CTA Chest 64 GE

Indications	trauma, acute aortic syndrome, suspected aneurysm/dissection				
Diagnostic Task	Detect aneurysms, aortic dissections and				
Scan mode	Helical				
Position/Landmark	Head first-Supine Sternal Notch S60-I350				
Topogram	AP 120kV 20mA Lat 120kV 40mA				
kVp/Reference mass	120kv Auto mA (200-700)				
Rotation time/pitch	0.5/0.984:1				
Detector Configuration	64x0.625				
Table Speed/Increment	39.37				
Dose reduction	Noise Index 15.86				
Allowed CTDI ranges*	7mGy-50mGy				
XR29 Dose Notification value	50mGy				
Helical Set 1					
non contrast	recon	body part	thickness spacing	algorithm	recon destination
	1	chest	1.25mmx 1.25mm	standard	pacs
	if patient under 40 ask about non contrast images				
Helical Set 2					
	recon	body part	thickness spacing	algorithm	recon destination
	1	chest	1.25mmx 1.25mm	standard	pacs/TR
	2	lung	1.25mmx 1.25mm	lung	pacs
	3	sag chest	2mmx2mm	standard	pacs
	4	coronal chest	2mmx2mm	standard	pacs
	5	axial mip lung	10mmx2mm	standard	pacs
When super D or stereo chest	6	thin chest	1.25mmx1.0mm	standard	pacs/TR
	7	MIP coronal aorta	5mmx2mm	standard	pacs
	8	MIP sag aorta	5mmx2mm	standard	pacs
Helical Set 3					
60sec	recon	body part	thickness spacing	algorithm	recon destination
	1	chest	1.25mmx 1.25mm	standard	pacs
	If stent/graft, s/p TEVAR, venous evaluation				
Scan Start/end location	2cm superior to lung apices				
	Diaphragm				
DFOV	40cm				
IV contrast volume/type	80ml <175lbs 100ml 175-350lbs 120ml >350lbs Isovue 370, 40ml ns				
	Performed as directed by the supervising radiologist				
	bolus tracking in ascending aorta				
Scan delay	Initiate scan manually-enhancement threshold of 110HU				
	Comments: Being able to locate the descending aorta is important.. The monitoring phase will not trigger properly and the scan will not start correctly if the roi is not placed on the correct anatomy.				
	Approximate Values for CTDIvol				
	Patient size	weight(kg)	weight(lbs)	CTDIvol(mGy)	
	SMALL	50-70	110-155	4-10	
	AVERAGE	70-90	155-200	8-16	
	LARGE	90-120	200-265	14-22	
NOTE*	*The AAPM recommended NEMA XR29 Dose Notification value for an adult torso is 50mGy. Dose Notification levels less than the AAPM recommended 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.				

Revision Date 3-22-2018/3-19-2019
Approved by Dr Verdini

Revision Date 3-22-2018/3-19-2019
Approved by Dr Verdini