CTA BRAIN GE 16

| Indications | Severe Headache, dizziness, memory loss, slurred speech, blurred vison, weakness | | | | | |
|------------------------------|---|---|-----------------|-----------|-------------|--|
| Diagnostic Task | Detect Vascular disease, aneurysm evaluation, Acute Stroke | | | | | |
| Scan mode | Helical | | | | | |
| Position/Landmark | Head first Supine Sternal Notch S250-I150 | | | | | |
| Topogram | AP 120kV 10ma Lat mA 10 kV120 | | | | | |
| kVp/Reference mass | NC brain kv 120 mA 300//CTA Smart mA (100-440) | | | | | |
| Rotation time/pitch | NC Brain 1.0/0.562:1//CTA 0.7/0.938:1 | | | | | |
| Detector Configuration | NC Brain16x0.625//CTA 16x0.625 | | | | | |
| Table Speed/Increment | NC Brain5.62//CTA 13.75 | | | | | |
| Dose reduction | Noise Index 7.00//CTA 7.00 | | | | | |
| Allowed CTDI ranges* | 30mGy-80mGy | | | | | |
| XR29 Dose Notification value | 80mGy | | | | | |
| Helical Set | | body | thickness | | recon | |
| | recon | part | spacing | algorithm | destination | |
| | 1 brain | thin | 0.625mmx .625mm | standard | mpr | |
| | 2 brain | | 5mmx 5mm | standard | pacs | |
| | 3 bone | | 1mmx1mm | bone | pacs | |
| | 3 sag br | ain | 1mmx1mm | standard | pacs | |
| | 4 corona | al brain | 1mmx1mm | standard | pacs | |
| Helical Set | body thickness | | | | recon | |
| CTA Brain | recon | part | spacing | algorithm | destination | |
| | 1 cta brain | | 0.625mmx0.625mm | standard | pacs | |
| | 2 coronal c | ow MIP | 5mmx2mm | standard | pacs | |
| | 3 sag cow | MIP | 5mmx2mm | standard | pacs | |
| | 4 axial MIP | | 20mmx5mm | standard | pacs | |
| | 5 sag brain | MPR | 1mmx1mm | standard | pacs | |
| | 6 coronal b | rain MP | R 1mmx1mm | standard | pacs | |
| Scan Start | NC brain 1cm below maxilla in include sinus//CTA two inches below base of skull | | | | | |
| END | NC brain 1cm above skull vertex//CTA 1cm above skull vertex | | | | | |
| DFOV | nc brain:25cm cta:18cm | | | | | |
| IV contrast volume/type | 60ml | 60ml isovue 370 4cc/sec-Performed as directed by the supervising radiologist | | | | |
| | contrast should be injected into RT arm if possible | | | | | |
| Scan delay | Smart Prep in Aortic arch-manually trigger when graph hits 90 | | | | | |
| NOTE* | The Diagnostic Reference Dose (CTDI vol) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state) s 80mGy. Most routine head scans on modern scanners have CTDIvol ranges between 40 and 60mGy. | | | | | |
| | *The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum CTDIvol should match | | | | | |
| | the dose notification v | ne dose notification value. Exams with CTDI vol values less than the minimum allowed range should not be performed unless | | | | |

*The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum CTDIvol should match the dose notification value. Exams with CTDI vol values less than the minimum allowed range should not be performed unless approved by a radiologist.