

RIH – NON CONTRAST ABDOMEN/PELVIS GE LIGHTSPEED VCT PROTOCOL

Indications: Evaluation of the abdomen for aortic aneurysm or retroperitoneal bleed.

Position/Landmark	Head first or feet first-Supine Xyphoid			
Topogram Direction	Craniocaudal			
Respiratory Phase	Inspiration			
Scan Type	Helical			
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	Maximum lateral diameter < 40 cm 100kv / smart mA (120-450) / 0.5 sec .984:1 , 39.37mm 13.0 / 70 / 30%			
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	Maximum lateral diameter > 40 cm 120kv / smart mA (120-450) / 0.5 sec .984:1 , 39.37mm 11.5 / 70 / 30%			
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	Maximum lateral diameter > 48 cm 140kv / smart mA (120-460) / 0.5 sec .984:1 , 39.37mm 11.5 / 70 / 30%			
Detector width x Rows = Beam Collimation	0.625mm x 64 = 40mm			
Average Tube Output	ctdi – 11.3 mGy dlp – 616 mGy.cm			
Helical Set	body	thickness/		recon
Slice Thickness/ Spacing	recon	part	spacing	algorithm
Algorithm	1	nc abdomen/pelvis	5mm x 5mm	standard
Recon Destination	2	thin abd/pelvis	.6mm x .6mm	standard
Scan Start / End Locations	1 cm superior to diaphragm lesser trochanters 38cm decrease appropriately			
DFOV	decrease appropriately			
IV Contrast Volume / Type / Rate	When oral contrast is prescribed, refer to the appropriate oral contrast agent's preparation and procedure guide.			
Scan Delay				
2D/3D Technique Used	DMPR of 5mm x 5mm coronal abdomen/pelvis series (auto-batch on), average mode, auto-transferred to PACS.			
Comments:	Recon 2 is a thin helical volume of the abdomen/pelvis that is archived and used in direct multi-planar reformats.			
Images required in PACS	Scouts, 5mm x 5mm axial abdomen/pelvis, 5mm x 5mm coronal abdomen/pelvis, Dose Report			