ROUTINE BRAIN GO ALL

Indications	**Intracranial bleed, mental status change, trauma, general screening, ha**
Diagnostic Task	**Detect collections of blood; identify brain masses; detect brain edema or ischemia; identify shift in the normal locations of the brain**
Scan Mode	Helical
Position/Landmark	Head or feet first-supine/ at chin
Topogram	lateral 30mAs 130kVp
kVp/Reference mass	130kv 206mAs
Rotation time/pitch	1.0sec/0.55
Detector Configuration	32x0.7
Table Speed/Increment	12.32
Dose reduction	na
Allowed CTDI ranges*	30mGy-80mGy
XR29 Dose Notification value	80mGy
Helical Set	recon / body part / thickness spacing / kernel / window / recon destination 1 brain / 1.5mmx 1.5mm / Hv40 / cerebrum / pacs 2 skull / 1.5mmx1.5mm / Hr60 / bone / pacs 3 axial brain / 5mmx 5mm / Hv40 / cerebrum / pacs 4 Sag / 1.5mmx1.5mm / Hv40 / cerebrum / pacs 5 Cor / 1.5mmx1.5mm / Hv40 / cerebrum / pacs
Scan Start/End	1cm below maxilla in include sinus
	1cm above skull vertex
DFOV	25 cm decrease appropriately
IV contrast volume/rate	80ml isovue 370 2cc/sec-Performed as directed by the supervising radiologist
Scan Delay	90 second delay
note*	The Diagnostic Reference Dose (CTDI vol) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state) is 80mGy. Most routine head scans on modern scanners have CTDIvol ranges between 40 and 60mGy.
	*The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum CTDIvol 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.

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Approved by Dr Walker