RIH – TOTAL BODY ANGIO / SOLID ORGAN INJURY FOR TRAUMA SIEMENS DEFINITION AS+ PROTOCOL

Position/Landmark	Head first or feet first-S	upine 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)	1:1,40.00mm		
Safire Strength / Dose Optimization	3 / 6		
Detector width x Rows = Beam	0.625mm x $64 = 40$ mm		
Collimation	(128 x .6mm)		
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 21	mm x 2mm B30s medium pacs	
Recon Destination	2 axial chest abd pelvis 5	mm x 5mm I40f medium pacs	
	3 axial t and l spine 3	mm x 3mm I70f very sharp pacs	
	4 lungs 5	mm x 5mm I70f very sharp pacs	
	5 coronal chest abd pelvis 5	mm x 5mm I40f medium pacs	
	6 thin body ct angio .75r	nm x .7mm B30s medium mpr	
	7 thin t and l spine .75n	nm x .7mm I70f very sharp mpr	
Scan Start / End Locations	1cm superior to skull		
	through the toes		
DEON	38cm		
DFOV	decre	ase 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 Ionexol (Omnipaque 350) / 4mL per second		
George Delege	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	
	carotid, 2mm x 2mm coronal caro	otids, 2mm x 2mm axial small fov carotids,	
	5mm x 5mm coronal chest abdon	nen pelvis, 3mm x 3mm coronal lower	
	extremities. Recon 7 is a thin bon	e 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 Tohexol (Omnipaque 350)			
2. Perform scout images			
5. Fian an unree recons 4. Perform are monitoring soon at the portio areb. Place the POL in the areb			
4. renorm pre-momentum scan at the aortic arch, Place the KOI in the arch			
5. Inject the 80mL lohexol (Omnipaque 350) pre-scan contrast			

As soon as the power injector hold begins, inject the CTA contrast and begin the monitoring phase ct angiogram.

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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