CT Enterography Maximum CTDI 100

- Indication: Inflammatory Bowel Disease, Neoplasm, Small Bowel Tumors, general abdominal pain, diarrhea.
 Note: This exam is to be scanned on a 16 slice or greater scanner. Need to use three 450ml bottles of Breeza as oral contrast.
 PT Prep: IV contrast Yes (follow MCR contrast dosing guidelines)
 Timing for Breeza: 50 minutes prior to scan time. Patient will drink 1st 450cc bottle, 20 minutes later drink 2nd 450cc bottle, 20 minutes later drink half of 3rd bottle (225cc) 10 minutes after that give the last 225cc Put patient on the table.
- Series 1: Scouts AP & LAT Supine "O" at Xiphoid Process S20 to I500
- Series 2: Arterial Phase IV contrast per MCR contrast dosing guidelines @ 4cc/sec

	Optima 660 CT1	750 HD 128 CT2	VCT 64 CT3	Optima 660 OVIC
Noise Level	11.60	18.23	11.60	13.31
Interval	5mm	5mm	5mm	5mm
Axial/Helical Thickness	5mm	5mm	5mm	5mm
Pitch	0.984:1	0.984:1	0.984:1	0.984:1
Speed mm/rotation	39.37	39.37	39.37	55
Detector Rows				
Detector Configuration				
Beam Collimation	40mm	40 mm	40 mm	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 0.8 sec	Helical Full 0.8 sec	Helical Full 0.8 sec

Delay: 50 seconds – Scan from lung bases to symphysis pubis

Networking/ PACs: Send scouts Recon series 2 and send Standard Soft Tissue Algorithm 2.5mm Recon and send series 2 in Lung Algorithm 5mm Recon and send series 2 in Bone Algorithm 5mm Recon and send MPR

Original Date: 4-8-04 Approved by: Dr. Songmen, MCR Revised Date: 11/9/04, 1/11/10, 9/16/10, 12/8/10, 04/17/13, 12/15/2015, 2/28/18, 10/07/19, 1/30/24 Page 1 of 3

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Record DLP in PACS comments

GE MDCT