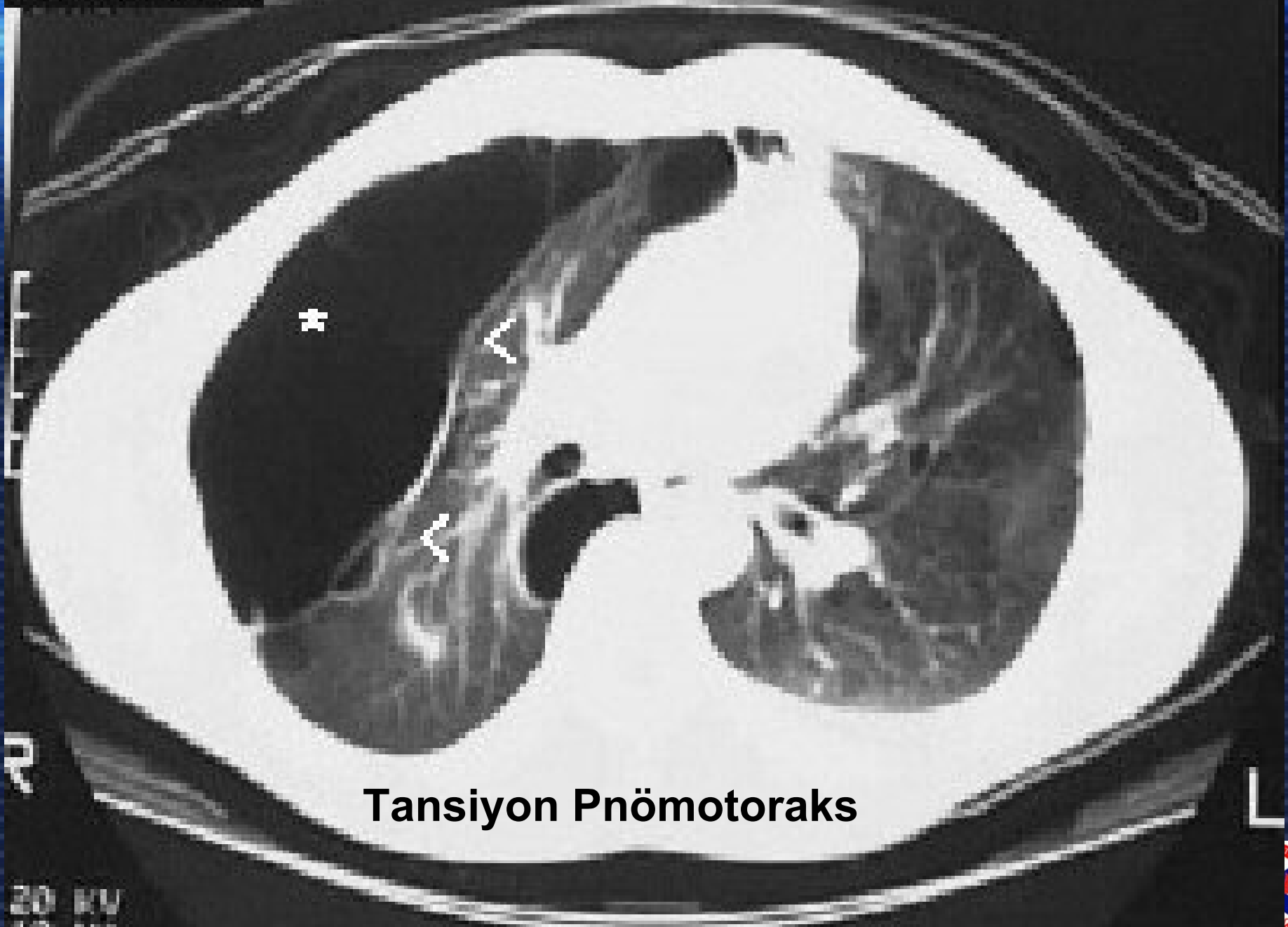


Tansiyon Pnömotoraks



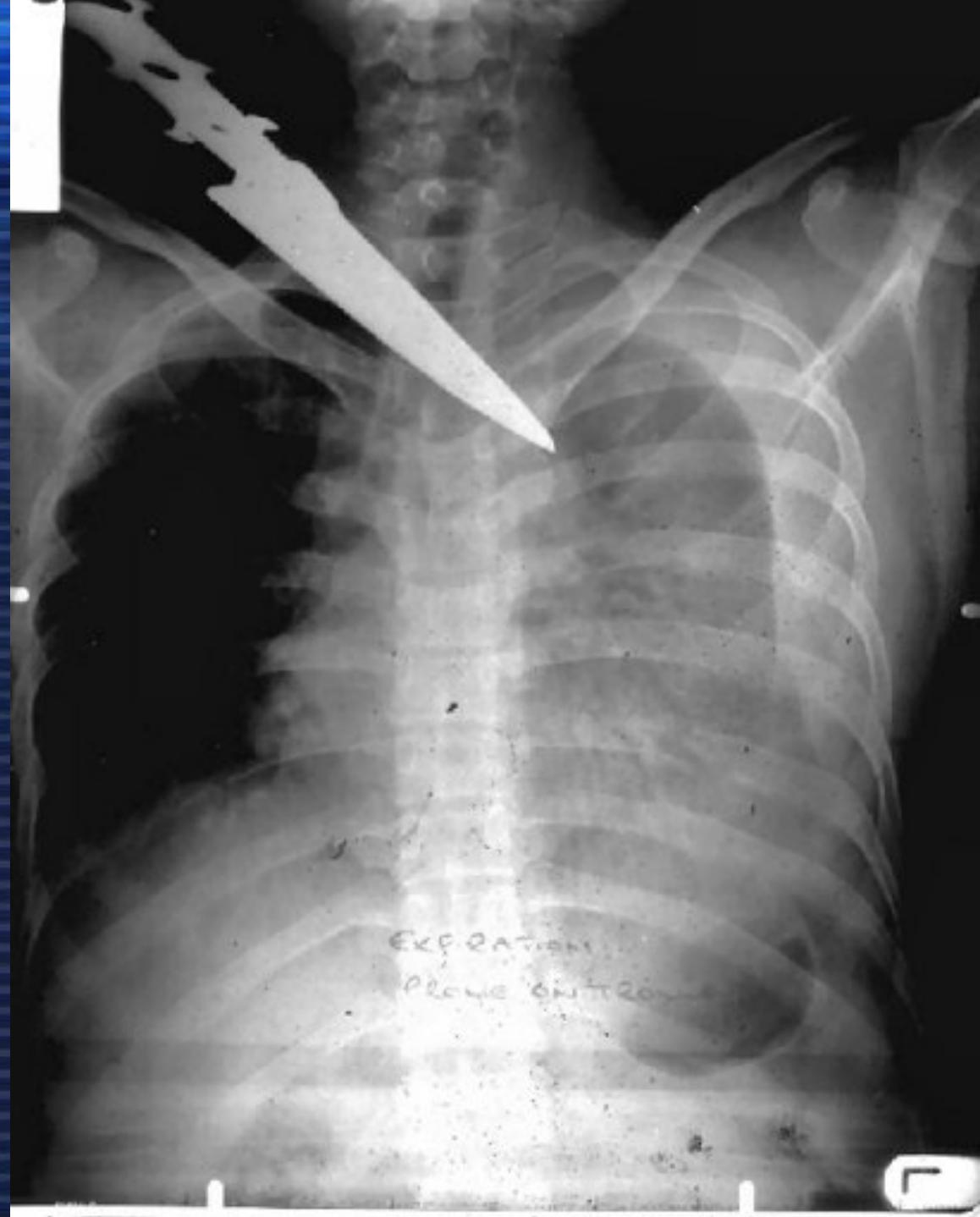
Tansiyon Pnömotoraks

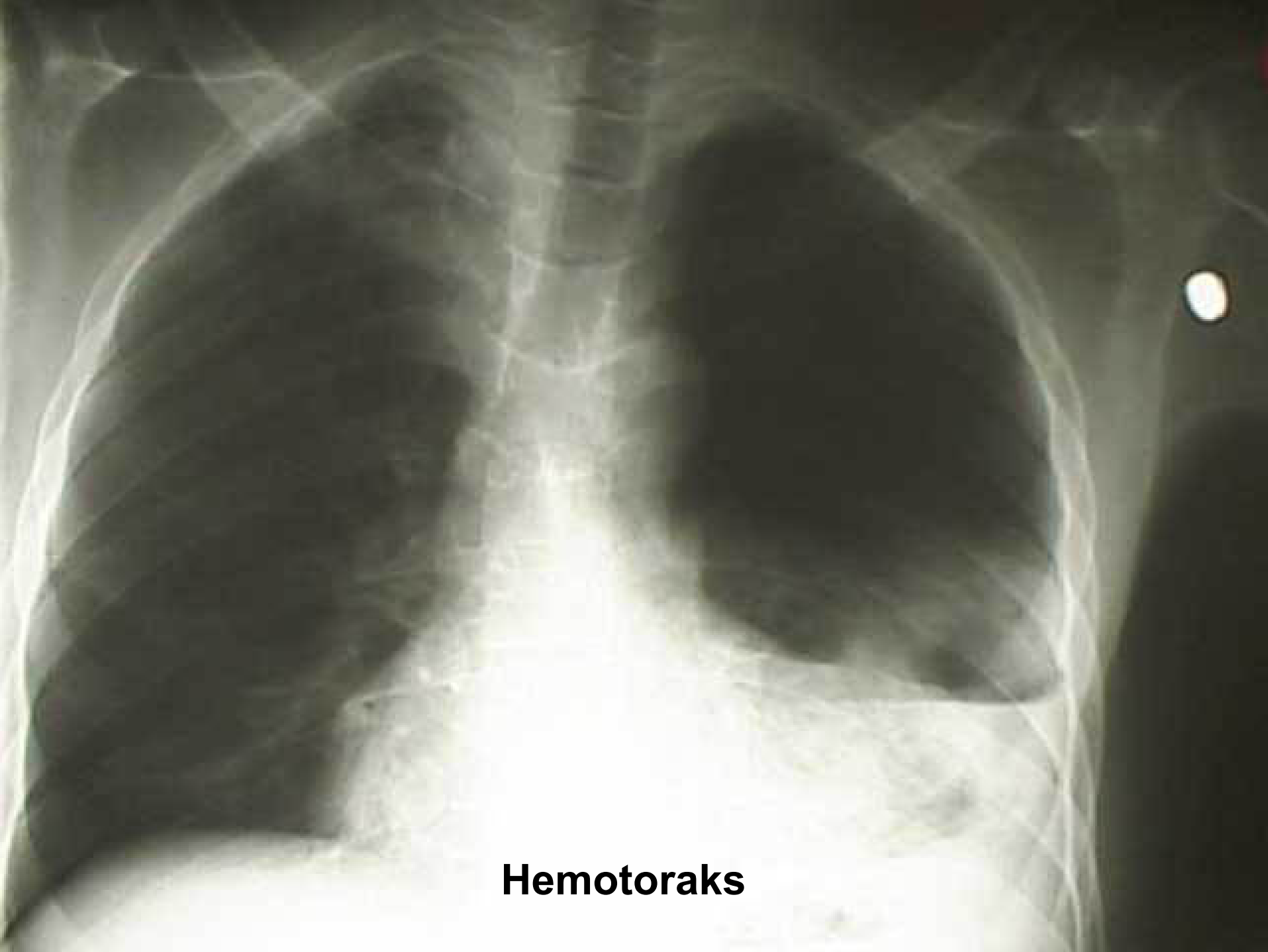
www.xray2000.co.uk



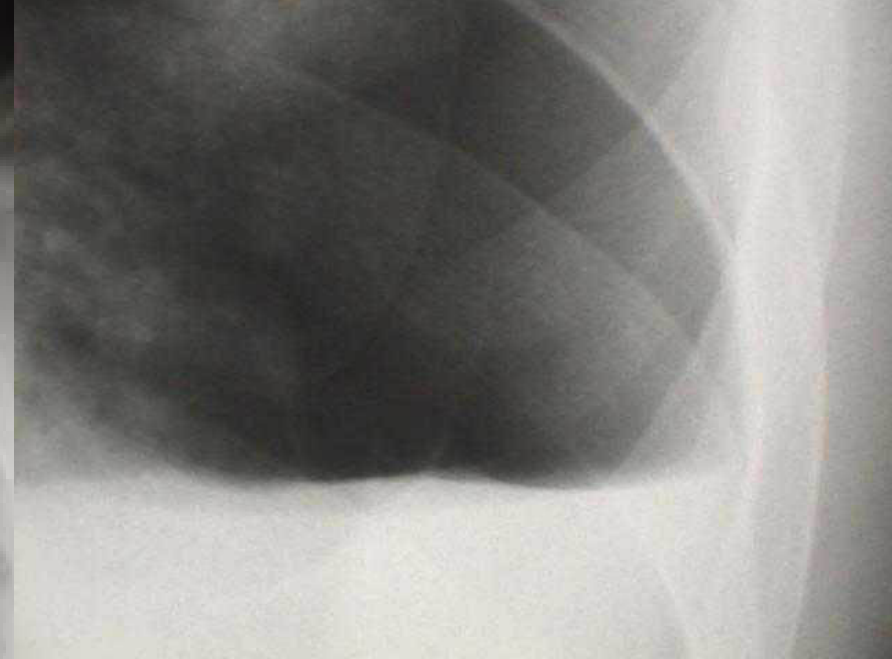
