ROUTINE BRAIN 16 Sensation Lilly

Indications	Intracrainial bleed, mental status change, trauma, general screening, ha							
Diagnositc Task	Detect collections of blood; identify brain masses; detect brain edema or ischemia; identify shift in the normal locations of the brain							
Scan Mode	Helical							
Position/Landmark	Head or feet first-supine/ at chin							
Topogram	lateral 50mAs 120kVp							
kVp/Reference mass	120kv 320mas							
Rotation time/pitch	1sec/0.6							
Detector Configuration	16x0.75							
Table Speed/Increment	7.2							
Dose reduction	na							
Allowed CTDI ranges*	30mGy-80mGy							
XR29 Dose Notification value	80mGy							
Helical Set			body	thickness			recon	
	rec	con	part	spacing	kernel	window	destination	
	1	brain		1mmx 1mm	31medium smooth	cerebrum	pacs	
	2	skull		1mmx1mm	H60 sharp	neuro bone	pacs	
	3	axial bra	ain	5mmx 5mm	31medium smooth	cerebrum	pacs	
	4	thin brai	n	0.75mmx.5mm	31medium smooth	cerebrum	mpr	
Scan Start/End	1cm below maxilla in include sinus							
	1cm above skull vertex							
DFOV	25 cm decrease appropriately							
IV contrast volume/rate	80ml isovue 370 2cc/sec-Performed as directed by the supervising radiologist							
Scan Delay	90 second delay							
3D technique used	1x1 sag and coronal brain from recon 4							
note*		The Diagnositc Reference Dose (CTDI vol) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state)						
	is 80mGy. Most routine head scans on modern scanners have CTDIvol ranges between 40 and 60mGy.							
	*The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum CTDIvol should match the dose notification value. Exams with CTDI vol values less than the minimum allowed range should not be performed unless							
	approved by a radiologist.							