

CT PARANASAL SINUS

GE- 2004

Maximum CTDI 50

Note: If order states **Direct** coronals and patient can tolerate laying prone with neck extended please scan as ordered, otherwise scan the patient supine and do coronal reformations per Dr. Donnal.

PT Prep: Remove all metal objects from head to eliminate artifacts.
Remove all partial plates or other removable dental work

Series 1: **Scout AP and LAT-supine (head first) "0" at OM S 100 to I 90**

Series 2: **Helical scan** of the sinuses from the hard palate to the frontal sinus.

Acquisition #1 Display scout and prescribe slices from the hard palate to the supra-orbital rim. Raise the chin slightly so facial structures are parallel to the beam of the scan. No angle is necessary.

Reconstruction: Standard and Bone Plus DFOV 16

Technique:

	128 slice	32 slice w/ASIR	64 slice	64 slice w/ASIR 30%
Noise Level	7.98	12.00	12.00	12.00
Interval	1.25mm	1.25mm	1.25mm	1.25mm
Axial/Helical Thickness	1.25mm	1.25mm	1.25mm	1.25mm
Pitch	0.531:1	0.531:1	0.531:1	0.531:1
Speed mm/rotation	10.62	10.62	10.62	10.62
Detector Rows				
Detector Configuration				
Beam Collimation	20mm	20mm	20mm	20mm
Kv/mA	120KV/240mA	120KV/250mA	120KV/250mA	120KV/250mA
Scan Type	Helical 0.5 sec	Helical 0.5 sec	Helical 0.5sec	Helical 0.5 sec

Post Processing: Reformat bone images in a coronal and sagittal plane.

Networking/ PACs: Send scouts
Send series 2, Standard and Bone Algorithm
Send Coronal and Sagittal Reformats in Bone Algorithm

Original Date: 4-8-04

Approved by: Dr. J. CampbellMCR

Revised Date: 11-9-04, 1-11-10, 9-16-10, 10-11-10 12/8/10 1/28/13 12/15/15, 08/18/20