

RIH – NC ABDOMEN/PELVIS FOR RENAL STONE GE LIGHTSPEED VCT PROTOCOL

Indications: Evaluation for renal/ureteral calculi.

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 16.0 / 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 14.5 / 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 14.5 / 70 / 30%			
Detector width x Rows = Beam Collimation	0.625mm x 64 = 40mm			
Average Tube Output	ctdi – 8.8 mGy dlp – 485 mGy.cm			
Helical Set	recon	body part	thickness/ spacing	recon destination
Slice Thickness/ Spacing	1	nc renal stone	5mm x 5mm	standard
Algorithm	2	thin abd/pelvis	.6mm x .6mm	standard
Recon Destination				pacs for dmpr
Scan Start / End Locations	1 cm superior to diaphragm lesser trochanters 38cm decrease appropriately			
DFOV				
IV Contrast Volume / Type / Rate				
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: This protocol is has a higher noise index and is specifically used for detection of gu calculi. 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 nc renal stone, 5mm x 5mm coronal abdomen/pelvis, Dose Report			