RIH – CHEST SIEMENS DEFINITION AS+ PROTOCOL

Indications - Infection, pulmonary nodule, mass, effusion, empyema.

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)	Care kV 120 / Care Dose4D 150 / 0.5 sec					
Pitch / Speed (mm/rotation)	.6:1, 24.00mm					
Safire Strength / Dose Optimization		3 / non con 4 contrast 6				
Detector width x Rows = Beam	$0.625 \text{mm} \times 64 = 40 \text{mm}$					
Collimation	(128 x .6mm)					
Average Tube Output		ctdi – 9 mGy				
		dlp - 350 mGy.cm				
Helical Set		body	thickness/		recon	
Slice Thickness/ Spacing	recon	part	spacing	algorithm	destination .	
Algorithm	1	chest	5mm x 5mm	I40f medium	pacs	
Recon Destination	2	lungs	5mm x 5mm	I70f very sharp	pacs	
	3	coronal chest	5mm x 5mm	I40f medium	pacs	
	4	thin chest	.75mm x .7mm	I40f medium	terarecon	
Scan Start / End Locations	1cm superior to lung apices					
		through adrenal glands				
PROV						
DFOV		38cm				
	decrease appropriately					
IV Contrast Volume / Type / Rate	75mL Iohexol (Omnipaque 350) / 2mL per second if needed					
Scan Delay	40 seconds					
2D/3D Technique Used	Workstream 4D mpr of 5mm x 5mm coronal chest series, auto-transferred to					
	PACS.					
Comments: Recon 4 is a thin helical	volume	of the chest that is	s archived to the Tera	Recon server.		
Images required in PACS	Topograms, 5mm x 5mm axial chest, 5mm x 5mm coronal chest, 5mm x 5mm					
	axial lungs, Patient Protocol					