ROUTINE CHEST/ABDOMEN/PELVIS 64 GE

Indications	For abdomen pain, lymphoma	restage ca weight los	s fatique	
Diagnostic Task	Detect masses, free fluid, abs		o, lauguo,	
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/pelvis	2.5mmx 2.5mm	standard	pacs
	2 lung	1.25mmx1.25m	m 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	helical set 1 C/A/P-1cm superior to shoulder			
	lesser trochanter			
IV contrast volume/rate	40cm			
	decrease appropriately			
Scan delay	75ml < 200lbs, 10	00ml 200-250lbs, 1	25ml>250lbs isovue 3	70 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			
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	Patient size weigh	t(kg)	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*	*The AAPM recommended NEMA XR29 AAPM recommended can be set. The maxim allowed range should not be performed to	num CTDI vol should match the dos	e notification value. Exams with CTDI	