

Study says eliminate pelvic imaging to reduce radiation for the detection of venous thromboembolism

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A recent study shows that pelvic imaging using computed tomography (CT) examinations are not necessary for diagnosing patients with venous thromboembolism (VTE) and eliminating this exam can significantly reduce a patient's exposure to excessive radiation dose.

CT venography of the pelvis during CT pulmonary angiography does not improve the detection of VTE, says Dr. Charbel Ishak, lead author for this study. He asserts, "Using CT venography in the lower extremities without including the pelvis can decrease the population's [radiation dose](#) generated by CT usage."

In a retrospective review of 1,527 patients at the Nassau University Medical Center during a three-year period, only 0.3% (5 of 1,527) of patients presented with isolated pelvic VTE after [pulmonary embolism](#) was ruled out of the CT protocol.

Dr. Ishak believes that these results are promising for helping radiologists implement new protocols for pelvic examination and reducing further radiation in patients. He says, "Radiologists and technologists can eliminate pelvic imaging while acquiring only images of the lower extremities with CT venography, starting from groin to below the knee. We believe that by stopping the imaging of the [pelvis](#), we can decrease patient [radiation dose](#) without significantly affecting the diagnosis of VTE."

Dr. Ishak will deliver a presentation on this study on Tuesday, May 3, 2011 at the 2011 ARRS Annual Meeting at the Hyatt Regency Chicago.

Provided by American Roentgen Ray Society

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