

## GE VCT 64 SLICE PROTOCOLS

Protocol Name: ADRENAL CT ADULT	
INDICATIONS:	Follow up of adrenal mass.
IV CONTRAST:	Sometimes none. 125 cc nonionic contrast. 2cc/sec, 22ga or better IV.
ORAL CONTRAST:	Usually none.
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark at mid sternum. Small FOV cuts are taken centered to include both adrenal glands. Do noncontrast adrenal images. Measure the adrenal mass. If the ROI in the mass measures under 10 HU you are done. No IV contrast is needed. If the mass measures 10 HU or more, start IV, repeat images with contrast and 60 second delay (no pre dose of contrast). Then wait 15 minutes and repeat images (washout phase). If a pheochromocytoma is suspected: scan the abdomen in 5's after the 60 second delay adrenal images. No washout phase is needed.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images without contrast and measure to see if contrast is needed.
TRIGGER OR CONTRAST DELAY:	60 Second delay and 15 minute delay if contrast is needed.
TECHNIQUE GUIDELINES:	120 kvp. Auto ma on.
LABEL:	SCOUT*, ADRENAL*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	2.5mm thick / 2.5 mm interval. Std recon at 400ww/30wl.
RECON 2:	None
ADDITIONAL POST PROCESSING:	None
SEND EXAM:	Send scout, 2.5mm axials, and to pacs (OCIPACS1 under network).
ARCHIVE:	
BILL AS:	Usually abdomen without or w/wo contrast.

### 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 & 180	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	Direct Vis
Helical Full 0.6 sec rotation	S0.0	I300.0	2.5 39.37 0.984:1	2.5	S0.0	Large Body	120	500 15.86~	16.0	2.5mm Std  400ww 30wl  Send to Pacs			Off
	Above Adrenal glands	Below Both adrenal glands											