

## GE VCT 64 SLICE PROTOCOLS

Protocol Name: ANKLE OR FOOT ROUTINE ADULT	
INDICATIONS:	Evaluation of ankle or foot for fracture
IV CONTRAST:	Usually none unless for soft tissue infection.
ORAL CONTRAST:	None
PATIENT POSITIONING AND SCAN AREA:	Patient supine. Feet first. Foot/ankle in center of table. Knee is straight. Foot points up. Landmark at distal lower leg. Ankle: scan from distal tibiofibular joint to below plantar surface. Include proximal metatarsals. Foot: scan same area, But include entire foot. No gantry angle.
GENERAL EXAM GUIDELINES:	2.5 x 2.5 mm axial images with 3 mm sag and cor recons. 200 DFOV.
TRIGGER OR CONTRAST DELAY:	None
TECHNIQUE GUIDELINES:	120 kvp. 330 ma at 0.8 seconds
LABEL:	SCOUT*, EXT*. The * means anything after these beginnings will hang correct in pacs
RECON 1:	.625mm thick/.625 mm interval. Bone recon at 2000ww/200wl. With 3 mm COR and SAG MPRs.
RECON 2:	2.5mm thick /2.5 mm interval. Bone recon 2000ww/200wl.
ADDITIONAL POST PROCESSING:	Usually none. Send 0.625 images to awwkstn1 if 3D is needed.
SEND EXAM:	Send scout, 2.5 axials, and SAG and COR recons to pacs.
ARCHIVE:	
BILL AS:	Usually lower extremity CT without contrast

### SCOUT PROTOCOL SET IN SCANNER

Scan Type	Start Loc	End Loc	kV	mA	Scout Plane	Voice Lights Timer
Scout	S150.00	I100.00	120	40	90 and 180	N
	Distal lower leg	Bottom of foot				

### 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 0.5 sec rotation	S0.0	I100.0	0.625 19.37 0.969:1	0.625	S0.0	Small Body	120	330	20.0	0.625mm Bone 2000ww 200wl For recons SS50	2.5mm Bone 2000w 200l Send to Pacs SS50	2.5mm Std 400w 40l Send to pacs SS50	On 3mm Cor and Sag Send to Pacs

Updated 1/30/2018