## RIH – CHEST ANGIOGRAM SIEMENS DEFINITION AS+ PROTOCOL

## Indications: Evaluation of the thoracic aorta

Position/Landmark	Head first or feet first-Supine					
	2cm superior to shoulders					
Topogram Direction		Craniocaudal / Craniocaudal				
Respiratory Phase		Inspiration				
Scan Type		Helical				
Ref kV/Ref mAs/Rotation time (sec) Pitch / Speed (mm/rotation) Safire Strength / Dose Optimization		Care kV 120 / Care Dose4D 150 / 0.5 sec 1:1 , 24.00mm 3 / 7				
Detector width x Rows = Beam		0.625mm x 64 = 40mm				
Collimation		(128  x .6mm)				
Average Tube Output	ctdi – 9 mGy					
Arrende Lube Output		dlp – 350 mGy.cm				
Helical Set						
Slice Thickness/ Spacing	recon	•	spacing	algorithm	recon destination.	
Algorithm	1	chest cta	2mm x 2mm	B30f medium smoot		
Recon Destination	2	lungs	5mm x 5mm	I70f very sharp	pacs	
	3	coronal chest	5mm x 5mm	B30f medium smoot		
	4	thin chest	.75mm x .7mm	B30f medium smoot	1	
Scan Start / End Locations		1 cm superior to lung apices				
		mid kidney				
		interkiency				
DFOV	38cm					
		decrease appropriately				
IV Contrast Volume / Type / Rate		100mL Iohexol (Omnipaque 350) / 4mL per second				
Scan Delay		Dolug Tracking of the continersh				
Scan Delay		Bolus Tracking at the aortic arch				
2D/3D Technique Used		Workstream 4D mpr of 5mm x 5mm <b>coronal chest mip</b> series, auto- transferred to PACS.				
<b>Comments:</b> Recon 4 is a thin helical	volume	of the chest that	is archived to the T	eraRecon server.		
Images required in PACS	Topograms, 2mm x 2mm axial arterial chest, 5mm x 5mm coronal arterial chest, 5mm x 5mm axial lungs, Patient Protocol					