GE VCT 64 SLICE PROTOCOLS

Protocol Nan	H	HIP FOR FRACTURE ADULT												
INDICATIONS:			R/O or follow up hip fractures				any				nything a	COUT*, EXT*. The * means ything after these beginnings II hang correct in pacs		
IV CONTRAST:			Usually none unless for soft tissue infection.				RECON 1:				.625mm thick/.625 mm interval. Bone recon at 2000ww/200wl. With 3 mm COR and SAG MPRs.			
ORAL CONTRAST:			None				RECON 2:				2.5mm thick /2.5 mm interval. Bone recon 2000ww/200wl.			
PATIENT POSITIONING AND SCAN AREA:			Patient supine. Arms above head or across chest. Landmark just above iliac crest. Scan axial images from above acetabulum to below lesser trochanter of femur (or through fracture if it is below the lesser trochanter).				PROCESSING:				Usually none. Send 0.625 mages to awwkstn1 if 3D is needed.			
GENERAL EXAM GUIDELINES:			2.5 x 2.5 mm axial images with 3 mm sag and cor recons. 200 DFOV.								Send scout, 2.5 axials, and SAG and COR recons to pacs.			
TRIGGER OR CONTRAST DELAY:			None				ARCHIVE:							
TECHNIQUE GUIDELINES:			120 kvp. 330 ma at 0.8 seconds				BILL AS:				Usually lower extremity or pelvis CT without contrast			
				SCOU	T PRC	TOCOI	L SET	IN SC	CANNE	R				
Scan Type			End Loc			kV		mA	mA		Scout Plane		Voice Lights Timer	
Scout S60.00 Iliac crest				I350.00 Below hip		120		10 and 10		90 an	90 and 0			
AXIAL IMAGE PROTOCOL SET IN SCANNER														
Scan Sta Type Lo	art En		Thick Speed	Interval (mm)	Gantry Tilt	SFOV	kv	ma	DFOV	Show Recon1	Show Rocon2	Show Rocon3	Direct Vis	
Helical Full 0.8 sec Illi rotation cre	ac Be	50.0 elow sser ochant	0.625 39.37 0.984:1	0.625	S0.0	Large Body	120	330 22.10~ Smart mA On DR 50%	40.0	0.625mm Bone+ 2000ww 200wl For recons SS50	2.5mm Bone+ 2000w 2001 Send to Pacs SS50	5.0mm Std 400w 351 Send to pacs SS50	On 3mm Cor and Sag Send to Pacs	
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