RIH - 3D HEAD CT GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL

 ${\bf Application:} \ \ {\bf For} \ \ {\bf reconstructive} \ \ {\bf surgical} \ \ {\bf planning.} \ \ {\bf Commonly} \ \ {\bf done} \ \ {\bf in} \ \ {\bf cases} \ \ {\bf of} \ \ \\ {\bf Craniosynostosis.}$

Position/Landmark	Supine head first or feet first Zero at outer canthus of eye.				
Topogram Direction	Craniocaudal				
Respiratory Phase	Any				
Scan Type	Helical				
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	120kv / smart mA (50-250) / 0.8 sec .562:1, 5.62mm 10.0 / 30 / 30%				
Detector width x Rows = Beam Collimation	0.625mm x 16 = 10mm				
Average Tube Output	ctdi – 46.1 mGy dlp – 742 mGy.cm				
Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon 1 2 3	body part thin brain skull thin head	thickness/ spacing .6mm x .6mm 5mm x 5mm .6mm x .6mm	algorithm standard bone bone	recon destination . for dmpr pacs for 3d/cd
Scan Start / End Locations	1cm inferior to chin 1cm superior to skull vertex				
DFOV	25cm decrease appropriately				
IV Contrast Volume / Type / Rate				•	
Scan Delay					
2D/3D Technique Used	DMPR 5mm x 5mm axial brain reformats in the glabello-meatal plane (autobatch off), average mode, auto transferred to PACS				
Comments: Recon 1 is a thin standa thin bone algorithm for 3d or cd.					pacs. Recon 3 is
Note: Reformats with an angle para	illel to the	e glabella-meata	l line are not needed in	this protocol.	
Images required in PACS	Scouts, 5mm x 5mm axial skull, 5mm x 5mm axial brain, volume rendering of the skull and cranial sutures, Dose Report				