

For Offices that take their own X-rays:

CRMA/DMX X-RAY PROTOCOL - Views Needed For Complete C.R.M.A. Study

You MUST review the films in detail to be sure you have ALL the anatomy, if not, re-take the film. We can only accept plain film xrays or DICOM images on a CD.

Cervical Spine CRMA:

1. Lateral C-spine Neutral-
2. Lateral Cervical Flexion
3. Lateral Cervical Extension
4. APOM Lateral Bend Left/Right – If you are going to take this view: **We need to be able to visualize the edges of C1 on top of C2 free of any teeth or other anatomy.** (You may have to angle the tube 5 degrees caudal (downward), and have patient tilt head back slightly – i.e.: keep the chin tucked in)

(AP, Oblique's, and spot shots are NOT needed for CRMA, but may be necessary for the doctor's analysis of the patient, depending on the doctor's personal protocol. Only the Lateral C-spine Neutral, Lateral Cervical Flexion and the Lateral Cervical Extension views are necessary, and be of high quality, for Computerized **R**adiographic **M**ensuration **A**nalysis of the Cervical Spine)

Lumbar Spine CRMA:

1. Lateral Lumbar Neutral – **Sacrum to L1**
2. Lateral Lumbar Flexion – **Sacrum to L1**
3. Lateral Lumbar Extension – **Sacrum to L1**

The entire Lumbar spine that you want included in the CRMA study must be visible on one view, including at least the upper 1/2 of the Sacrum so we can accurately identify which vertebrae is the 5th Lumbar vertebrae.

(AP, Oblique's, and spot shots are NOT needed for CRMA, but may be necessary for the doctor's analysis of the patient, depending on the doctor's personal protocol. Only the above 3 listed films need to be submitted, and be of high quality, for Computerize **R**adiographic **M**ensuration **A**nalysis of the Lumbar Spine)

*If you send your patients out for x-rays, please give this to the RT at that facility.