

GE VCT 64 SLICE PROTOCOLS

Protocol Name: CHEST CT 5 to 10 YRS CHILD	
INDICATIONS:	Evaluation of child with mediastinal abnormality, lung cancer, pleural effusion, empyema, or trauma, etc.
IV CONTRAST:	1cc per pound of nonionic contrast. 1.0-2cc/sec. 24ga or better IV.
ORAL CONTRAST:	None
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark above chest. Cuts are taken from above lungs through the adrenal glands. Same DFOV as previous chest CTs.
GENERAL EXAM GUIDELINES:	5 x 5 mm axial images. 300 DFOV.
TRIGGER OR CONTRAST DELAY:	40 Second delay set or remove delay if hand injecting.
TECHNIQUE GUIDELINES:	100 kvp. Auto ma on.
LABEL:	SCOUT*, CHEST*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Std recon at 400ww/30wl. With cor and sag 5mm avg DMPRs.
RECON 2:	5mm thick / 5 mm interval. Std recon 400ww/30wl.
ADDITIONAL POST PROCESSING:	None
SEND EXAM:	Send scout, 5mm axials, and sag and cor images to pacs.
ARCHIVE:	
BILL AS:	Usually chest CT with contrast

SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00	I400.00	100	10	180	2
	Above chest	Mid abdomen				

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 0.5 sec rotation	S0.0	I200.0	5 27.50 1.375:1	5	S0.0	Ped Body	100	275 10.00~ Auto ma on DR 20%	30.0	5mm Std 400ww 30wl Send to Pacs SS20	0.625m m Std 400ww 30wl For recons SS20	.	On 5mm Cor and Sag avg mprs