RIH - PULMONARY VEIN MAPPING GE LIGHTSPEED VCT PROTOCOL

Application: pre-op work up for cardiac ablation patients with chronic afib or ventricular tachycardia

Position/Landmark		Feet first-Supine				
	Sternal Notch					
Topogram Direction		Craniocaudal				
Respiratory Phase		Suspension				
Scan Type		Helical				
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	120kv / smart mA (100-450) / 0.4 sec 1.375:1 , 55.00mm 22.0 / 70 / 30%					
Detector width x Rows = Beam Collimation		0.625mm x $64 = 40$ mm				
Average Tube Output		ctdi – 10.6 mGy dlp – 298 mGy.cm				
Helical Set		body	thickness/		recon	
Slice Thickness/ Spacing	recon	part	spacing	algorithm	destination .	
Algorithm	1	pv mapping	1.25mm x 1.25mm		pacs	
Recon Destination	2	thin pv mapping	1.25mm x .6mm	standard	for dmpr	
	3	lungs	5mm x 5mm	lung	pacs	
Scan Start / End Locations		mid aortic arch 2cm inferior to heart				
DFOV	25cm					
IV Contrast Volume / Type / Rate		75mL Iohexol (Omnipaque 350) / 3mL per second				
Scan Delay		Smart prep at the aortic root				
2D/3D Technique Used	DMPR of 2.5mm x 2.5mm coronal mip series (auto-batch on), average mode, auto-transferred to PACS.					
Comments: There are two indication tachycardia. This is a ct angiogram		1		econd is vent	ricular	
Images required in PACS	Scouts, 1.25mm x 1.25mm axial arterial pulm vein mapping, 2.5mm x 2.5mm coronal pulmonary vein mapping mips, lung window, Dose Report					