Towne view

The Towne view is an angled AP radiograph of the skull.

The patient's nuchal ridge is placed against the image detector

Dorsum sella overlies the foramen magnum

Image size: 24 x 30 cm

The beam travels anterior to posterior (AP) direction, with ~30-40° of angulation from ~5 cm above the level of the nasion, toward the foramen magnum

Source-to-image distance: 40“ (100 cm)

80-85 kVp at 25 mAs (or AEC)

grid is used

Occipital bone and posterior fossa space better evaluated than with a nonangulated AP view, which would have more skull base and facial bone overlap.

In a three-year retrospective analysis conducted at a 280-bed suburban community hospital with 27,000 annual emergency department visits. All patients with a discharge diagnosis of skull fracture were studied. There were 72 patients with skull fractures. Thirty-two (44.4%) of these patients had basilar skull fractures, located predominantly in the occipital bone. Of these, 19 (59.3%) had normal antero-posterior and lateral views, with the skull fracture detected only on the Towne view. Five of these patients had depressed skull fractures and three had intracranial lesions requiring surgical intervention. We conclude that, when the decision is made to obtain portable skull films, a Towne view must be included, as well as the antero-posterior and lateral views, to increase the diagnostic yield of portable skull films in patients with skull fractures.

Better than a conventional AP view for evaluating an occipital plagiocephaly involving the lambdoid suture may be a useful additional view for evaluating skull fractures [1].

1)
Shaffer MA, Doris PE. Increasing the diagnostic yield of portable skull films. Ann Emerg Med. 1982 Jun;11(6):303-6. PubMed PMID: 7081791.