

# CHIROPRACTIC & OSTEOPATHY BOARD OF SOUTH AUSTRALIA

## POLICY

### “Use of X-Rays”

*Radiographic imaging is an integral part of the diagnostic procedures offered by a chiropractor or osteopath. Practitioners use radiography for several purposes – eg.: Identifying biomechanical segmental deviations, pathology or contraindications for care; Confirmation of clinical impression, appropriateness of care or modifying factors which would affect the selection of appropriate management and adjusting techniques.*

Indications for x-ray must be clear and based upon clinical history and examination findings where the results of such imaging will assist in the clinical impression and management of the patient.

Routine x-ray screening of patients without relevant clinical indications is inappropriate. A registrant/provider must consider whether the potential benefit outweighs the risks of ionising radiation. A patient should never be exposed to unnecessary radiation.

Patient protection should be optimised through careful choice of exposure parameters and by using available dose reducing mechanisms such as filtration devices where possible.

A registrant/provider should consider the use of radiographic imaging whenever a radiographic red flag is suspected. Potential radiographic red flag situations include:

- Progressive neurological signs and symptoms
- Suspected tumour/pathology
- Infection
- Age greater than 50 years
- Trauma
- Other

Discussion must ensue and informed consent obtained in relation to the need for, and nature of the recommended x-rays. In the case of minors or the mentally incompetent, consent must be obtained from a parent or legal guardian.

Registrants/Providers need to show a strong clinical indication for x-rays in children prior to irradiating. Strong clinical indications may include:

- Idiopathic scoliosis
- Suspected development of congenital defects
- Marked locomotor disturbances of the spine and pelvis
- Suspicion of pathology
- Significant trauma

Re-evaluation of biomechanical or postural disorders using x-ray needs to be carefully considered on an individual case basis, and not performed routinely. Only those views crucial to the re-assessment process should be used. A full x-ray series is rarely required for re-evaluation.

Consideration of other re-evaluation tools should be made and the benefit/risk ratio of further radiation exposure should be assessed before performing x-ray evaluation for biomechanical/postural purposes.