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GE VCT 64 SLICE PROTOCOLS

Salem Radiology Consultants

Protocol Name:	ABDOMEN FOR PANCREATITIS ADULT (Select routine abdomen/pelvis)								
INDICATIONS:	Evaluation of patient for pancreatitis or follow up pancreatitis.	LABEL:	SCOUT*, ABDOMEN*. The * means anything after these beginnings will hang correct in pacs						
IV CONTRAST:	100 cc nonionic contrast. 2cc/sec, 22ga or better IV	RECON 1:	.625mm thick/.625 mm interval. Std recon at 400ww/30wl. With cor and sag 5mm avg DMPRs.						
ORAL CONTRAST:	1 cup of Gastroview every 15 minutes is drank the hour prior to scanning.	RECON 2:	5mm thick / 5 mm interval. Std recon 400ww/30wl.						
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark at mid sternum. Cuts are taken from a few cuts into the lungs through a few cuts into the iliac crests or pubis if pelvis is also ordered. Same DFOV as previous abdomen CTs.	ADDITIONAL POST PROCESSING:	None						
GENERAL EXAM GUIDELINES:	5 x 5 mm axial images. 400 DFOV.	SEND EXAM:	Send scout, 5mm axials, and sag and cor images to pacs.						
TRIGGER OR CONTRAST DELAY:	70 Second delay set	ARCHIVE:							
TECHNIQUE GUIDELINES:	120 kvp. Auto ma on.	BILL AS:	Usually abdomen &/or pelvis with contrast (check dr.'s order)						

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	1500.00	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 Rocon2	Show Rocon3	Direc Vis
Helical Full 0.6 sec rotation Above Diaphr agm	0 I400.0 5 39 ove Below 0.9 aphr Iliac n crest or	5 39.37 0.984:1	5 59.37 5	S0.0 Large Body		300 11.57~ Auto ma on	40.0	0.625mm Std 400ww 30wl	5mm Std 375ww 50wl		On 5mm Cor and		
		Pubis						DR 50%		For recons SS50	Send to Pacs SS50		Sag avg mprs
											Updat	ed 02/01/20	01