

Knee 16 Emotion

Indications	Pain, swelling, trauma					
Diagnostic Task	Detects fractures, hematomas, arthritis, bone cyst					
Scan mode	Helical					
Position/Landmark	Head or feet first-supine-include joint of interest only					
Topogram	AP 25mA 110kV Lat 25mA 130kV					
kVp/Reference mass	130kv 140mas					
Rotation time/pitch	1.0/0.75					
Detector Configuration	4x0.6					
Table Speed/Increment	1.8					
Dose reduction	Care Dose on					
Allowed CTDI ranges*	7mGy-50mGy					
XR29 Dose Notification value	50mGy					
Helical Set	recon	body part	thickness spacing	kernel	window	recon destination
Slice thickness/spacing	1	thin knee bone	1mmx.7mm	90very sharp	osteo	mpr/pacs
	2	thin knee soft	1mmx.7mm	30smooth	mediastinum	for 3d
	3	knee soft tissue	2mmx 2mm	30smooth	mediastinum	pacs
	4	coronal bone	2mmx 2mm	90very sharp	osteo	pacs
	5	sag bone	2mmx 2mm	90very sharp	osteo	pacs
	6	coronal soft tissue	2mmx 2mm	30smooth	mediastinum	pacs
	7	sag soft tissue	2mmx 2mm	30smooth	mediastinum	pacs
Scan Start/end location	3cm superior to knee joint include patella 3cm inferior to knee joint include all of fx and hardware					
DFOV	25 cm decrease appropriately					
3D Technique Used	do 3d spin with recon 2-if fracture seen					
IV contrast volume/type	100ml -isovue 370- if needed for soft tissue infection or mass					
Scan delay	90seconds-Performed as directed by a the supervising radiologist					
	note: If hardware present use extended ct scale and increase kv to 140					

Slide patient over so the knee being imaged is centered in the scanner. Taping feet together helps stabilize knees.



Coronal and sagittal reformats are oriented using an axial image at the level of the femoral condyles.

