

GE VCT 64 SLICE PROTOCOLS

Protocol Name: SHOULDER ROUTINE ADULT	
INDICATIONS:	Evaluation of shoulder for fracture.
IV CONTRAST:	Usually none unless for soft tissue infection.
ORAL CONTRAST:	None
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Both arms down by sides. Landmark above chest. Scan from the top of the AC joint through either the bottom of the glenoid or the bottom of the fracture whichever is lower. No gantry angle.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images with 3 mm sag and cor recons. 200 DFOV.
TRIGGER OR CONTRAST DELAY:	None
TECHNIQUE GUIDELINES:	120 kvp. Smart MA on.
LABEL:	SCOUT*, EXT*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Bone recon at 2000ww/200wl. With 3 mm COR and SAG MPRs.
RECON 2:	2.5mm thick /2.5 mm interval. Bone recon 2000ww/200wl. .
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 upper extremity CT without contrast

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	I250.00	120	80 and 10	90 and 0	N
	Above shoulder	proximal humerus				

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 Rocon2	Show Rocon3	Direct Vis
Helical Full 0.6 sec rotation	S0.0	I70.0	0.625 39.37 0.984:1	0.625	S0.0	Large Body	120	350 28.00~ Smart mA On DR 50%	25.0	0.625mm Bone 2000ww 200wl SS50 For recons	2.5mm Bone 2000w 200l SS50 Send to Pacs	2.5mm Std 360w 40l SS50	On 3mm Cor and Sag Send to Pacs

Updated 1/30/2018