Tansiyon Pnömotoraks

Hemotoraks

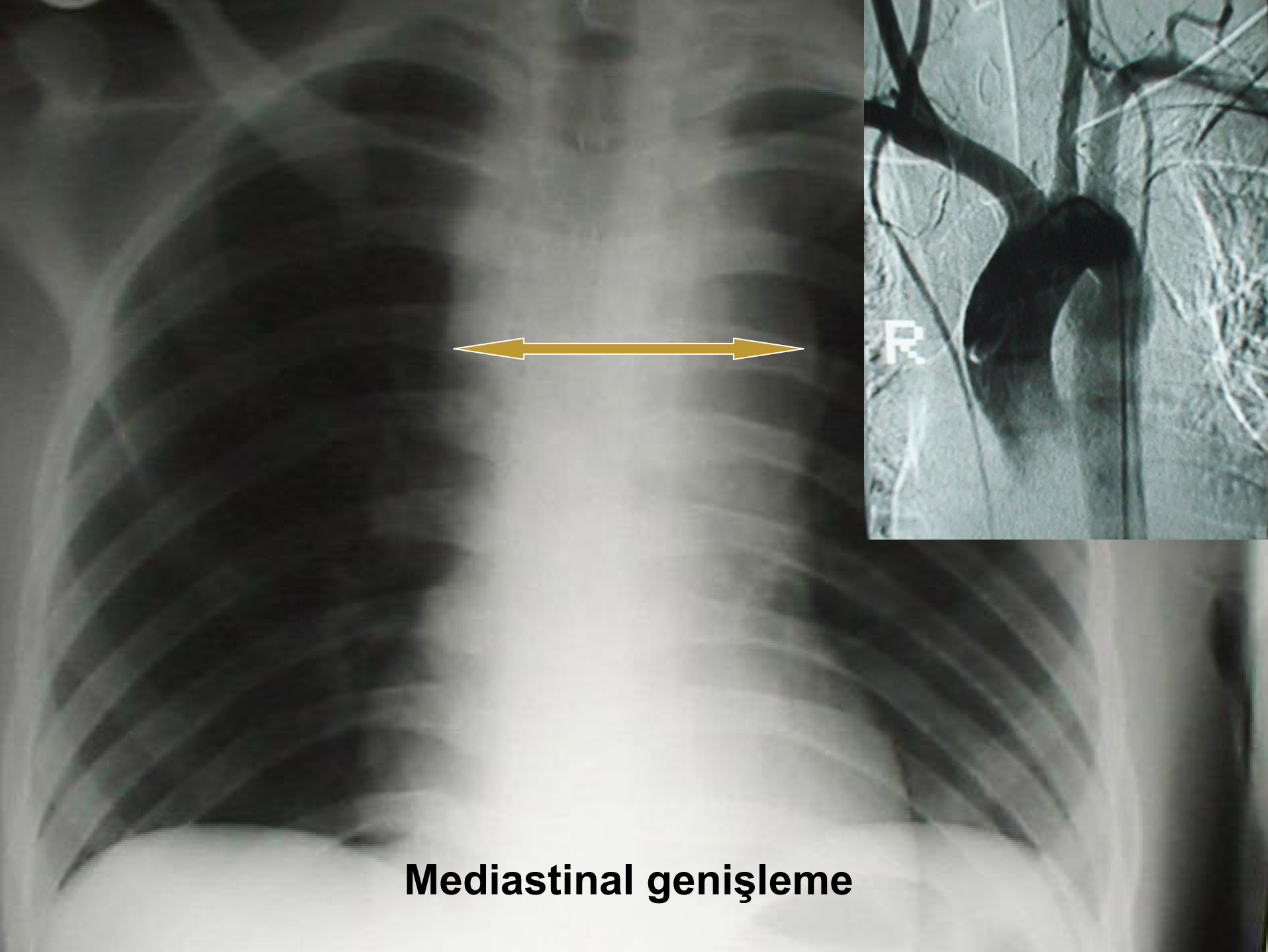




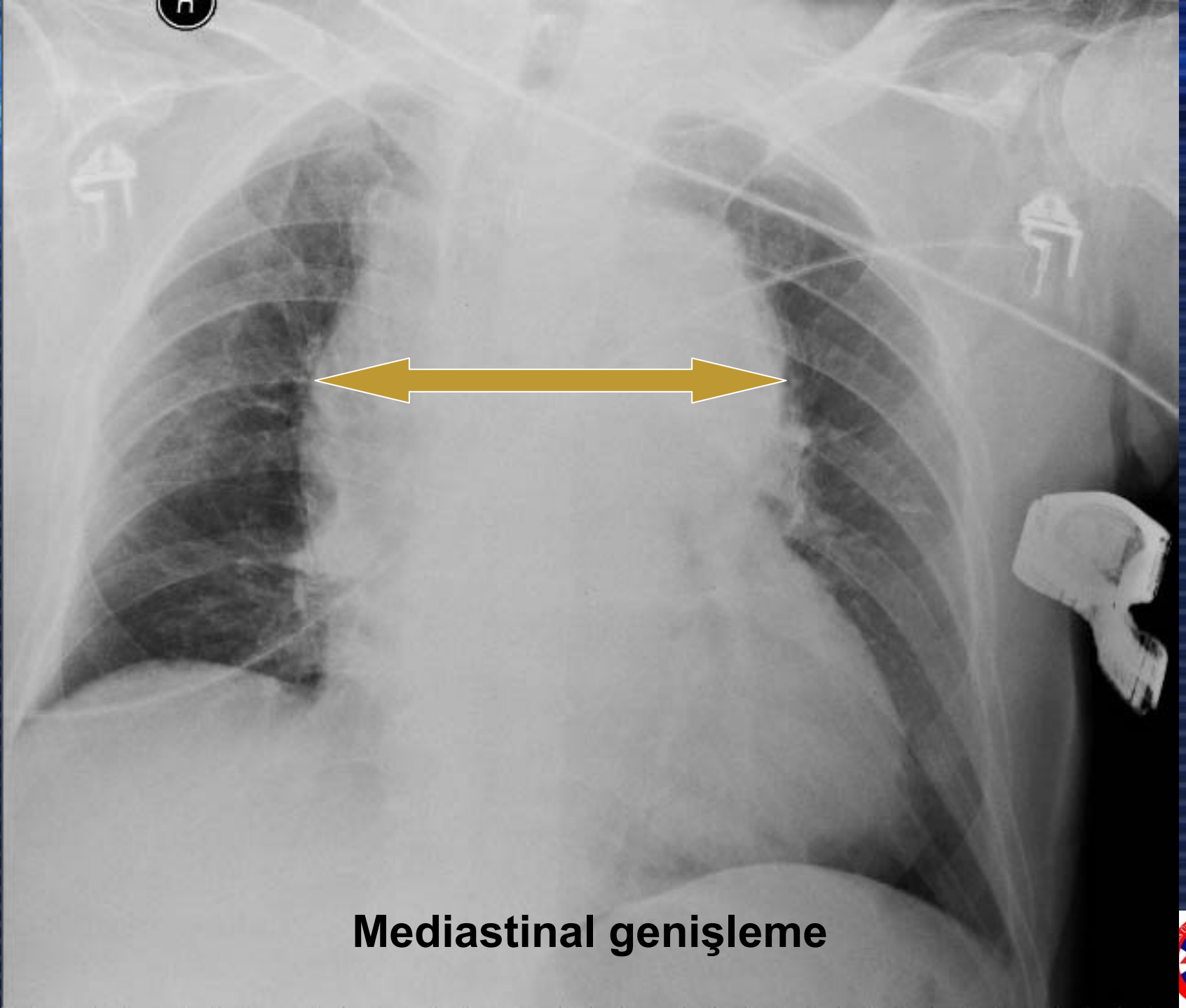
Hemotoraks



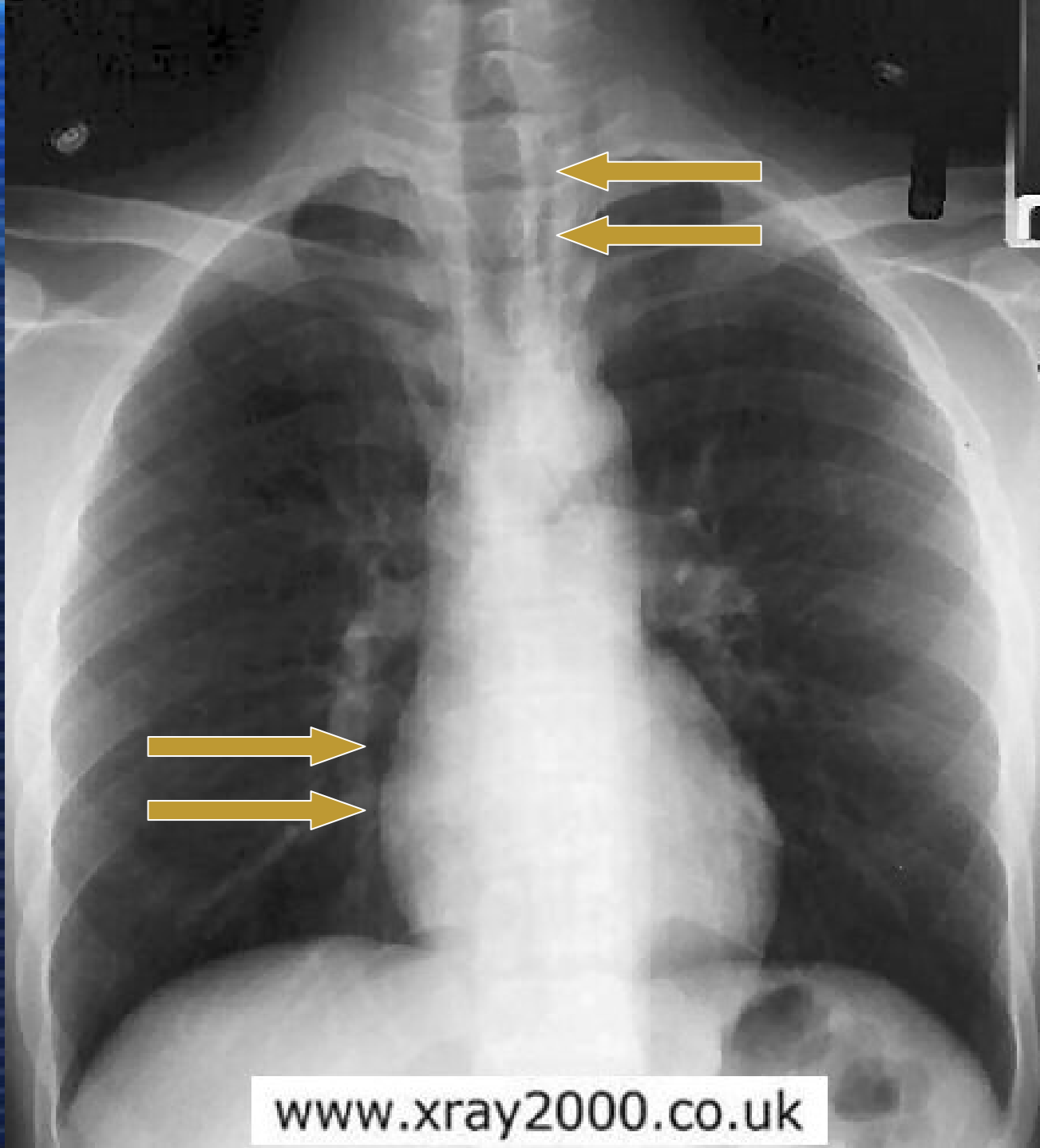
Hemotoraks



Mediastinal genişleme



Mediastinal genişleme



