C-SPINE 16 Sensation

Indications	Neck pain, fall, surgery, trauma
Diagnositc Task	Detect fractures, herniated disk, spinal stenosis
Scan mode	Helical
Position/Landmark	Head or feet first-Supine Vetex of head
Topogram	AP/Lat 50mA 140kV
kVp/Reference mass	120kv 210mAs
Rotation time/pitch	0.75/0.75
Detector Configuration	16x0.75
Table Speed/Increment	9
Dose reduction	CareDose 4D
Allowed CTDI ranges*	7mGy-50mGy
XR29 Dose Notification value	50mGy
Helical Set	recon / body part / thickness spacing / kernel / window / recon destination 1 thin c-spine 1mmx.7mm 60sharp osteo mpr/pacs 2 c-spine 2mmx 2mm 31medium smooth mediastinum pacs 3 thin c-spine 1mmx.5mm 31medium smooth mediastinum for mpr
Scan Start/end location	1cm supeior to base of skull
	1cm inferior to c-7
DFOV	18 cm decrease appropriately
3D Technique Used	2x2 coronal and sag reformats from recon 1 (bone)
	2x2 coronal and sag reformats for recon 3 (soft tissue)
	If axial images of c-spine were not obtained because of pt's kyphosis please
	do a modified axial reformat 2x2(to get an axial view of c-spine)in bone
IV contrast volume/type	none
Scan delay	none
	if metal present increase kVp to 140 and use extended scale
NOTE*	*The AAPM recommended NEMA XR29 Dose Notificaton Value for an adult toros is 50mGy. Dose Notification levels less than the AAPM recommened can be set. The maximum CTDI vol 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.

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Approved by Dr Walker