CT Abdomen and/or Abdomen/Pelvis Bariatric Leak

Maximum CTDI __35__

Indication: Evaluation of immediate post op leak or within the first 30 days' post op

- Note: If patient is an inpatient an NG tube may be needed for oral contrast administration
- PT Prep: Oral contrast 2-3 cc Omni 240 with 30cc of water immediately before patient gets on the table.

IV contrast – Yes (follow MCR IV contrast dosing guidelines)

- Series 1: Scouts AP & LAT Supine "O" at Xiphoid Process S20 to I550
- Series 2: Scan from above the diaphragm to iliac crest (abdomen only) or to pubic symphysis (if pelvis ordered.) Inject IV contrast per MCR contrast dosing guidelines @ 2-3cc/sec.

Technique: **Delay: 70 seconds**

	750 HD (128)	Optima 660	Optima 660	VCT 64
	CT2	OVIC	CT1	СТЗ
Noise Level	18.23	14.64	11.60	11.60
Interval	5mm	5mm	5mm	5mm
Axial/Helical Thickness	5mm	5mm	5mm	5mm
Pitch	0.984:1	1.375:1	0.984:1	0.984:1
Speed mm/rotation	39.37	55	39.37	39.37
Detector Rows				
Detector Configuration				
Beam Collimation	40mm	40mm	40mm	40mm
KV/mA	Auto mA — if large pt. use manual & maximize mA	Auto mA — if large pt. use manual & maximize mA	Auto mA — if large pt. use manual & maximize mA	Auto mA — if large pt. use manual & maximize mA
Scan Type	Helical Full 0.8 sec	Helical Full 0.7 sec	Helical Full 0.7 sec	Helical Full 0.7 sec

Networking/ PACs: Send scouts Send series 2 Standard Soft Tissue Algorithm Recon and send lung images in Lung Algorithm Recon and send bone images with Bone Algorithm Recon and send MPR images in Standard Algorithm Record DLP in PACS comments

Original Date: 4-8-04

Approved by: Dr. Songmen, MCR_

Revised Date: 11/9/04, 1/11/10, 12/8/10, 04/17/13, 12/15/15, 02/28/18, 07/27/21, 1/30/24 Page 1 of 1

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