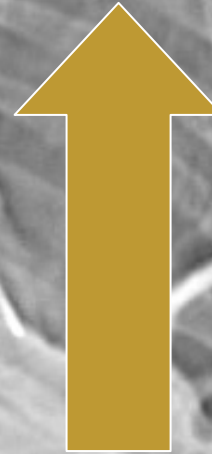
Pnömomediastinium

VC10C
H-SP

06:43:49.71

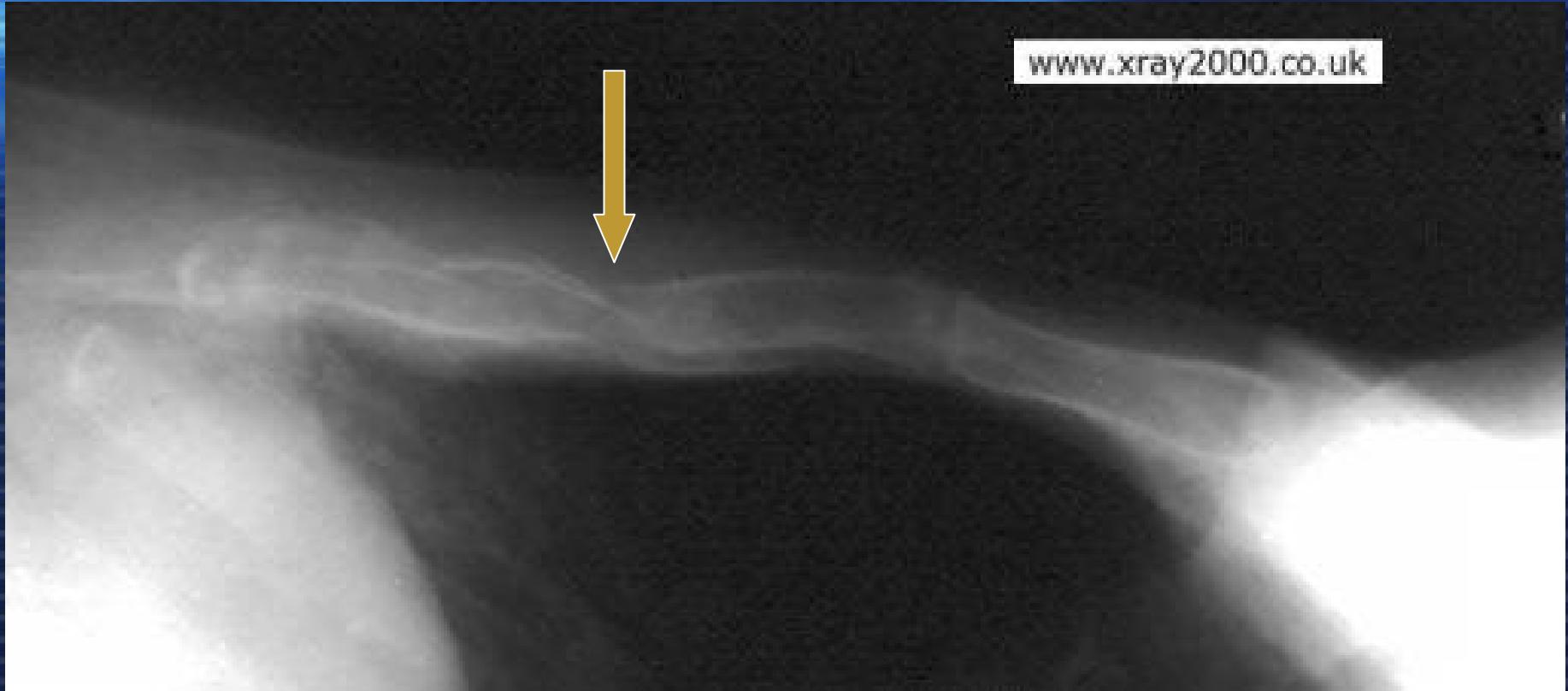
IMA 1

R



10
C
m

Diafragma rüptürü



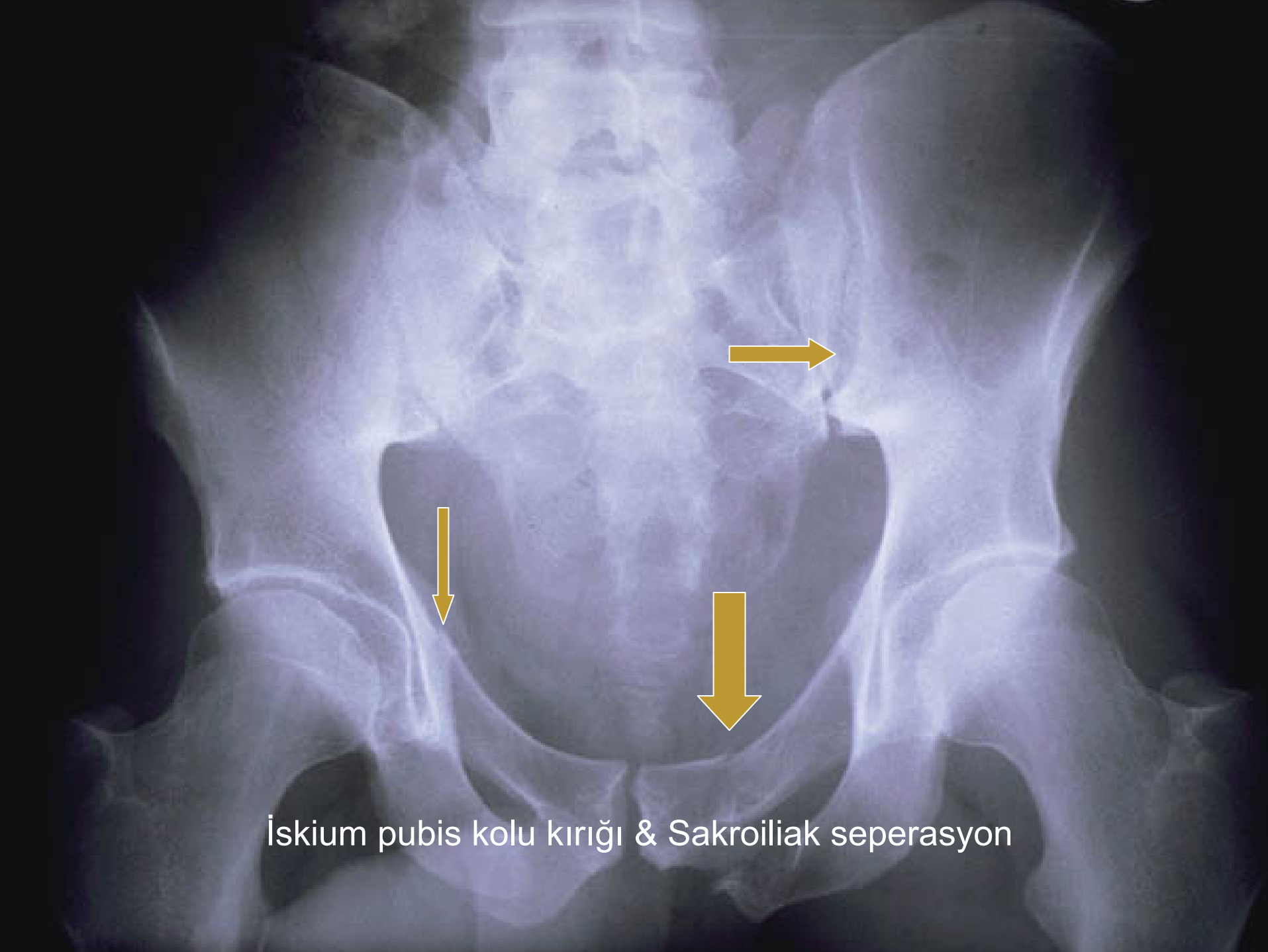
Sternum fraktürü



