

CTA Abd/Pelvis GO UP

Indications	trauma, acute aortic syndrome, suspected aneurysm/dissection				
Diagnostic Task	Detect aneurysms, aortic dissections				
Scan mode	Helical				
Position/Landmark	Head first-Supine 1cm to shoulders/inspiration				
Topogram	AP 15mA 110kV				
kVp/Reference mass	without 130kv 99mas// with 110kV 92mAs				
Rotation time/pitch	without 0.8/0.8// with 0.8/1.2				
Detector Configuration	32x0.7				
Table Speed/Increment	without 17.92 // with 26.88				
Dose reduction	CareDose 4D				
Allowed CTDI ranges*	7mGy-50mGy				
XR29 Dose Notification value	50mGy				
Helical Set 1 NON CONTRAST	recon	body part	thickness spacing	kernel	recon destination
	1	A/P	1.5mmx1.5mm	Br40	Abdomen pacs
	if patient under 40 ask about non contrast images				
Helical Set 2 ARTERIAL	recon	body part	thickness spacing	kernel	recon destination
	1	A/P	2mmx2mm	Bv36	Angio pacs/TR
	2	cor a/p	2mmx2mm	Bv36	Angio pacs
	3	sag a/p	2mmx2mm	Bv36	Angio pacs
	4	thin a/p	0.6mmx0.6mm	Br36	Angio pacs/TR
	5	Cor MIP aorta	5mmx2mm	Br36	Angio pacs
	6	sag MIP aorta	5mmx2mm	Br36	Angio pacs
Scan start/End location	Hepatic dome Symphysis pubis 40cm decrease appropriately				
DFOV					
IV contrast volume/type	<200lbs 100ml 200+lbs 125ml isovue 370 4-5ml/sec				
Scan delay	Bolus Tracking in aorta T-12 level Trigger is +100HU				
	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.				

