

**RIH – CHEST ABDOMEN PELVIS
SIEMENS DEFINITION AS20 PROTOCOL**

Indications - mass, metastases, lymphoma, abscess, general screening.

Position/Landmark	Head first or feet first-Supine 1cm superior to skull vertex			
Topogram Direction	Craniocaudal / Craniocaudal			
Respiratory Phase	Inspiration			
Scan Type	Helical			
Ref kV/Ref mAs/Rotation time (sec) Pitch / Speed (mm/rotation) Safire Strength / Dose Optimization	Care kV 120 / Care Dose4D 150 / 0.5 sec .6:1 , 12.00mm 3 / non con 4 contrast 6			
Detector width x Rows = Beam Collimation	1.25mm x 16 = 20mm			
Average Tube Output	ctdi – 11.0mGy dlp – 836 mGy.cm			
Second Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon	body part	thickness/ spacing	recon destination
	1	axial chest	5mm x 5mm	I40f medium planning
	2	axial abd pelvis	5mm x 5mm	I40f medium planning
	3	axial chest abd pelvis	5mm x 5mm	I40f medium pacs
	4	coronal chest abd pelvis	5mm x 5mm	I40f medium pacs
	5	thin chest abd pelvis	1.5mm x 1mm	I40f medium terarecon
	6	lungs	5mm x 5mm	I70f very sharp pacs
Scan Start / End Locations DFOV	1cm superior to lung apices lesser trochanters 38cm decrease appropriately			
IV Contrast Volume / Type / Rate	30mL Iohexol (Omnipaque 300) followed by 40mL of saline prior to scouts then 5 minute delay then 100mL Iohexol (Omnipaque 300) , 3mL/sec When oral contrast is prescribed, refer to the appropriate oral contrast agent's preparation and procedure guide.			
Scan Delay	50 seconds			
2D/3D Technique Used	Workstream 4D mpr of 5mm x 5mm coronal chest abd pelvis series, auto-transferred to PACS.			
Comments: Recons 1 and 2 of the chest abdomen pelvis are for planning only. This is needed to apply X-Care to only the chest; while keeping the chest abdomen and pelvis in a single volume. Recon 5 is a thin helical volume of the chest abd pelvis that is archived to the TeraRecon server.				
Images required in PACS	Topograms, 5mm x 5mm axial chest abd pelvis, 5mm x 5mm coronal chest abd pelvis, 5mm x 5mm axial lungs, Patient Protocol			