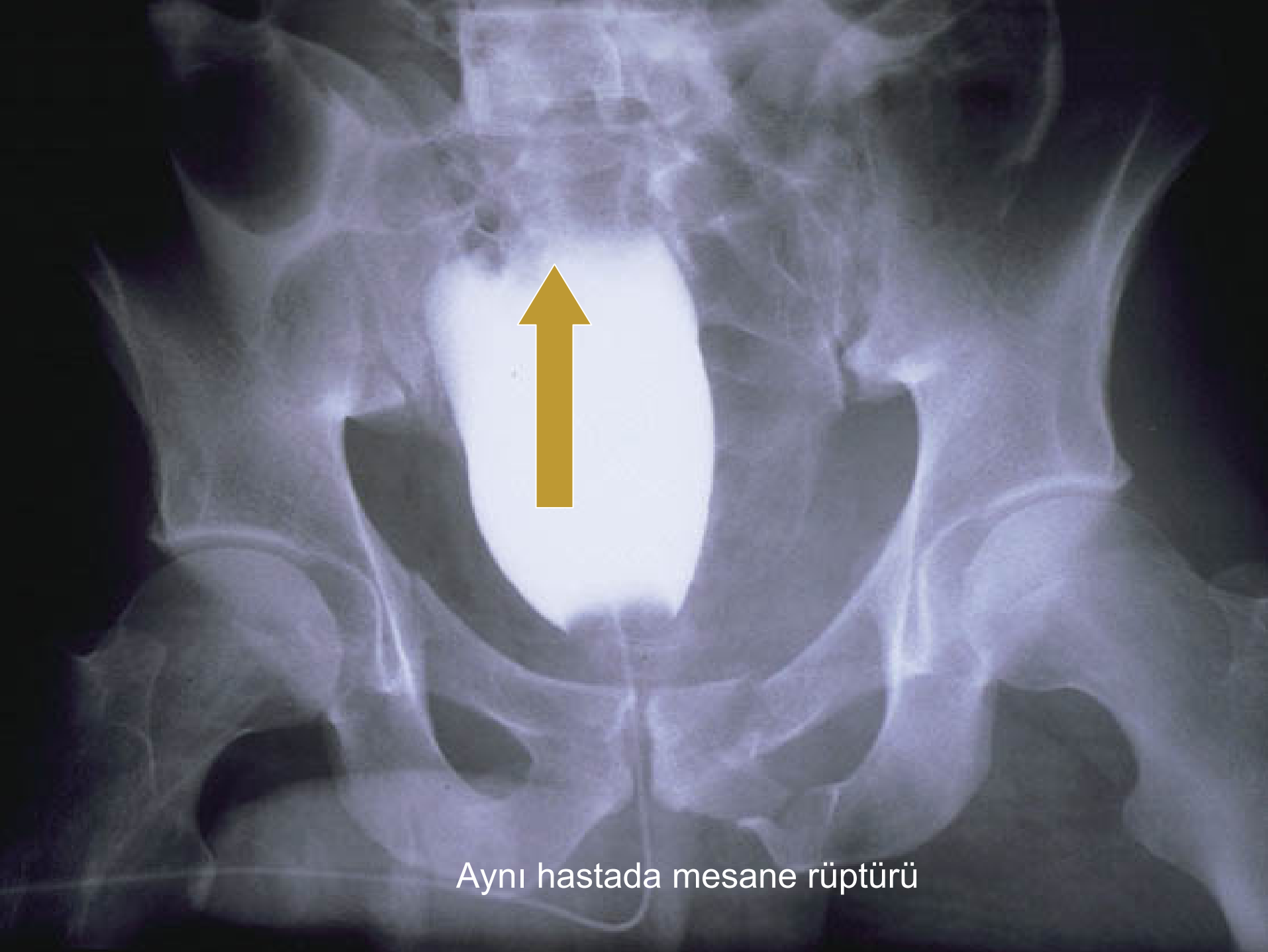
Ap Pelvis Grafisi

- Tüm pelvis görülmeli
 - Sympysis pubis, sacral spinöz proçes
 - L4-5
 - Kalça eklemi
 - Femur proksimali
- Sırası ile...
 - İç halka
 - Orta halka
 - Dış halka
 - Diğer alanlar değerlendirilmeli

