

## RIH – ACUTE STROKE BRAIN GE LIGHTSPEED VCT PROTOCOL

<b>Position/Landmark</b>	Supine head first or feet first Zero at outer canthus of eye.				
<b>Topogram Direction</b>	Craniocaudal				
<b>Respiratory Phase</b>	Any				
<b>Scan Type</b>	Helical				
<b>KV / mA / Rotation time (sec)</b> <b>Pitch / Speed (mm/rotation)</b> <b>Noise Index / ASiR / Dose Reduction</b>	120kv / smart mA (50-210) / 0.7 sec 0.531:1 , 10.62mm 7.0 / 30 / 30%				
<b>Detector width x Rows = Beam Collimation</b>	0.625mm x 32 = 20mm				
<b>Average Tube Output</b>	ctdi – 35.0 mGy dlp – 600 mGy.cm				
<b>Helical Set</b> Slice Thickness/ Spacing Algorithm Recon Destination	<u>recon</u>	<u>body part</u>	<u>thickness/ spacing</u>	<u>algorithm</u>	<u>recon destination .</u>
	1	non angled head	5mm x 5mm	standard	pac
	2	thin brain	.6mm x .6mm	standard	for dmpr/terarecon
<b>Scan Start / End Locations</b>	1cm inferior to skull base 1cm superior to skull vertex				
<b>DFOV</b>	25cm decrease appropriately				
<b>2D/3D Technique Used</b>	5mm x 5mm axial and coronal brain reformats in respect to the glabello-meatal plane (auto-batch off), average mode, auto transferred to PACS				
<b>Comments:</b> Recon 1 is a 5mm x 5mm head that is immediately sent to pac. Recon 2 is thin helical set of the brain for reformats in the desired plane.					
<b>Images required in PACS</b>	Scouts, 5mm x 5mm non angled head, 5mm x 5mm axial brain, 5mm x 5mm coronal brain, Dose Report				