CT Chest- Pulmonary Nodule   GE- 5002
Maximum CTDI 25

Indication: Pulmonary Nodule evaluation- no history of cancer

Note: If no baseline CT Chest done give IV contrast per Radiologist.
                Follow IV contrast administration Guidelines for CrCl if needed.

PT Prep: No oral contrast
                No IV contrast (unless baseline study or as directed by Radiologist)

Series 1:   Scouts AP & LAT – Supine "O" at Sternal Notch S20 to I350

Series 2:   Scan from lung apices to L2.
                Helical scan superior to inferior, apex of lungs to L2 in a **Lung** algorithm

Technique:

	128 slice	**32 slice w/ASIR**	**64 slice**	**64 slice w/ASIR 50%**
Noise Level	16.10	14.00	14.00	14.00
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
Pitch	1.375:1	1.375:1	1.375:1	1.375:1
Speed mm/rotation	55.00	55	55	55
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 0.7 sec	Helical Full 0.7 sec	Helical Full 0.7 sec	Helical Full 0.7

Networking/ PACs: Send scouts
                    Send series 2 Lung algorithm 2.5mm /1.25mm
                    Recon and send axial images in Soft Tissue algorithm 5mm
                    Recon and send axial images in Bone algorithm 5mm
                    Recon and send MPR images and thin axial images in Lung algorithm
                    Recon and send axial MIPS
                    Record DLP in PACS comments

Original Date: 4-8-04   Approved by: Dr. Rehfuss , MCR
Revised Date: 11-9-04, 1-11-10, 9-16-10   12/8/10   04/17/13 12/15/2015 02/22/18   Page 1 of 2

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