EOSedge Referrers Guide







EOS imaging Solutions Overview

Scanner



EOSedgeTM system provides low dose, full body, stereo radiographic imaging of the patient in a functional position

Exam time: 5min

Reports



SterEOS Workstation enables the conception of patientspecific models and reports based on EOSedge images

Processing time:

- Basic reports 5-10min
- Advanced reports: 10-30min

Clinical Applications

Spine

- Paediatric: scoliosis, postural disorders
- Adult: postural disorders, deformative and degenerative spine pathologies

Pelvis and Lower Limbs

- Pelvis deformities and postural disorders
- Lower Limb deformities: Leg length discrepancies and alignment disorders
- Management of hip and knee arthroplasties

Typical Orders

Full Body	Postural assessment Lower limbs alignment
Lower Limbs	Lower limb alignment Post-op THA
Pelvis + Lumbar spine sitting	Pelvic assessment
Spine Brace Brace off	Postural Assessment
Spine Sitting	
Spine Bending	
Spine Flexion/extension	

Optional features for paediatric patients

Micro-Dose

• Ultra low dose protocol dedicated to paediatric follow up scans (Full Body, Spine, Lower Limbs)

EOSedge Chair

• Radiolucent chair designed for spinal exams of patients with neuromuscular disorders



Scans



Scoliosis



Degenerative spine and postural disorders



Lower limbs deformities



Joint replacement



Patient Positioning

Full Body and Spine Positioning

- Head straight
- Pelvis straight
- · Weight evenly distributed on both legs
- Arms positioning depends on the patient condition:

Stable

AP: Hands on the collar bones or cheekbones

 Arms raised slightly (45°max)

Unstable

- AP: Hands supine on the handlebar
- Arms raised slightly (45°max)

Paediatric patients

- PA: Hands on the wall
- Arms raised slightly (45°max)







Full Body Scanning Range:

Above ears - Below lateral malleolus

Spine Scanning Range:

Above ears - Below lesser trochanter

Sitting

Positioning

- Stool close to the back panel
- Height of the stool adjusted to reach 90° angle between the femurs and tibias
- Legs sufficiently spread apart to avoid having the femurs projected on the acetabula

Spine Scanning Range:

• Above ears – Top of the seat

Pelvis Scanning Range:

• Above L1- Top of the seat





Lower Limbs

Positioning

- Feet offset by about one big toe: enough to distinguish clearly the condyles of both legs on the lateral view without impacting the natural stance of the patient
- Pelvis straight
- Weight evenly distributed on both legs
- Hands on the handlebar

Scanning Range:

Above iliac crest -Below lateral malleolus









*Patients with Implants:

- **TKR**: implanted leg forward to avoid having the implant masking the contralateral leg condyles
- Bilateral TKR: larger feet offset might be required
- Bilateral THR: pelvis rotated (less than 10°) to avoid having the implants superimposed on the lateral view



Basic Reports

Lower Limb Alignment

Pelvic parameters	Pelvic Incidence Sacral Slope Pelvic Tilt Pelvic Obliquity Pelvis Axial Rotation
Lengths	Femur Length Tibia Length Functional Length Anatomical Length
Femur	Femoral Head Diameter
Alignment	Varus/Valgus Flexion/Extension Hip Knee Shaft Angle



Postural Assessment

Pelvic Incidence
Sacral Slope
Pelvic Tilt
Pelvic Obliquity
Pelvis Axial Rotation

Coronal balance & C7 – Central Sacral Line
Cobb Angle

Sagittal balance
Femoral Head Diameter

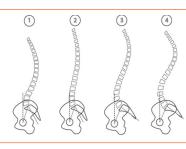
Reference data





Classification

Roussouly







Advanced Reports

Lower limb 3D

Pelvic parameters	Pelvic Incidence Sacral Slope Pelvic Tilt Pelvic Obliquity	F
Lengths	Femur Length Tibia Length Functional Length Anatomical Length	L
Femur	Femoral Head Diameter	F
Alignment	Varus/Valgus Flexion/Extension Femoral Mechanical Angle Tibial Mechanical Angle	

Post-op THA

Pelvic parameters	Pelvic Incidence Sacral Slope Pelvic Tilt Pelvic Obliquity
Lengths	Femur Length Tibia Length Anatomical Length Functional Length
Femur	Femoral Head Diameter
Alignment	Varus/Valgus Flexion/Extension













Disclaimer: This training material was developed to emphasize on specific tasks that can be performed with the medical device. It does not supersede the instructions for use provided in the labelling of the medical device. This training material should be read in conjunction with the instructions for use provided with the medical device. By providing training, EOS imaging does not become a guarantor of the competence of the trainee. EOSimaging shall not assume any liability when the trainee misuses the medical device. Please read carefully the labeling provided with the medical device. Caution: US Federal law restricts this device to sale by or on the order of the physician.

Canberra Imaging Group

PO Box 55
Deakin West, 2600
canberraimaging.com.au