

GE VCT 64 SLICE PROTOCOLS

Salem Radiology Consultants

Protocol Name:		GI BLEED ABDOMEN/PELVIS CT ANGIO-triple phase	
INDICATIONS:	Evaluation for GI bleed.	PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark at mid sternum. Cuts of the abdomen and pelvis are taken from a few cuts into the lungs to the ischial tuberosities. Same DFOV as previous abdomen CTs.
IV CONTRAST:	100 cc nonionic contrast (370 mg/ml). 4cc/sec, 20ga or better IV in a large vein.	ORAL CONTRAST:	NONE
GENERAL EXAM GUIDELINES:	5 x 5 mm axial non-con, 2.5 x 2.5 mm axial images in arterial, and 5 x 5 mm venous phases. Std recon 700ww/60wl. 400 DFOV. 0.625 recon for Sag and Cor Mip DMPRs of both contrast phases.	ADDITIONAL POST PROCESSING:	None
TRIGGER OR CONTRAST DELAY:	Smart prep preferred or can use timing bolus then 75 sec delay between arterial and venous phase to make it about a 2 minute delay.	SEND EXAM:	Send scout, 5mm axials, sag and cor in non-con, 2.5 mm axials, sag and cor in arterial phase, 5mm axials, sag and cor in venous phases and dose report to Pacs.
TECHNIQUE GUIDELINES:	120 kvp. Auto ma/smart ma on.	BILL AS:	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 Diaphragm	I650.00 Pubis	120	10	180	2T

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	CTDI vol
Helical Full 0.6 sec rotation	S0.0 Above Diaphragm	I400.0 Ischial tuberosities	0.625 39.37 0.984:1 2.5 mm noncon	0.625 2.5 noncon	S0.0	Large Body	120	450 30.00~ Cont 450 11.04~ noncon	40.0	0.625mm Std 700ww 60wl SS50	2.5mm Std 700ww 60wl SS50 Art	2.5mm Std 700ww 60wl SS50 Ven	Ave 5-30