RIH - ANKLE/FOOT CT
GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL

Indication: fracture, dislocation, osteomyelitis, bone injury, bone tumor.

Position/Landmark	Supine , feet first Zero Appropriately
Topogram Direction	Craniocaudal
Respiratory Phase	Any
Scan Type	Helical
KV / mA / Rotation time (sec) **Pitch / Speed (mm/rotation)** **Noise Index**	120kv / smart mA (100-440) / .5 sec .938:1 , 9.37mm 25.00
Detector width x Rows = Beam Collimation	0.625mm x 16 = 10mm
Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination . 1 thin ankle/foot .6mm x .6mm bone for dmpr 2 **ankle/foot bone** 2.5mm x 2.5mm bone pacs 3 **ankle/foot soft tissue** 2.5mm x 2.5mm standard pacs
Scan Start / End Locations **DFOV**	determined by technologist or radiologist to include the anatomy of interest 18cm decrease appropriately
IV Contrast Volume / Type / Rate	70cc omni 350 / 2cc per second if needed
Scan Delay	65 seconds
2D/3D Technique Used	DMPR of 3mm x 3mm coronal and sagittal ankle or foot series (auto-batch off), average mode, auto-transferred to PACS Also, there is a 3mm x 3mm true axial reformat if needed due to the patient's position.
Comments: Recon 1 is a single thin helical group of the ankle/foot for direct mpr. Recon 2 is the 2.5mm x 2.5mm ankle/foot, bone algorithm ct going to PACS. Recon is the 2.5mm x 2.5mm ankle/foot, standard algorithm ct going to PACS.	
Images required in PACS	Scouts, 2.5mm x 2.5mm axial ankle/foot bone, 2.5mm x 2.5mm axial ankle/foot standard, 3mm x 3mm sagittal ankle/foot, 3mm x 3mm coronal ankle/foot, Dose Report

updated Jan 23, 2017