Computed tomography (CT) scan is a pivotal tool in pediatric emergency medicine.Prolonged or excessive exposure to radiation from multiple CT scans can significantly elevate the risk of developing cancer and other long-term health complications (1).Due to their smaller size, developing organs and tissue with a higher cell proliferation rate and the more radiosensitive compared to adults, pediatrics are at a heightened susceptibility to the radiation associated risks, the pediatric population is more susceptible to the detrimental effects of radiation (1,2,9).Traditionally, CT scans have been chosen as the predominant choice among advanced imaging modalities in the emergency department (PED) realm due to their rapidity, precision, and widespread availability (1,5).According to Larson [2011] from 1995 to 2008 there has been an increase in CT use among children visiting emergency departments despite the relatively similar number of visits with the records showing that 89.4% took place at non-pediatric-focused facilities while 10.6% in pediatric emergency department (PED) raising the concern of overuse and the long-term radiation induced harm (7).It offers rapid, precise diagnosis and insight into various medical conditions, aiding healthcare providers in making informed decisions for effective treatment strategies (1-4).Because despite their undeniable benefits, CT scans also present inherent risks, notably concerning radiation exposure, especially concerning pediatric patients due to early childhood exposure (1,2,8).Consequently, medical professionals must use instruments such as CT with great care due to the potential risks associated with radiation exposure (1,2).Also, newer versions scan faster making the scan time from few seconds to few minutes thus reducing the need for sedation avoiding their side effect ((1,5,6.