

CTV Abdomen/Pelvis

GE- 6001-1

Maximum CTDI 35

Indication: Vein issue, IVC or vein clot.

Note: Appendicitis and Diverticulitis ALWAYS include the Pelvis – if not included in order contact ordering MD to obtain order for pelvis.

PT Prep: No oral contrast
IV contrast – Yes (follow IV contrast administration guidelines)
22g to 18 g peripheral IV needed for contrast administration

Series 1: Scouts AP & LAT – Supine “O” at Xiphoid Process S20 to I500

Series 2: Scan from above diaphragm to bottom of symphysis pubis.
Inject 100cc of IV contrast @ 2-3cc/sec. (Contrast dose may be adjusted based on CrCl)Technique: **Delay: 180 seconds**

	32 slice w/ASIR	64 slice w/ASIR	64 slice	128 slice w/ASIR
Noise Level	13.31	14.64	11.60	18.23
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
Pitch	1.375:1	0.984:1	0.984:1	0.984:1
Speed mm/rotation	55	39.37	39.37	39.37
Detector Rows	32	64	64	64
Detector Configuration				
Beam Collimation	40mm	40mm	40mm	40mm
Kv/mA	120KV/440mA	120KV/440mA	120KV/440mA	120KV/650mA
Scan Type	Helical Full 0.7 sec	Helical Full 0.8 sec	Helical Full 0.8 sec	Helical Full 0.8 sec

Networking/ PACs: Send scouts
Send series 2 Standard Soft Tissue Algorithm 2.5mm
Recon and send Lung images in Lung Algorithm 2.5mm
Recon and send Bone images with Bone Algorithm
Recon and send MPR images in Standard Algorithm
Record DLP in PACS comments

Original Date: 4-8-04

Approved by: Dr. Rehfuss , MCR

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