

Protocol Name: RENAL CTA ADULT	
INDICATIONS: Evaluation of renal arteries.	LABEL: SCOUT*, ABDOMEN*. The * means anything after these beginnings will hang correct in pacs
IV CONTRAST: 100 cc nonionic contrast (370 mg/ml). 4cc/sec, 20ga or better IV in a large vein.	RECON 1: .625mm thick/.625 mm interval. Std recon at 700ww/60wl.
ORAL CONTRAST: No barium for abdominal CTAs. Water is an option if oral contrast is needed.	RECON 2: 2.5mm thick /2.5 mm interval. Std recon 700ww/60wl.
PATIENT POSITIONING AND SCAN AREA: Patient supine. Feet first. Landmark at mid sternum. Cuts are usually taken from a few cuts into the lungs through the bifurcation. Go to pubis if pelvis is also ordered. Same DFOV as previous abdomen CTs.	ADDITIONAL POST PROCESSING: Send 0.625mm to awwkstn1 for 3Ds. Save a 40 image rotation of the 3D aorta and renal arteries to pacs.
GENERAL EXAM GUIDELINES: 2.5 x 2.5 mm axial images. 400 DFOV.	SEND EXAM: Send scout, 2.5mm axials, and sag and cor images to pacs.
TRIGGER OR CONTRAST DELAY: Smart prep at mid kidney level or can use timing bolus	ARCHIVE:
TECHNIQUE GUIDELINES: 120 kvp. Auto ma on.	BILL AS: ABDOMEN CTA OR ABDOMEN AND PELVIS CTA

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	1600.00	120	10	90 & 0	2T
	Diaphragm	Pubis				

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 0.6 sec rotation	S0.0	1400.0	0.625 55.00 0.984:1	0.625	S0.0	Large Body	120	450 22.10~ Auto ma on DR 50%	40.0	0.625mm Std 400ww 50wl For recons SS50	2.5mm Std 400ww 50wl Send to Pacs SS50		On 5mm Cor and Sag MIPs