

GE VCT 64 SLICE PROTOCOLS

Protocol Name: THORACIC SPINE WITH CONTRAST ADULT	
INDICATIONS:	Evaluation of thoracic abscess or infection.
IV CONTRAST:	100 cc nonionic contrast. 2cc/sec injection. 22ga or better IV.
ORAL CONTRAST:	None
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Arms above head. Landmark above chest. Check with radiologist 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:	50 second delay
TECHNIQUE GUIDELINES:	120 kvp. Smart MA on.
LABEL:	SCOUT*, THORACIC *. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Std recon at 400ww/40wl. With 3 mm COR and SAG MPRs.
RECON 2:	2.5mm thick /2.5 mm interval. Std recon 400ww/40wl.
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 thoracic CT with contrast

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	1600.00	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 Rocon2	Show Rocon3	Direct Vis
Helical Full 0.7 sec rotation	S0.0 Mid C7 or ask rad/Dr. for levels	I200.0 L1 or ask rad/Dr. for levels	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 Bone+ 2000w 200l Send to pacs SS40	2.5mm Std 400ww 40wl Send to Pacs SS40	On 3mm Cor and Sag Send to Pacs

Updated 1/30/2018