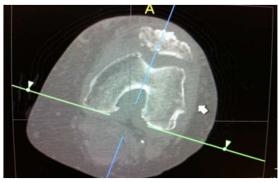
## Knee 64 Toshiba

Indications	Pai	in, swelling, trauma					
Diagnostic Task	Detects fractures, hematomas, arthritis, bone cyst						
Scan mode	Helical						
Position/Landmark	Head or feet first-supine-include joint of interest only S-I						
Topogram	AP 120kV 50mA Lat 120kV 50mA						
kVp/Reference mass	120kv 300mA						
Rotation time/pitch	0.5/0.641						
Detector Configuration	64x0.5						
Table Speed/Increment	20.5						
Dose reduction	na						
Allowed CTDI ranges*	7mGy-50mGy						
XR29 Dose Notification value	50mGy						
Helical Set		body	thickness			recon	
	rec	con part	spacing	kernel	window	destination	
	1	knee bone	.5mmx .5mm	b	one	pacs	
		soft tissue thin	1mmx0.8mm	standard		mpr 3d	
		knee soft tissue	2mmx 2mm	standard		pacs	
		sag bone	2mmx2mm	bone		pacs	
		coronal bone	2mmx2mm	bone		pacs	
		sag soft tissue	2mmx2mm	standard		pacs	
		coronal soft tissue	2mmx2mm	standard		pacs	
Scan Start/end location	3cm superior to knee joint include patalla						
	3cm inferior to knee joint						
	include all of fx and hardware						
DFOV	25 cm						
		decrease appropriately					
3D Technique Used	do	do 3d spin with recon 2-if fracture seen					
IV contrast volume/type	-	100ml -isovue 370- if needed for soft tissue infection or mass					
Scan delay	90	90seconds-Performed as directed by a the supervising radiologist					

Slide patient over so the the knee being imaged is centered in the scanner. Taping feet together helps stabilize knees.



Coronal and sagittal reformats are oriented using an axial image at the level of the femoral condyles.

Revision Date 8-15-2017 Approved by Dr G. Wang

10.00mm/de