Closed fracture of right tibial plateau

Multitom Rax Real3D[1] clinical case
University of Utah, United States of America



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Clinical background and indication for Multitom Rax Real3D[1] examination

Patient

Sex	Age
Male	40–45 years

Anamnesis

Patient with right knee pain after a skiing injury yesterday. Patient fell awkwardly and felt pain in the right lateral knee. Today has been increased swelling and effusion, and unable to bear weight.

Indication for Real3D[1] examination

Lipohemarthrosis on conventional X-ray. Evaluation of the tibial plateau is needed.





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Multitom Rax RealI3D[1]
Settings



Settings for table scan
with High Quality Protocol

Tube voltage	116 kV
Current time product	122 mAs
Dose area product	867.6 µGy·m²
Calculated value for $CTDI_{vol,16}$	14.2 mGy
Scan time	16 sec
Number of projections	434

Reconstruction settings
for sectional views

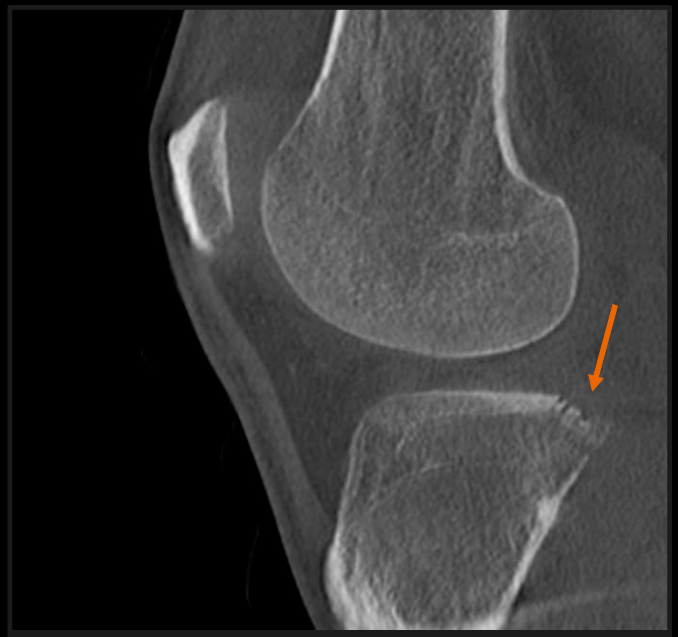
Pixel size	0.4 mm
Reconstruction kernel	medium
Slice thickness	0.5 mm

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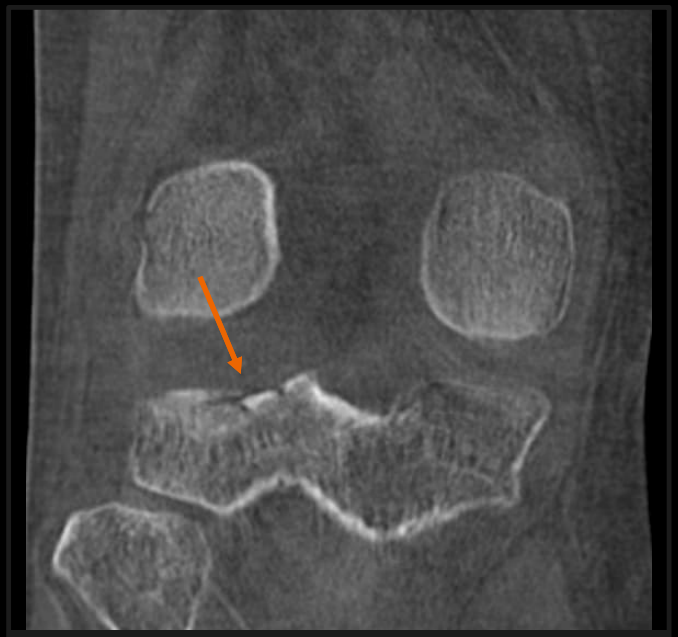
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Multitom Rax RealD[1]
Diagnostic findings

Comminuted minimally impacted fracture of the far posterior lateral tibial plateau.
No additional fracture. Joint spaces are well-maintained. Large lipohemarthrosis.



Sagittal view MPR



Coronal view MPR



VRT view

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“Learning points for this clinical case:

- High-quality images of the knee obtained
- Real3D enabled the radiologist to identify that there was a mildly impacted posterior lateral tibial plateau fracture.”[1]

1 The statements by Siemens Healthineers customers described herein are based on results that were achieved in the customer’s unique setting. Since there is no “typical” hospital and many variables exist (e.g. hospital size, case mix, level of IT adoption) there can be no guarantee that other customers will achieve the same results.

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Real3D is an option.

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Frederic Noo, PhD is employed by an institution that receives financial support from Siemens Healthineers for collaborations.

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