

## **GE VCT 64 SLICE PROTOCOLS**

## Salem Radiology Consultants

<b>Protocol Name:</b>	CHEST HIGH RESOLUTION ADULT								
INDICATIONS:	Evaluation of lung tissue for diffuse lung disease, bronchiectasis, or exposure to asbestos.	PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Landmark above chest. Cuts are taken from apices through the adrenals helically on inspiration Then next series on expiration through lung bases only.						
IV CONTRAST:	None	ORAL CONTRAST:	None						
ORAL CONTRAST:	None	RECON 2:	None						
GENERAL EXAM GUIDELINES:	Helical non contrast 5 mm axial standard images on full inspiration with 5 mm sag/cors, 5x5 mm lung window, and 1.25 x 10 mm high res lung window recons and axial expiration 1.25 x 20 axial high res lung windows.	SEND EXAM:	Send Scout, Inspiration - axials in lung, soft tissue, and high res windows and sag/cors.  Expiration – lung window axial and dose report images to pacs.						
TECHNIQUE GUIDELINES:	120 kvp. Auto ma/smart ma on.	BILL AS:	Chest CT without contrast						

## SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S0.00 Above chest	I350.00 Mid abdomen	120	10	180	2T

## 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	CTDI vol
Helical Full 0.6 sec Rotatio n	S0.0	1300.0	5.0 39.37 0.984:1	5.00	S0.0	Large Body	120	250 11.57~	40.0	5mm Std 400ww 30wl SS50	0.625 Std 400ww 30wl SS50	1.25 x 10 Bone + 2000w w -600wl SS20	Avg 4-30
Axial Full 0.5 sec rotation	S0	1300	1.25 1i	20.00				305		1.25 x20 Bone + 2000ww -600wl SS20			1.5-5