

**RIH – ROUTINE CHEST
GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL**

Indications - Infection, pulmonary nodule, mass, effusion, empyema.

Position/Landmark	Head first or feet first-Supine Sternal Notch				
Topogram Direction	Craniocaudal				
Respiratory Phase	Inspiration				
Scan Type	Helical				
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	120kv / smart mA (120-450) / 0.5 sec 1.375:1 , 27.50mm 13.5 / 30 / 30%				
Detector width x Rows = Beam Collimation	1.25mm x 16 = 20mm				
Average Tube Output	ctdi – 10.0 mGy dlp – 357 mGy.cm				
Helical Set		body	thickness/		recon
Slice Thickness/ Spacing	recon	part	spacing	algorithm	destination .
Algorithm	1	chest	5mm x 5mm	standard	pac
Recon Destination	2	thin chest	1.25mm x .6mm	standard	for dmpr
	3	lung	5mm x 5mm	lung	pac
Scan Start / End Locations	1cm superior to lung apices through adrenal glands				
DFOV	38cm decrease appropriately				
IV Contrast Volume / Type / Rate	75cc omni 350 / 2cc per second if needed				
Scan Delay	40 seconds				
2D/3D Technique Used	DMPR of 5mm x 5mm coronal chest series (auto-batch on), average mode, auto-transferred to PACS.				
Comments:					
Images required in PACS	Scouts, 5mm x 5mm axial chest, 5mm x 5mm coronal chest, 5mm x 5mm axial lungs, Dose Report				