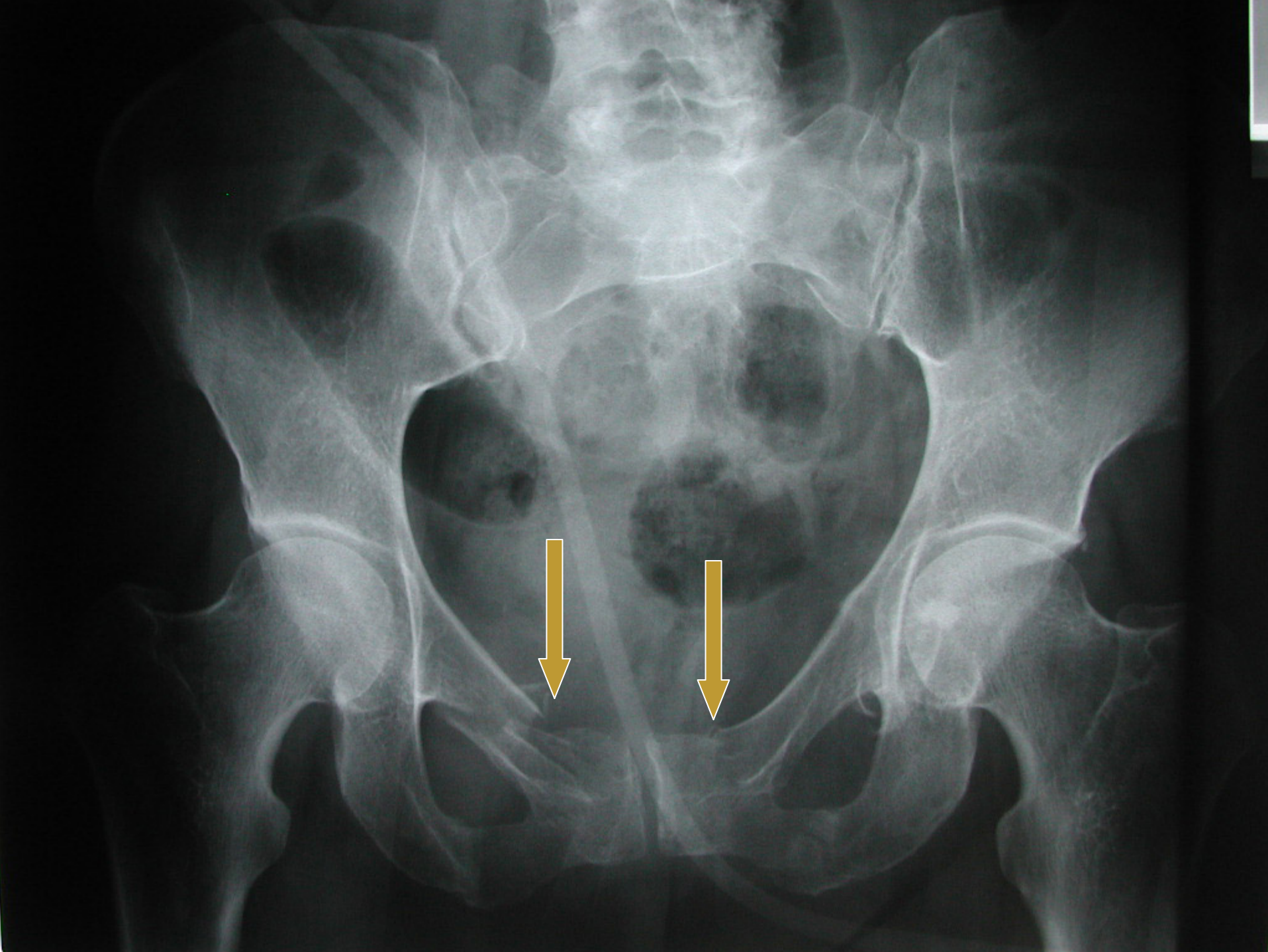


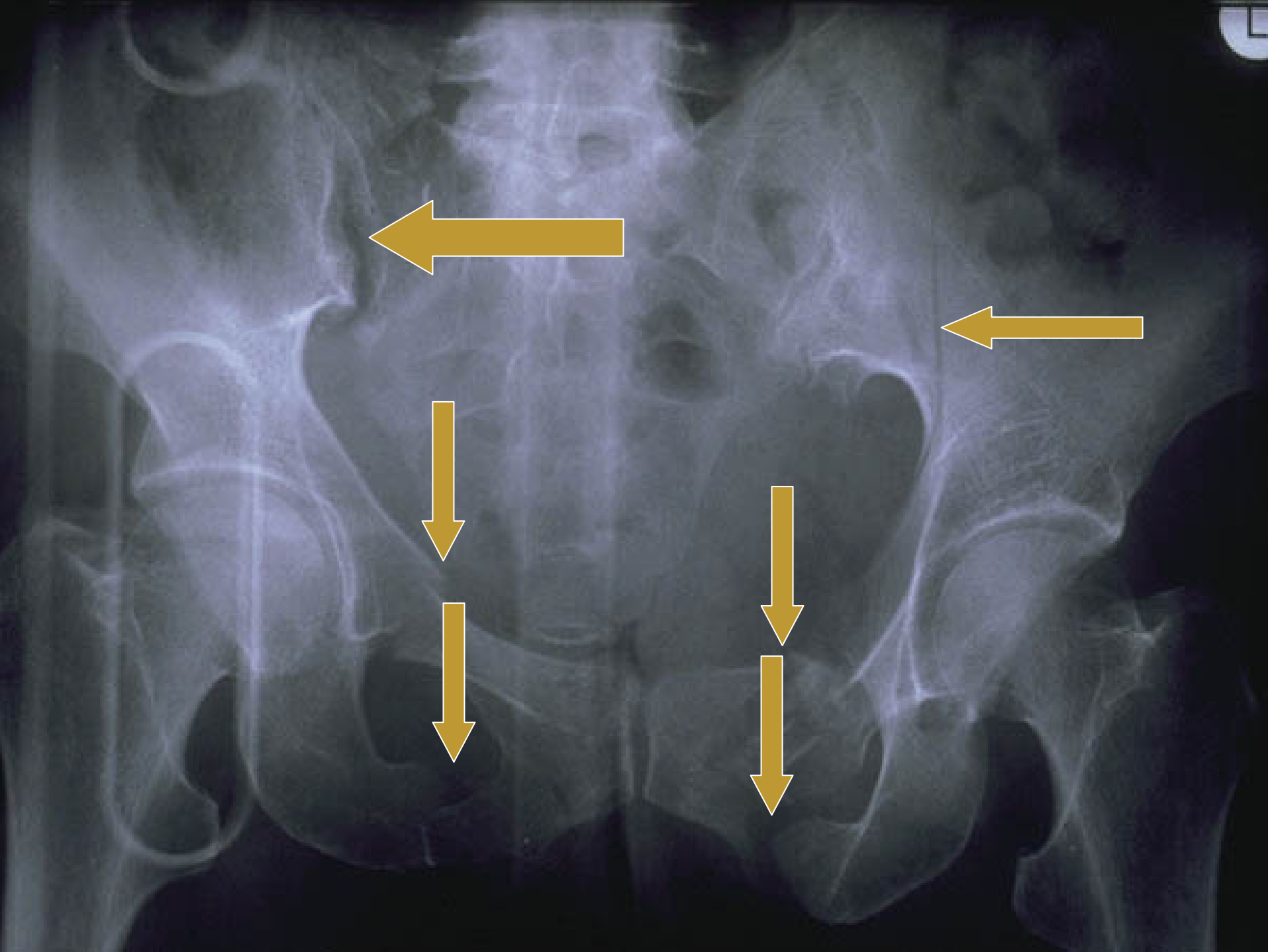


