

Gated Thoracic Aorta Fast 64 Siemens

Used when HR above 100

Indications	trauma, acute aortic syndrome, suspected aneurysm/dissection				
Diagnostic Task	Detect aneurysms, aortic dissections and				
Scan mode	Prospective 300s				
Position/Landmark	first-Supine-inspiration				
Topogram	AP 120kV 35mA Lat 120kV 35mA				
kVp/Reference mass	wo contrast scan 100kv, 200mA//gated 120kV 400mA				
Rotation time/pitch	wo contrast 0.5/0.8//gated 0.33s/0.3 pitch				
Detector Configuration	24x1.2//24x1.2				
Dose reduction	without-care dose on//gated off				
Allowed CTDI ranges*	7mGy-50mGy				
XR29 Dose Notification value	50mGy				
NC scan	1.5mm x 1.5mm, B20f, Mediastinum				
Helical Set	body recon	part	thickness spacing	algorithm	recon destination
	1	Gated Aorta 300ms	1.5mmx 1.5mm	b20f/mediastinum	pacs/TR
	2	Gated Aorta 300ms	2mm x 2mm	b20f/mediastinum	pacs/TR
	3	coronal chest	2mmx 2mm	b20f/mediastinum	pacs
	4	sagittal chest	2mmx 2mm	b20f/mediastinum	pacs
	5	lung	1.5mmx1.5mm	b60f/lung	pacs
	6	axial mip lung	10mmx2mm	lung	pacs
	7	Cor MIP Aorta	5mm x 2mm	b20f/mediastinum	pacs
	8	Sag MIP Aorta	5mm x 2mm	b20f/mediastinum	pacs
Scan Start/end location	Scan caudocranial from liver dome to thoracic inlet (top of lung)				
DFOV recon 1 thins	275mm-aorta and heart				
recon 2 and NC scan	Full Chest				
IV contrast volume/type	100ml Isovue 370 at 4cc/sec				
Scan delay	Bolus Tracking at descending aorta(level just inferior to carina) Trigger is +50HU				

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.

