RIH – CT ANGIOGRAM ABDOMEN/PELVIS
SIEMENS DEFINITION AS+ PROTOCOL

Indications: Abdominal arterial aneurysm, dissection.

Position/Landmark	Head first or feet first-Supine Sternal Notch
Topogram Direction	Craniocaudal / Craniocaudal
Respiratory Phase	Inspiration
Scan Type	Helical
Ref kV/Ref mAs/Rotation time (sec) **Pitch / Speed (mm/rotation)** **Safire Strength / Dose Optimization**	Care kV 120 / Care Dose4D 180 / 0.5 sec 1.2:1 , 32.00mm 3 / 9
Detector width x Rows = Beam Collimation	0.625mm x 64 = 40mm (128 x .6mm)
Average Tube Output	ctdi – 10.0mGy dlp – 500mGy.cm
Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination 1 **axial ct angio** 3mm x 3mm I26f medium smooth pacs 2 **coronal ct angio** 3mm x 3mm I26f medium smooth pacs 3 **sagittal ct angio** 3mm x 3mm I26f medium smooth pacs 4 thin ct angio .75mm x .6mm I26f medium smooth terarecon
Scan Start / End Locations **DFOV**	1 cm superior to diaphragm lesser trochanters 38cm decrease appropriately
IV Contrast Volume / Type / Rate	100mL Iohexol (Omnipaque 350) 4mL/sec
Scan Delay	Bolus tracking at level of celiac artery
2D/3D Technique Used	Workstream 4D mpr of 3mm x 3mm **sagittal and coronal ct angiogram** series, auto-transferred to PACS.
Comments: Recon 4 is a thin helical volume of the abdomen/pelvis that is archived to the TeraRecon server.	
Images required in PACS	Topograms, 3mm x 3mm axial ct angio abdomen pelvis, 3mm x 3mm coronal ct angio abdomen pelvis, 3mm x 3mm sagittal ct angio abdomen pelvis, Patient Protocol