RIH - ELBOW CT GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL

Indication: fracture, dislocation, osteomyelitis, bone injury, bone tumor.

Position/Landmark	Supine, feet first				
	Zero Appropriately				
Topogram Direction	Craniocaudal				
Respiratory Phase	Any				
Scan Type	Helical				
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index	120kv / smart mA (100-440) / .5 sec .938:1, 9.37mm 25.00				
Detector width x Rows = Beam Collimation	0.625mm x 16 = 10mm				
Helical Set		body	thickness/		recon
Slice Thickness/ Spacing	recor	•	spacing	algorithm	destination .
Algorithm	1	thin elbow	.6mm x .6mm	bone	for dmpr
Recon Destination	2	elbow bone	2.5mm x 2.5mm	bone	pacs
	3	elbow soft tissue	2.5mm x 2.5mm	standard	pacs
Scan Start / End Locations	de	termined by technolog	gist or radiologist to	include the ana	atomy of interest
			10		
DFOV	18cm				
IV Contrast Volume / Type / Rate	decrease appropriately 70cc omni 350 / 2cc per second				
1 Contrast Volume / Type / Rate	if needed				
Scan Delay	65 seconds				
Sean Zein,	ob seconds				
2D/3D Technique Used	DMPR of 3mm x 3mm coronal and sagittal elbow series (auto-batch off),				
	average mode, auto-transferred to PACS				
	Also, there is a 3mm x 3mm true axial reformat if needed due to the patient's				
	position.				
Comments: Recon 1 is a single thin helical group of the elbow for direct mpr. Recon 2 is the 2.5mm x 2.5mm elbow,					
bone algorithm ct going to PACS. Recon is the 2.5mm x 2.5mm elbow, standard algorithm ct going to PACS.					
Images required in PACS	Scouts, 2.5mm x 2.5mm axial elbow bone, 2.5mm x 2.5mm axial elbow				
	standard, 3mm x 3mm sagittal elbow, 3mm x 3mm coronal elbow, Dose Report				