

CT Chest Esophogram 64 Sensation

Indications	Concern for esophageal perforation					
Diagnostic Task	Detect perforation of esophagus					
Scan mode	Helical-inspiration					
Position/Landmark	Head first-Supine 1cm to shoulders-arms above head					
Topogram	PA 50mA 120kV					
kVp/Reference mass	120kv 180mas/Care Dose ON/100kv if pt under 140lbs					
Rotation time/pitch	0.5/0.8					
Detector Configuration	64x0.6					
Table Speed/Increment	23.04					
Dose reduction	CareDose 4D					
Allowed CTDI ranges*	7mGy-50mGy					
XR29 Dose Notification valu	50mGy					
Helical Set	recon	body part	thickness spacing	kernel	window	recon destination
	1	chest	2mmx 2mm	31medium smooth	mediastinum	pac
	2	lung	1.5mmx 1.5mm	70very sharp	lung	pac
	3	coronal chest	2mmx2mm	31medium smooth	mediastinum	pac
	4	sag chest	2mmx2mm	31medium smooth	mediastinum	pac
	5	axial MIP lung	10mmx2mm	B20f smooth	lung	pac
	6	Super D	1mmx0.8mm	31medium smooth	mediastinum	pac
Scan Start/end location	C4/5					
	L2/3					
DFOV	35cm/decrease for lung recons					
	decrease appropriately					
	Immediately before scout, pt drinks all contrast but one swallow					
	immediately after scout with pt lying down 1 swallow of contrast by straw					
	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.

