ROUTINE CHEST/ABDOMEN with64 GE

Indications	For abdomen pain, lympho	oma, restage ca, weight loss	s, fatique,	
Diagnostic Task	Detect masses, free fluid, abscess, mets			
Scan mode	Helical			
Position/Landmark	Head first-Supine Xiphoid S60-I650			
Topogram	AP 120kV 20mA Lat 120kV 40mA			
kVp/Reference mass	120kv Auto mA (300-700)			
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	body	thickness		recon
	recon part	spacing	algorithm	destination
	1 chest/abdomen	2.5mmx 2.5mm	standard	pacs
	2 lung	1.25mmx1.25mn	n lung	pacs
	3 sag abdomen	2mmx2mm	standard	pacs
	4 coronal abdomen	2mmx2mm	standard	pacs
	5 sag chest	2mmx2mm	standard	pacs
	6 coronal chest	2mmx2mm	standard	pacs
	7 axial MIP lung	10mmx2mm	standard	pacs
Scan start/end location	1cm superior to shoulder			
	superior iliac crest			
IV contrast volume/rate	40cm			
	decrease appropriately			
Scan delay	75ml < 200lbs	100ml 200-250lbs, 12	25ml>250lbs isovue 37	0 2.5-3cc/sec
	Performed as directed by a supervising radiologist			
	60seconds			
	WITH ORAL AND IV CONTRAST, MARK AREA OF PAIN WITH BB			
	Approximate Values for CTDIvol			
	Patient size w	reight(kg) v	weight(lbs)	CTDIvol(mGy)
	SMALL	50-70	110-155	10-17
	AVERAGE	70-90	155-200	15-25
	LARGE	90-120	200-265	22-35
NOTE*	AAPM recommended can be set. The r	R29 Dose Notification Value for an a naximum CTDI vol should match the dose ned unless approved by a radiologist.	notification value. Exams with CTDI vo	