

Knee 16 Sensation

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	Lat 140kV 50mA AP 50 mA 140 kV					
kVp/Reference mass	140kv 140mas					
Rotation time/pitch	0.75/0.75					
Detector Configuration	16x0.75					
Table Speed/Increment	9					
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
	1	thin knee	.75mmx.5mm	80ultra sharp	oste	mpr/pacs
	2	knee soft tissue	2mmx 2mm	30smooth	mediastinum	pacs
	3	thin soft	.75mmx.5mm	30smooth	mediastinum	for 3d
	2x2 coronal and sag reformats from recon 1 bone 2x2 coronal and sag reformats from recon 3 soft tissue					
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					
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					
3D Technique Used	do 3d spin with recon 3-if fracture seen					
	note: If hardware present use extended ct scale and increase kv to 140					

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.