

# ROUTINE NECK GO ALL

<b>Indications</b>	Sore throat, neck mass, difficulty swallowing, hoarseness					
<b>Diagnostic Task</b>	Detect lymphoma, cancer, neck abscess, lymphoma, vocal cord paralysis					
<b>Scan Mode</b>	Helical					
<b>Position/Landmark</b>	Head first supine 1cm superior to skull vertex-Craniocaudal					
<b>Topogram</b>	Lat 130kV 30mA					
<b>kVp/Reference mass</b>	130kv 112mAs					
<b>Rotation time/pitch</b>	1.0/0.8					
<b>Detector Configuration</b>	32x0.7					
<b>Table Speed/Increment</b>	17.92					
<b>Dose reduction</b>	Care Dose 4D					
<b>Allowed CTDI ranges*</b>	30mGy-80mGy					
<b>XR29 Dose Notification value</b>	80mGy					
<b>PRE INJECT</b>	<b>40ml at 1.5cc/sec wait 90sec</b>					
<b>Helical Set</b>	body		thickness		recon	
<b>60ML at 2.5cc/sec</b>	recon	part	spacing	kernel	window	destination
<b>30second delay</b>	1	neck	2mmx 2mm	Br40	mediastinum	pacs
	2	sag neck	2mmx2mm	Br40	mediastinum	pacs
	3	cor neck	2mmx2mm	Br40	mediastinum	pacs
<b>Scan Start/end location</b>	ROUTINE		/ VOICE CHANGE/ VOCAL CORD PARALYSIS			
	top of orbital roof		/ top of orbital roof			
	sternoclavicular junction		/ down to the carina			
<b>DFOV</b>	20cm-include area of interest do not clip nose					
<b>IV contrast volume/type</b>	40ml at 1.5cc/sec wait 90sec					
<b>Scan delay</b>	60ml at 2.5ml/sec at a 30sec delay					
	note: Please place a BB on any palpable mass					
<b>Note:</b>	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.					