

Knee 16 GE

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 S125-I125						
Topogram	AP 120kV 10mA Lat 120kV 30mA						
kVp/Reference mass	120kv 200mA						
Rotation time/pitch	1.0/0.938:1						
Detector Configuration	16x0.625						
Table Speed/Increment	9.37						
Dose reduction	Noise Index na						
Allowed CTDI ranges*	7mGy-50mGy						
XR29 Dose Notification value	50mGy						
Helical Set		recon	body part	thickness spacing	kernel	window	recon destination
	1	knee	bone	.625mmx .625mm	bone		pacs
	2	soft tissue	thin	.625mmx.625mm	standard		mpr 3d
	3	knee	soft tissue	2.5mmx 2.5mm	standard		pacs
	4	sag	bone	2mmx2mm	bone		pacs
	5	coronal	bone	2mmx2mm	bone		pacs
	6	sag	soft tissue	2mmx2mm	standard		pacs
	7	coronal	soft tissue	2mmx2mm	standard		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						

Slide patient over so the 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.

