## RIH – TOTAL BODY ANGIO / SOLID ORGAN INJURY FOR TRAUMA SIEMENS DEFINITION AS20 PROTOCOL

Position/Landmark	Head first or feet first-Supine			
Tanagaan Dinagtian	1cm superior to skull vertex			
Topogram Direction	Craniocaudal / Craniocaudal			
Scan Type	Helical			
Ref kV/Ref mAs/Rotation time (sec)	5sec Care kV 120 / Care Dose4D 210 / 0.5sec			
Pitch / Speed (mm/rotation) Safire Strength / Dose Optimization	1.2:1 , 15.00mm			
	3/6			
Detector width x Rows = Beam Collimation	$0.625 \text{mm} \times 20 = 12.5 \text{mm}$			
Average Tube Output	11.0mGy			
	dlp – 1456 mGy.cm			
Helical Set	body thickness/ recon			
Slice Thickness/ Spacing	recon part	spacing	algorithm	destination .
Algorithm	1 total body ct angio	2mm x 2mm	B30s medium	pacs
Recon Destination	2 axial chest abd pelvis	5mm x 5mm	I40f medium	pacs
	3 axial t and l spine	3mm x 3mm	I70f very sharp	pacs
	4 lungs	5mm x 5mm	I70f very sharp	pacs
	5 coronal chest abd pelvis	5mm x 5mm	I40f medium	pacs
	6 thin body ct angio .	75mm x .7mm	B30s medium	mpr
	7 thin t and 1 spine .	75mm x .7mm	I70f very sharp	mpr
S St 4/E II 4				
Scan Start / End Locations	1cm superior to skull			
DFOV	through the toes			
	38cm decrease appropriately			
IV Contrast Volume / Type / Rate	Hand inject 30mL Iohexol (Omnipaque 350) then wait 5 minutes 80mL Iohexol (Omnipaque 350) / 3mL per second			
	15mL saline / 3mL per second			
	start monitoring scans at this point			
	100mL Iohexol (Omnipaque 350) / 4mL per second			
	40mL saline / 4mL per second			
Scan Delay	bolus tracking at aortic arch, the trigger is +150 HU			
2D/3D Technique Used	2mm x 2mm left sagittal/oblique carotid, 2mm x 2mm right sagittal/oblique			
25/55 Teemique escu	carotid, 2mm x 2mm coronal carotids, 2mm x 2mm axial small fov carotids,			
	5mm x 5mm coronal chest abdomen pelvis, 3mm x 3mm coronal lower			
	extremities. Recon 7 is a thin bone volume incase spines are ordered.			
Comments: 80cc of contrast is pre injected to be able to evaluate for solid organ injury. The second 100cc is injected				
immediately after the first injection is completed to perform a smart prepped total body ct angiogram.				
1. Hand inject 30mL Iohexol (Omnipaque 350)				
2. Perform scout images				
3. Plan all three recons				
4. Perform pre-monitoring scan at the aortic arch, Place the ROI in the arch				
5. Inject the 80mL Iohexol (Omnipaque 350) pre-scan contrast				
As soon as the power injector hold begins, inject the CTA contrast and begin the monitoring phase ct angiogram.				
Images required in PACS	Topograms, 2mm x 2mm axial cta chest to toes, 2mm x 2mm axial carotid			
	cta, 2mm x 2mm left sagittal/oblique carotid, 2mm x 2mm right			
	sagittal/oblique carotid, 2mm x 2mm coronal carotids, 5mm x 5mm coronal			
	chest abdomen pelvis, 5mm x 5mm axial lungs, 3mm x 3mm axial coronal			
	and sagittal cervical, thoracic and lumbar spines, 3mm x 3mm coronal lower			
	extremity cta, Patient Protocol			