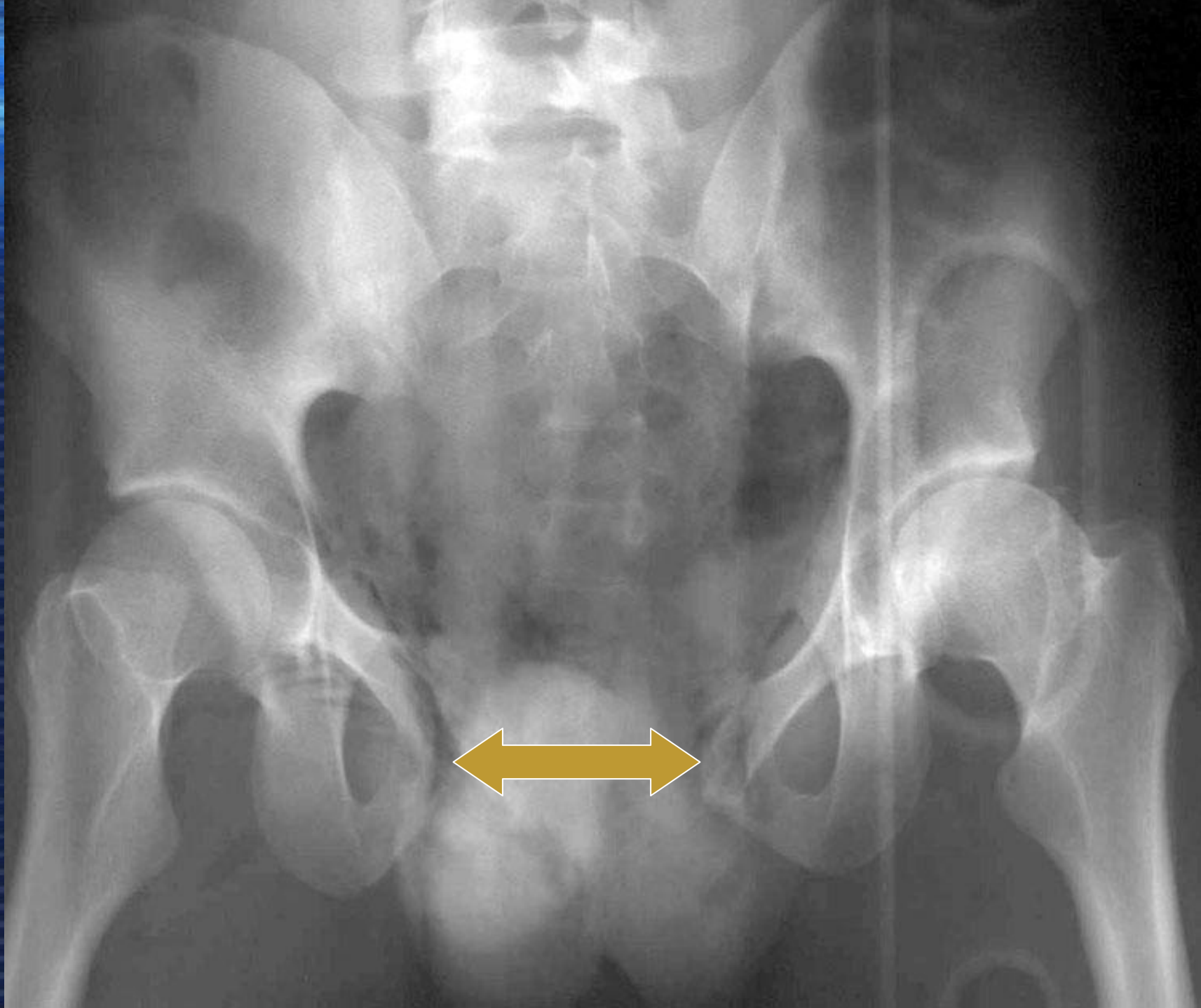
İskium pubis kolu kırığı & Sakroiliak seperasyon

