

Imaging – MSK Bone and Joints

See specific sections for [shoulder](#), [hip/pelvis](#), [knee](#), [ankle/foot](#)

X-Ray Indicated:	X-ray Not Indicated Routinely:
<ul style="list-style-type: none">• ? Avascular necrosis – consider MR if radiographs normal• Bone pain – symptomatic area only• ? Myeloma – skeletal survey• New arthropathy – affected joint only + hands/feet (single view) if rheumatoid suspected• for suspected OA ensure - symptoms >6 weeks and <1 year<ul style="list-style-type: none">○ no previous X-ray○ to confirm diagnosis○ specialist referral not indicated• ? Osteomalacia – for local pain• ? Osteomyelitis + Nuclear medicine – particularly in early disease when X-ray may be negative• Painful prosthesis – X-ray will not exclude all causes – orthopaedic “hot line” for fast track opinion• Palpable bony mass – particularly if new/enlarging/painful• Primary bone tumour• ? Stress fracture• Trauma ?fracture – see over for hip, knee, ankle, foot.	<ul style="list-style-type: none">• Arthropathy follow up• Non specific musculoskeletal pain• Metabolic bone disease – biochemical tests usually suffice• Soft tissue mass – see section on soft tissue ultrasound (links to Lumps bumps)

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