SHOULDER 16 Sensation

Indications	Pain, swelling, fall, mva, trauma					
Diagnostic Task	Detect fractures, dislocations, arthritis					
Scan mode	Helical					
Position/Landmark	Head or feet first-Supine -1CM superior to shoulder-Craniocaudal					
Topogram			100mA	AP 140kV	100 mA	
kVp/Reference mass	120kv 200mas					
Rotation time/pitch	1.0/1.0					
Detector Configuration	16x0.75					
Table Speed/Increment	12					
Dose reduction	CareDose 4D					
Allowed CTDI ranges*	7mGy-50mGy					
XR29 Dose Notification value	4					
Helical Set	body					recon
	recon part	spacing	kern		indow	destination
	1 thin shoulder			•		mpr/pacs
	2 shoulder	2mmx 2mm	-	edium smooth		pacs
	3 shoulder	.75mmx.5m		edium smooth	mediastinum	mpr
Scan Start/end location	1cm superior to AC joint					
5501/	1cm inferior to scapula					
DFOV	25 cm					
2D Taabaigua Uaad	decrease appropriately					
3D Technique Used	2x2 coronal and sag reformats from recon 1 bone 2x2coronal and sag reformats from recon 3 soft tissue					
	do 3d spin with recon 3-if obvious fracture					
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					
	Affect arm down by side with palm up					
	Contralateral arm above head					
X 1	If there is a shoulder prosthesis, scan to include the distal end of the humeral					
	component.	•				
H	Use an axial image at mid glenoid level to reformat sag and coronal reformats 2mmx2mm					
	Use coronal image	at the mid glen	oid level to	reformat sag in	nage 2mmx2m	m

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