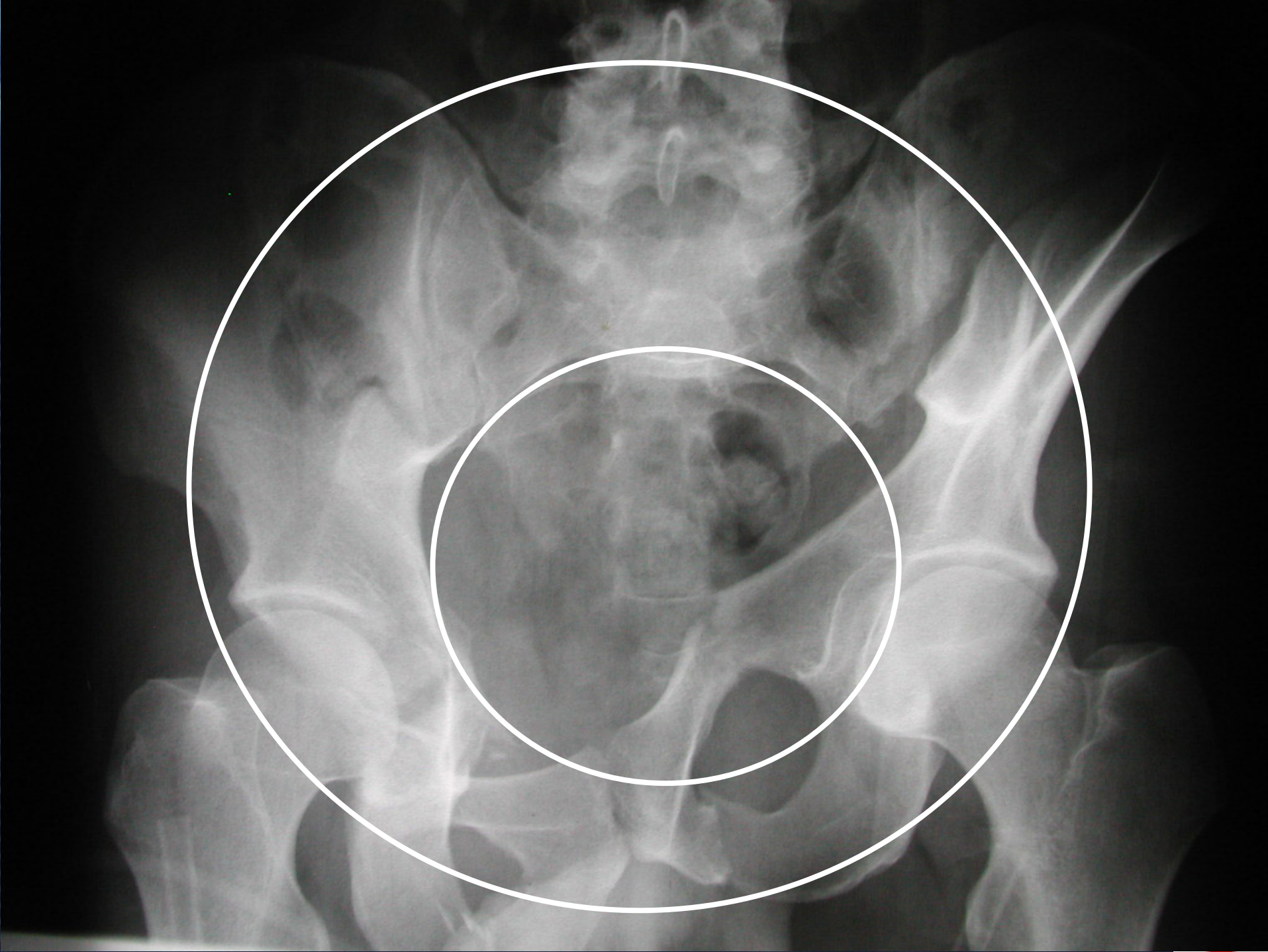


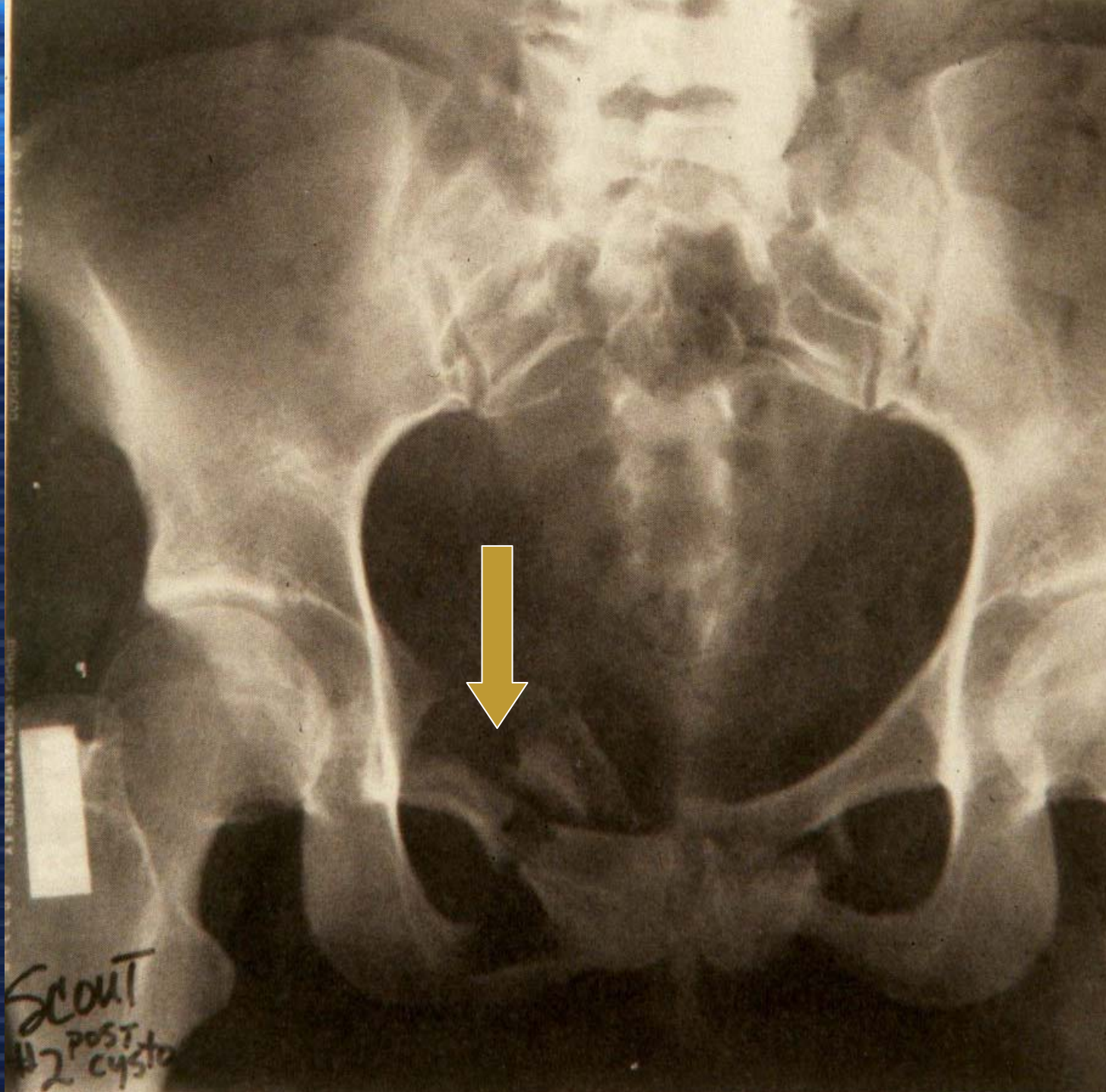
Aynı hastada mesane rüptürü

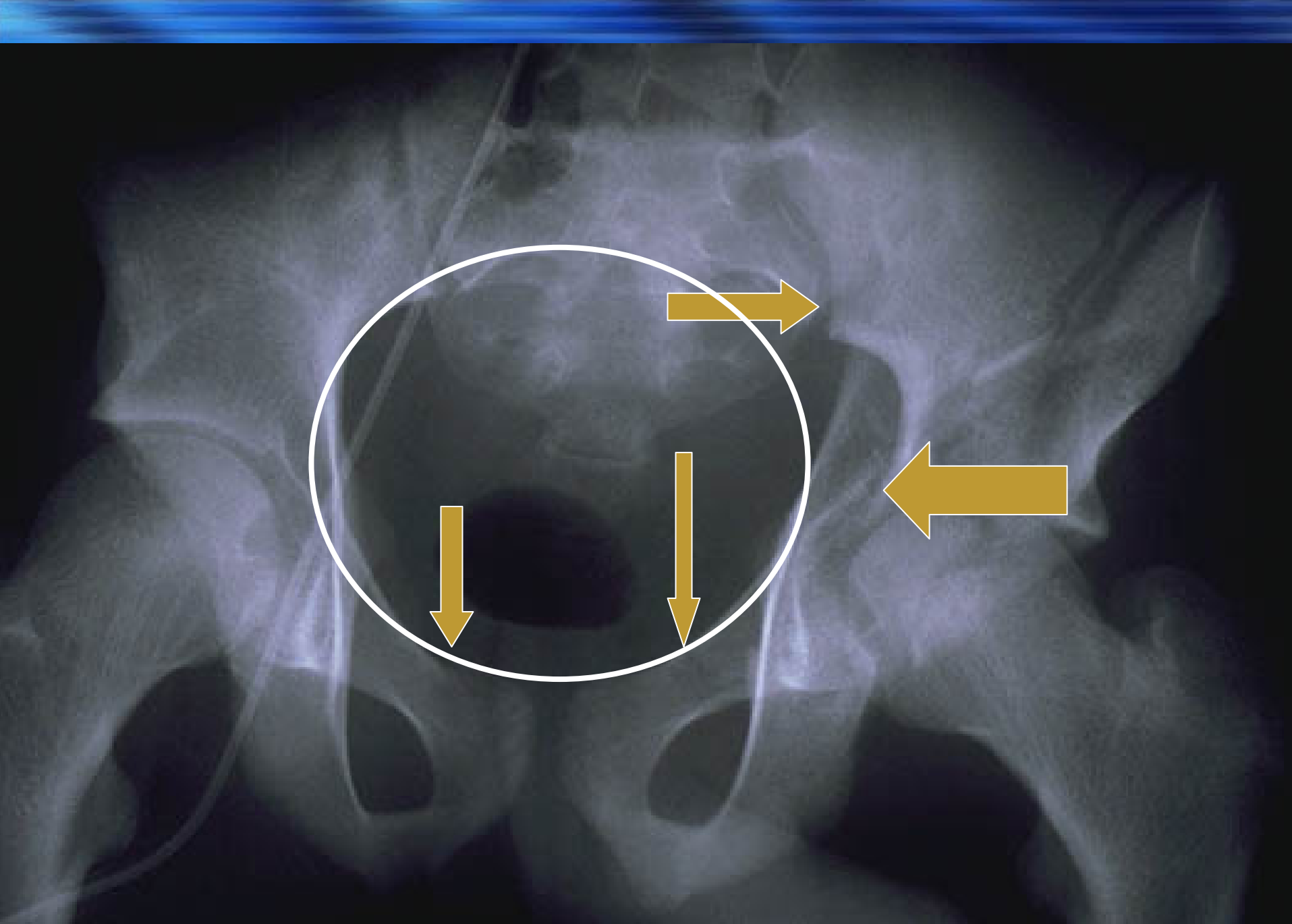


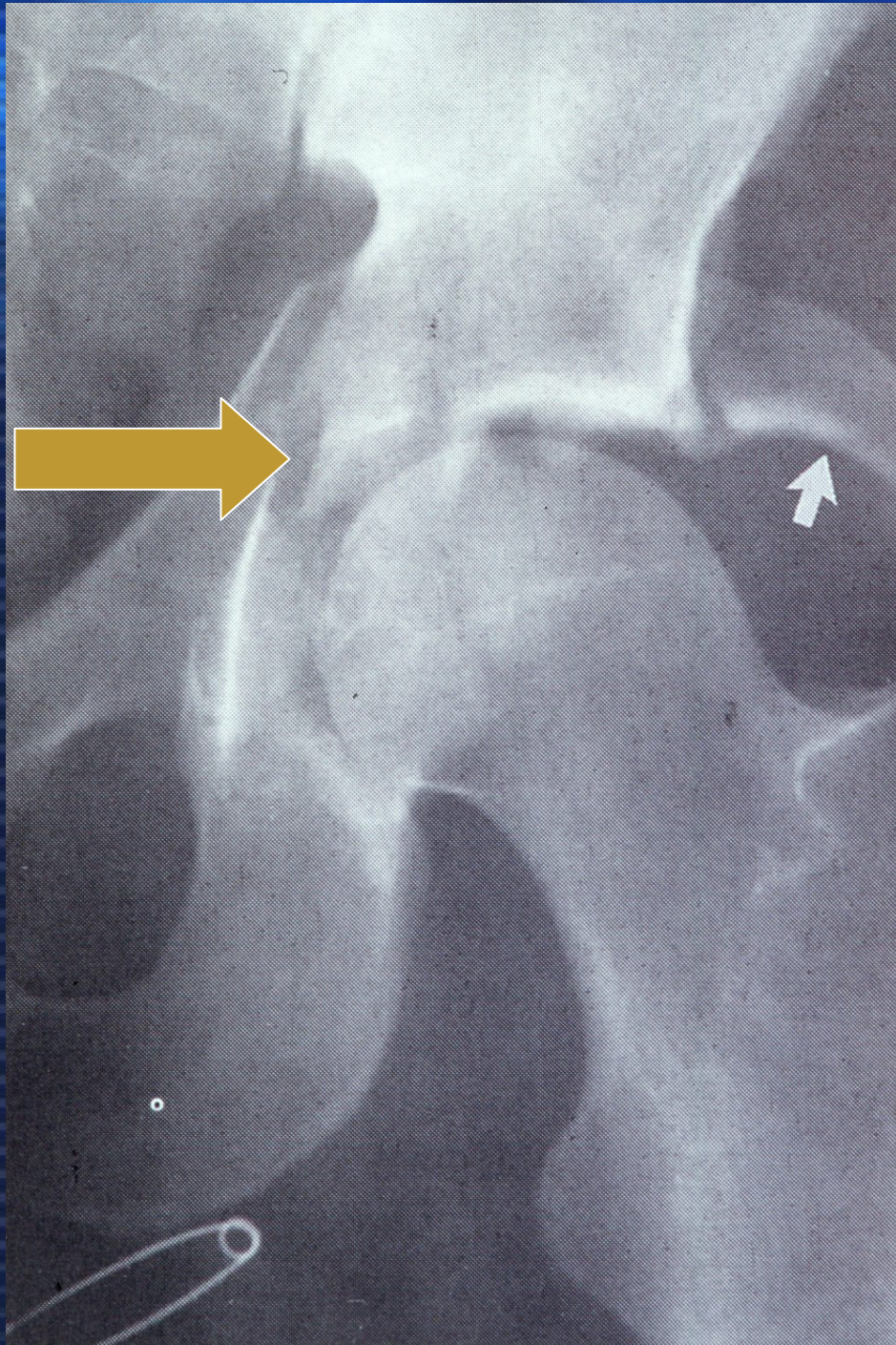








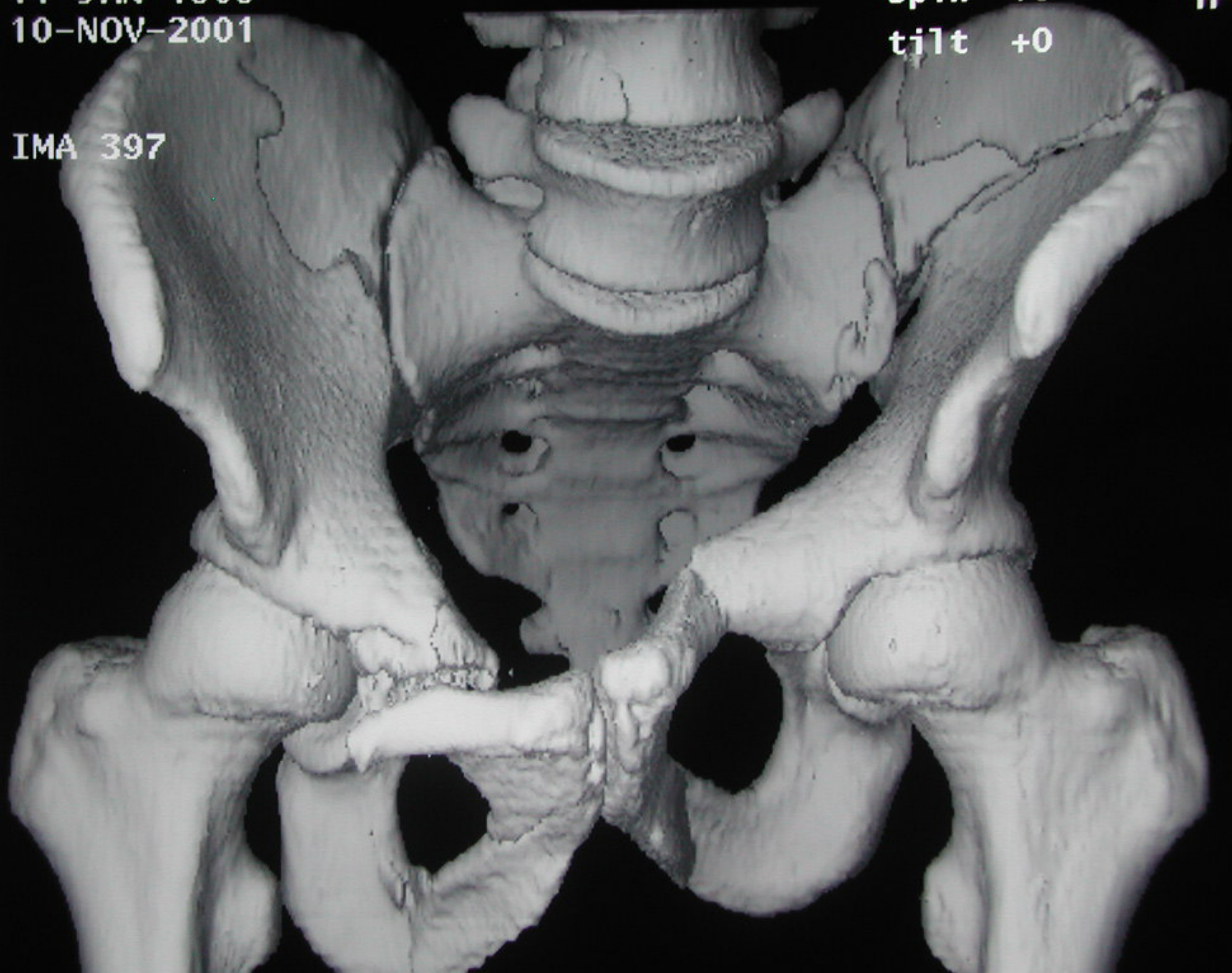




10-NOV-2001

tilt +0

IMA 397



10
C
m

TP -509.5
IMA 231
SPI 8

R

10
C
M

kV 140
mA 206
TI 0.75
GT 0.0
SL 3.0/4.5
328 -25/9
AB82 LO

AWW/A.E.

W 2000
C 2

Teşekkürler

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0352 437 4901-22328