

GE VCT 64 SLICE PROTOCOLS

Protocol Name: CERVICAL SPINE ROUTINE ADULT			
INDICATIONS:	Evaluation of cervical injury, pain, and shoulder/arm pain or numbness.	LABEL:	SCOUT*, CERVICAL*. The * means anything after these beginnings will hang correct in pacs
IV CONTRAST:	None	RECON 1:	.625mm thick/.625 mm interval. Bone recon at 1500ww/300wl. With 3 mm COR and SAG MPRs.
ORAL CONTRAST:	None	RECON 2:	2.5mm thick /2.5 mm interval. Bone recon 1500ww/300wl.
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Head first. Landmark at mid sternum. Cuts are taken from skull base to mid pedicle of T1. No gantry angle.	ADDITIONAL POST PROCESSING:	Usually none. Send 0.625 images to awwkstn1 if 3D is needed.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images with 3 mm sag and cor recons. 120 DFOV.	SEND EXAM:	Send scout, 2.5 axials, and SAG and COR recons to pacs.
TRIGGER OR CONTRAST DELAY:	None	ARCHIVE:	
TECHNIQUE GUIDELINES:	120 kvp. Smart MA on.	BILL AS:	Usually cervical CT without contrast

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S240.00	I60.00	120	90 and 20	90 and 0	1
	Mid skull	Mid sternum				

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 0.7 sec rotation	S110.0	I50.0	0.625 39.37 0.984:1	0.625	S0.0	Small Body	120	580 12.60~ Smart mA On DR 30%	12.0	0.625mm Bone 2000ww 200wl For recons SS30	2.5mm Bone 2000w 200l Send to Pacs SS30	2.5mm Std 350w 40l Send to Pacs SS30	On 3mm Cor and Sag Send to Pacs

Updated 2/1/2018