

<b>Radiology Department Guidelines for X-Ray Referrals Oct 2020 – Next review Oct 2023</b>		
	<b>Acceptable Clinical Indications</b>	<b>Indications NOT Acceptable</b>
<b>Sinuses</b>	By Specialist referral Only	Headache Sinus disease
<b>Knee</b>	Knee pain with locking Painful prosthesis Trauma ? Osgood Schlatter's Disease	Knee pain without locking or restriction of movement
<b>Chest</b>	Hypertension Specific Chest Pain SOB Pre-employment Lower respiratory infection – acute/recurrent	? Rib Fractures ? URTI Non-specific Chest pain Screening Smoker, no adverse clinical features
<b>Cervical spine</b>	Trauma Osteoporotic collapse Osteomyelitis Primary bone tumour Myeloma Metabolic bone disease Osteomalacia Degenerative Changes with “red flag” signs	Neck Pain Brachialgia
<b>Thoracic spine</b>		Back pain
<b>Lumbar spine</b>		Chronic back pain with no pointers to infection or neoplasm. Disk herniation Sciatica with no adverse features.
<b>Sacrum SIJ</b>	Not indicated ? sacroiliitis	
<b>Coccyx</b>	Acute trauma (lateral only). Persistent pain	
<b>Shoulder</b>	Trauma ? calcific tendonitis "Frozen" shoulder symptoms	Pain, localised or referred from neck
<b>Hip</b>	Trauma Orthopaedic Referral Complex history Pain & OA	
<b>Calcaneum</b>	Trauma ? Stress fracture	? Spur and/or Plantar fasciitis physiotherapy pathway
<b>Hands/wrists/elbows Feet/ankles/knees</b>	Chronic pain – more than 6 weeks. Physiotherapy, NSAID'S already tried.	Acute pain with no known trauma – for less than 6 weeks