RIH - NECK/CHEST
GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL

Indications: mass, lymphoma, adenopathy, mets.

Position/Landmark	Head first or feet first-Supine Sternal Notch
Topogram Direction	Craniocaudal
Respiratory Phase	Inspiration
Scan Type	Helical
KV / mA / Rotation time (sec) **Pitch / Speed (mm/rotation)** **Noise Index / ASiR / Dose Reduction**	120kv / smart mA (120-450) / 0.5 sec 1.375:1 , 27.50mm 12 and 13.5 / 30 / 30%
Detector width x Rows = Beam Collimation	1.25mm x 16 = 20mm
Average Tube Output	Neck: ctdi – 11.5 mGy dlp – 458 mGy.cm Chest: ctdi – 10.0 mGy dlp – 357 mGy.cm
First Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination 1 **neck** 2.5mm x 2.5mm standard pacs 2 thin neck 1.2mm x .6mm standard for dmpr
Second Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination 1 **chest** 5mm x 5mm standard pacs 2 thin chest 1.25mm x .6mm standard for dmpr 3 **lung** 5mm x 5mm lung pacs
Scan Start / End Locations **DFOV**	neck: external auditory meatus – aortic arch; chest: 1cm superior to lung apices – through adrenal glands 18cm / 38cm decrease appropriately
IV Contrast Volume / Type / Rate	75cc omni 350 / 2cc per second if needed
Scan Delay	35 seconds
2D/3D Technique Used	DMPR of 3mm x 3mm **coronal neck** series (auto-batch on), average mode, auto-transferred to PACS DMPR of 5mm x 5mm **coronal chest** series (auto-batch on), average mode, auto-transferred to PACS.
Comments: Recon 1 in each helical group is very thin of the neck and chest for direct mpr. The second recons are 2.5mm x 2.5mm neck and 5mm x 5mm chest, standard algorithm, going to PACS. Recon 3 is the 5mm x 5mm lung algorithm going to PACS.	
Images required in PACS	Scouts, 2.5mm x 2.5mm axial neck, 3mm x 3mm coronal neck, 5mm x 5mm axial chest, 5mm x 5mm coronal chest, 5mm x 5mm axial lungs, Dose Report