



AB004. Pediatric abdominal emergency imaging

Betül Tiryaki Baştuğ

Department Emergency Radiology, Eskişehir Osmangazi University Medical Faculty, Eskişehir, Turkey

Abstract: Trauma, appendicitis, intussusception, and hypertrophic pyloric stenosis are the most common reasons for emergent abdominal imaging in pediatric patients. Although the use of computed tomography has increased dramatically in recent years, children are at particular risk for side effects of ionizing radiation, and even low dose radiation is associated with a small but significant increase in lifetime risk of lethal cancer. In the majority of emergency services, the use of magnetic resonance (MR) imaging as the

primary modality for the evaluation of a child is impractical due to high cost, limited availability, and frequent need for sedation. Ultrasonography (US) does not involve ionizing radiation and, unlike MR imaging, is relatively inexpensive, is widely available, and does not require sedation. Another major advantage of US in abdominal imaging is that it allows dynamic assessment of bowel peristalsis and compressibility. Delayed diagnosis of any disease process can result in severe morbidity and, in some cases, death. The ability to diagnose or exclude disease with US should be part of a core radiology skill set for any practice that includes a pediatric population.

Keywords: Pediatric; abdomen; emergency; imaging

doi: 10.21037/pm.2018.AB004

Cite this abstract as: Tiryaki Baştuğ B. Pediatric abdominal emergency imaging. *Pediatr Med* 2018;1:AB004.