

GE VCT 64 SLICE PROTOCOLS

Protocol Name: AAA and/or ABDOMINAL CTA ADULT	
INDICATIONS:	Evaluation of known AAA.
IV CONTRAST:	100 cc nonionic contrast (370 mg/ml). 4cc/sec, 20ga or better IV in a large vein.
ORAL CONTRAST:	No barium for abdominal CTAs. Water is an option if oral contrast is needed.
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark at mid sternum. Cuts are taken from a few cuts into the lungs through the bifurcation or pubis if pelvis is also ordered. Same DFOV as previous abdomen CTs.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images. 400 DFOV.
TRIGGER OR CONTRAST DELAY:	Smart prep or can use timing bolus
TECHNIQUE GUIDELINES:	120 kvp. Auto ma on.
LABEL:	SCOUT*, ABDOMEN*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Std recon at 700ww/60wl.
RECON 2:	2.5mm thick /2.5 mm interval. Std recon 700ww/60wl.
ADDITIONAL POST PROCESSING:	Send 0.625mm to awkstknl for 3Ds. Save a 40 image rotation of the 3D aorta to pacs.
SEND EXAM:	Send scout, 2.5mm axials, and sag and cor images to pacs.
ARCHIVE:	
BILL AS:	ABDOMEN CTA OR ABDOMEN AND PELVIS CTA

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	I650.00	120	10	90 and 0	2T
	Diaphragm	Pubis				

AXIAL IMAGE PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	Thick Speed	Interval (mm)	Gantry Tilt	SFOV	kv	ma	DFOV	Show Recon1	Show Recon2	Show Recon3	Direct Vis
Helical Full 0.6 sec rotation	S0.0	I400.0	0.625 55.00 1.375:1	0.625	S0.0	Large Body	120	450 22.10~ Auto ma on	40.0	0.625mm Std 400ww 50wl For recons SS50	2.5mm Std 400ww 50wl Send to Pacs SS50		On 5mm Cor and Sag MIPs