

RIH – CT FOR HEMATURIA GE LIGHTSPEED VCT PROTOCOL

Indications: Non contrast and dual meduallary and delayed phase study for patients with hematuria.

Position/Landmark	Head first or feet first-Supine Xyphoid																							
Topogram Direction	Craniocaudal																							
Respiratory Phase	Inspiration																							
Scan Type	Helical																							
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	120kv / smart mA (120-450) / 0.5 sec .984:1 , 39.37mm 13 nc and 11.5 contrast / 70 / 30%																							
Detector width x Rows = Beam Collimation	0.625mm x 64 = 40mm																							
Average Tube Output	Each Helical: ctdi – 11.3 mGy dlp – 616 mGy.cm																							
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Scan Start / End Locations	1 cm superior to diaphragm lesser trochanters 38cm																							
DFOV	decrease appropriately																							
IV Contrast Volume / Type / Rate	after the non-contrast series 30mL Iohexol (Omnipaque 350) followed by 120mL saline / 2mL per second then 10 minute delay, followed by 100mL Iohexol (Omnipaque 350) / 3mL per second																							
Scan Delay	Non-Contrast Contrast ---- 140 seconds																							
2D/3D Technique Used	DMPR of 5mm x 5mm coronal abd/pelvis (auto-batch on), average mode, 10mm x 3mm oblique mips of each ureter (auto-batch off) auto-transferred to PACS.																							
Comments: This is an adult patient protocol only. This protocol consists of a non-contrast renal stone series from the kidneys to the bladder and then a dual contrast phase from the kidneys to the bladder. After the non-contrast series, 30mL of contrast and 120mL of saline are injected. After a 10 minute wait, 100mL of contrast is injected and the patient is scanned with a 140 second scan delay.																								
Images required in PACS	Scouts, 5mm x 5mm axial nc abd/pelvis, 5mm x 5mm coronal non contrast abd/pelvis, 5mm x 5mm axial contrast kub, 5mm x 5mm coronal contrast abd/pelvis, 10mm x 3mm mip oblique reformat of each ureter, Dose Report																							