

CTA CAROTID 16 Emotion

Indications	Severe headaches, memory loss, slurred speech, dizziness, blurred or double vision.					
Diagnostic Task	Detect carotid aneurysms, narrowing or a blockage or arteries					
Scan Mode	Helical					
Position/Landmark	Head first or feet first-Supine 1cm superior to exam					
Position/Landmark	Craniocaudal					
Topogram	Lat 110 kV 120 mA AP 110kV 120mA					
kVp/Reference mass	110kv 200mAs					
Rotation time/Pitch	0.85/0.6					
Detector Configuration	16x0.6					
Table Speed	8.16					
Dose reduction	Care Dose 4D					
Allowed CTDI ranges*	30mGy-80mGy					
XR29 Dose Notification v	80mGy					
Helical Set	body	thickness				recon
	recon	part	spacing	kernel	window	destination
	1 neck cta	.75mmx.6	H 45s	medium smooth	mediastinum	mpr/pacs
Scan Start/End	1cm below aortic arch					
	1cm above circle of willis					
DFOV	25cm decrease appropriately					
IV contrast volume/rate	80ml isovue 370 3-4cc/sec Performed as directed by the supervising radiologist					
	contrast should be injected into RT arm if possible					
Scan Delay	bolus track at arch, trigger is + 50					
3d technique used	1x1 lt and rt oblique carotid MPR from recon 1					
	4x1 coronal MIP from recon 1					
	2x2 sag MPR from recon 1					
NOTE*	The Diagnostic Reference Dose (CTDI vole) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state)					
	is 80mGy. Most routine head scans on modern scanners have Civil ranges between 40 and 60mGy.					
	*The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum Civil should match					
	the dose notification value. Exams with CTDI vole values less than the minimum allowed range should not be performed unless					

1
n