

# ROUTINE BRAIN GE 64

Indications	Intracranial bleed, mental status change, trauma, general screening, ha				
Diagnostic Task	Detect collections of blood; identify brain masses; detect brain edema or ischemia; identify shift in the normal locations of the brain				
Scan mode	Helical				
Position/Landmark	Head first Supine S150-I100				
Topogram	Lat 80mA kV 120				
kVp/Reference mass	kv 120 Auto mA (200-350)				
Rotation time/pitch	0.8/0.531:1				
Detector Configuration	64x0.625				
Table Speed/Increment	10.62				
Dose reduction	Noise Index 8.00				
Allowed CTDI ranges*	30mGy-80mGy				
XR29 Dose Notification value	80mGy				
Helical Set		body	thickness		recon
	recon	part	spacing	algorithm	destination
	1	brain thin	1.25mmx 1.25mm	standard	pacs
	2	brain	5mmx 5mm	standard	pacs
	3	bone	1.25mmx1.25mm	bone	pacs
	3	sag brain	1mmx1mm	standard	pacs
4	coronal brain	1mmx1mm	standard	pacs	
Scan Start/end location	1cm below maxilla in include sinus				
	1cm above skull vertex				
DFOV	25 cm decrease appropriately				
IV contrast volume/type	80ml isovue 370 2cc/sec-Performed as directed by the supervising radiologist				
Scan delay	90 second delay				
NOTE*	The Diagnostic Reference Dose (CTDI vol) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state) is 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 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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