Protocol N	Name:	Р	PELVIS	ROUTI	NE WI	ГН СОГ	NTRA	ST AD	ULT					
INDICATIONS:			Evaluation or follow up of patients with Tumor, abscess, or nonspecific pelvic complaints.				LABEL:				SCOUT*, ABDOMEN*. The * means anything after these beginnings will hang correct in			
IV CONTRAST:			100 cc nonionic contrast. 2cc/sec, 22ga or better IV				RECON 1:							
ORAL CONTRAST:			1 cup of diluted gastrografin every 15 minutes is drank the hour prior to scanning.				RECON 2:				5mm thick / 5 mm interval. Std recon 400ww/30wl.			
PATIENT POSITION SCAN AR	NING A	ND	Patient supine. Feet first. Landmark at mid sternum. Cuts are taken from top of iliac crest to pubis. Same DFOV as previous abdomen CTs.				ADDITIONAL POST None PROCESSING:							
GENERAL EXAM GUIDELINES:			5 x 5 mm axial images. 400 DFOV.				SEND EXAM: Send scout, 5 and cor imag							
TRIGGER OR CONTRAST DELAY: TECHNIQUE GUIDELINES:			65 second delay set 120 kvp. Auto ma on.				ARCHIVE: BILL AS: Usually pelvis with com					contrast		
Scan Type		Start Loc		SCOL End Loc	UT PRC	TOCO kV	L SET	T IN SC	ANNE	R Scout Plane		Voice Light		
Scout		S0.00		I400.00		120)		10		90 and 0 2			
		Diaphragm		Pubis										
				XIAL IN				SET IN						
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 0.6 sec rotation	S0.0 Top of iliac crest	I400.0 Below Iliac crest or Pubis	5 39.37 0.984:1	5	S0.0	Large Body	120	350 11.57~ Auto ma on DR 50%	40.0	5mm Std 400ww 30wl Send to Pacs SS50	0.625m Std 400ww 30wl For recons SS50		On 5mm Cor and Sag avg mprs	

updated 02/01/2018