

Knee 64 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 0 at joint S150-I150					
Topogram	AP 120kV 10mA Lat 120kV 10mA					
kVp/Reference mass	120kv Auto mA (100-700)					
Rotation time/pitch	0.5/0.531:1					
Detector Configuration	64x0.625					
Table Speed/Increment	10.62					
Dose reduction	Noise Index 22.10					
Allowed CTDI ranges*	7mGy-50mGy					
XR29 Dose Notification value	50mGy					
Helical Set		body	thickness			recon
	recon	part	spacing	kernel	window	destination
	1	knee bone	.625mmx .625mm	bone		pac
	2	soft tissue	.625mmx.625mm	standard		mpr 3d
	3	soft tissue knee	2.5mmx 2.5mm	standard		pac
	4	sag bone	2mmx2mm	bone		pac
	5	coronal bone	2mmx2mm	bone		pac
	6	sag soft tissue	2mmx2mm	standard		pac
7	coronal soft tissue	2mmx2mm	standard		pac	
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- 20 images rotate externally-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.

