

# ROUTINE NECK 64 Toshiba

Indications	Sore throat, neck mass, difficulty swallowing, hoarseness				
Diagnostic Task	Detect lymphoma, cancer, neck abscess, lymphoma, vocal cord paralysis				
Scan Mode	Helical				
Position/Landmark	Head or feet first-Supine				
Topogram	AP mA50 kV120 /Lat mA 70 kV120				
kVp/Reference mass	120kV average pt 135kV XL pt- Sure Exp 3D(120-500)				
Rotation time/pitch	0.5\0.828				
Detector Configuration	64x0.5				
Table Speed/Increment	26.5				
Dose reduction	Sure Exp 3D				
Allowed CTDI ranges*	30mGy-80mGy				
XR29 Dose Notification value	80mGy				
PRE INJECT	<b>40ml at 1.5cc/sec wait 50sec</b>				
Helical Set	recon	body part	thickness spacing	algorithm	recon destination
60ML at 2.5cc/sec					
30second delay	1	neck	2mmx 2mm	standard	pacS
	2	coronal neck	2mmx2mm	standard	pacS
	3	sag neck	2mmx2mm	standard	pacS
Axial Set(optional)	recon	body part	thickness spacing	algorithm	recon destination
	1	neck	2mmx 2mm	standard	pacS
	<b>only do if patient has dental hardware that causes artifact-angle away from teeth</b>				
Scan Start/end location	ROUTINE		/ VOICE CHANGE/ VOCAL CORD PARALYSIS		
	top of orbital roof		/ top of orbital roof		
	sternoclavicular junction		/ down to the carina		
DFOV	20cm-include area of interest do not clip nose				
IV contrast volume/type	40ml at 1.5cc/sec wait 55sec				
Scan delay	60ml at 2.5ml/sec at a 30sec delay				
	note: Please place a BB on any palpable mass				
Note:	The Diagnostic 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.				