

Protocol Name: LUMBAR SPINE ROUTINE ADULT	
INDICATIONS:	Evaluation of lumbar injury or pain.
IV CONTRAST:	None
ORAL CONTRAST:	None
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Arms above head. Landmark at lower sternum. Above L1 to S1 or check with Radiologist or ordering doctor about which levels to scan. No gantry angle.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images with 3 mm sag and cor recons. 160 DFOV.
TRIGGER OR CONTRAST DELAY:	None
TECHNIQUE GUIDELINES:	120 kvp. Smart MA on.
LABEL:	SCOUT*, LUMBAR*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Bone recon at 1500ww/300wl. With 3 mm COR and SAG MPRs.
RECON 2:	2.5mm thick /2.5 mm interval. Bone recon 1500ww/300wl.
ADDITIONAL POST PROCESSING:	Usually none. Send 0.625 images to awwkstn1 if 3D is needed.
SEND EXAM:	Send scout, 2.5 axials, and SAG and COR recons to pacs.
ARCHIVE:	
BILL AS:	Usually lumbar CT without contrast

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	1500.00	120	40 and 20	90 and 0	N
	Above chest	Iliac crest				

AXIAL IMAGE PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	Thick Speed	Interval (mm)	Gantry Tilt	SFOV	kv	ma	DFOV	Show Recon1	Show Recon2	Show Recon3	Direct Vis
Helical Full 0.7 sec rotation	S0.0	I200.0	0.625 39.37 0.984:1	0.625	S0.0	Large Body	120	650 22.10~ Smart mA On DR 40%	16.0	0.625mm Bone 2000ww 200wl For recons SS60	2.5mm Std 400w 40l Send to Pacs SS40	2.5mm Bone 2000w 200l Send to Pacs SS40	On 3mm Cor and Sag Send to Pacs

Updated 1/31/2018