

CT Abdominal Aorta (Abd/Pelvis)

Pre Stent or Pre Stent MMS Protocol

Maximum CTDI 60

GE- 6002-2

Indication: To evaluate size of aneurysm status prior endograph stent placement.
Check aneurysm for leakage & size

PT Prep: NO Oral
IV contrast – Yes (follow IV contrast administration guidelines)
20g to 18 g peripheral IV needed for contrast administration

Series 1: Scouts AP & LAT – Supine “O” at Xiphoid Process S20 to I550

Series 2: Enhanced Arterial Phase – 100cc of IV contrast @ 4cc/sec
(Contrast dose may be adjusted based on CrCl).
Scan from the celiac axis to the symphysis pubis with a bolus injection of 4cc per second.
Smart Prep cursor on the aorta at the level of the celiac axis. Instruct patient to hold their breath.
Do entire scan in one acquisition.

Technique:

	128 slice	32 slice w/ASIR	64 slice	64 slice w/ASIR 30%
Noise Level	15.86	15.86	11.60	11.60
Interval	2.5 mm	2.5 mm	2.5 mm	2.5 mm
Axial/Helical Thickness	2.5 mm	2.5 mm	2.5 mm	2.5 mm
Pitch	0.984:1	1.375:1	0.984:1	0.984:1
Speed mm/rotation	39.37	27.50	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 0.5 sec	Helical Full 0.7 sec	Helical Full 0.5 sec	Helical Full 0.5 sec

Networking/ PACs: Send scouts
Send series 2 Standard Soft Tissue Algorithm
Send recon (thinnest images) series 3 to 3D workstation and M2S (MMS) if order states
Recon and send series 2 lung images in Lung Algorithm 5 x 5
Recon and send series 2 bone images with Bone Algorithm 5 x 5
Recon and send MPR in Standard Algorithm
Recon and send MIPS of series 3
Record DLP in PACS comments

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Approved by: Dr. Rehfuss , MCR

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