CT Esophogram

Maximum CTDI 30

Indication: Esophageal mass, or suspected perforation

Note: Need to discuss with Radiologist prior to using this protocol. Pt will drink 1-2 cups.

PT Prep: Mass: Water only
Perforation: 30cc Gastriview to 1 liter of water
IV contrast: Yes (Follow MCR IV contrast administration guidelines).
20g-10g PIV, 80cc IV contrast, 3cc/sec

Series 1: Scouts AP& Lat-Supine "0" at sternal notch S20-I350
Series 2: Scan from lung apices to L2
Scan dry study first to evaluate for sutures, staple vs leak.
Delay of 30 seconds for IV contrast.
Patient is to start drinking after scout and continues until
scan is over. They will drink continuously from cup/straw placed at their head.

Reconstruction:

Technique: Dry scan

	750 HD 128 (CT2)	**Optima 660 (CT1)**	**VCT 64 (CT3)**	**Optima 660 (OVIC)**
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	0.984:1	0.935:1
Speed mm/rotation	55.0	55.0	39.37	18.75
Detector Rows	64	32	64	64
Detector Configuration				
Beam Collimation	40mm	40mm	40mm	40mm
Kv/mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA
Scan Type	Helical full 0.7	Helical full 1.0	Helical full 1.0	Helical full 1.0

Original Date: 3/11/24 Approved by : Dr. Songmen. MCR
Revised Date:

CT Esophogram

Maximum CTDI 30

Technique: Contrasted study. 30 second delay

	750 HD 128 (CT2)	Optima 660 (CT1)	VCT 64 (CT3)	Optima 660 (OVIC)
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	0.984:1	0.935:1
Speed mm/rotation	55.0	55.0	39.37	18.75
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Kv/mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA	Auto mA-If large pt use manual and maximize mA
Scan Type	Helical full 0.7	Helical full 1.0	Helical full 1.0	Helical full 1.0

Networking/ PACs: Send scouts
Send series 2 Standard Soft Tissue Algorithm
Recon and send all series in Lung and Bone algorithm
Send MPRs and thins in Lung algorithm to PACS.

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