

CTA Chest 64 Toshiba

Indications	trauma, acute aortic syndrome, suspected aneurysm/dissection		
Diagnostic Task	Detect aneurysms, aortic dissections and		
Scan mode	Helical		
Position/Landmark	Head or feet first-Supine 1cm superior to shoulder		
Topogram	AP mA50 kV120 /Lat mA 70 kV120		
kVp/Reference mass	135kv Sure Exp 3D(80-550)		
Rotation time/pitch	0.5\0.828		
Detector Configuration	64x0.5		
Table Speed/Increment	26.5		
Dose reduction	Sure Exp 3D		
Allowed CTDI ranges*	7mGy-50mGy		
XR29 Dose Notification value	50mGy		
Helical Set #1 non contrast	body	thickness	recon
	recon	part	spacing
	algorithm	destination	
	1 chest	2mmx 2mm	standard
	if patient under 40 ask about non contrast images		
Helical Set #2	body	thickness	recon
	recon	part	spacing
	algorithm	destination	
	1 chest	2mmx 2mm	standard
	2 lung	1mmx1mm	lung
	3 sag chest	2mmx2mm	standard
	4 coronal chest	2mmx2mm	standard
	5 axial mip lung	10mmx2mm	lung sharp 2
	6 MIP coronal aorta	5mmx2mm	standard
7 MIP sag aorta	5mmx2mm	standard	
When super D or stereo chest	8 Super D*	1mmx0.8mm	standard
Helical Set #3 60sec	body	thickness	recon
	recon	part	spacing
	algorithm	destination	
	1 chest	2mmx 2mm	standard
	If stent/graft, s/p TEVAR, venous evaluation		
Scan Start/end location	2cm superior to lung apices		
	Diaphragm		
DFOV	40cm		
IV contrast volume/type	80ml <175lbs 100ml 175-350lbs 120ml >350lbs Isovue 370, 40ml ns		
	Performed as directed by the supervising radiologist		
Scan delay	Surestart		
	bolus tracking in the descending aorta(level just inferior to carina)		
	Comments: Being able to locate the descending aorta is important. The monitoring phase will not trigger properly and the scan will not start correctly if the roi is not placed on the correct anatomy.		
	Approximate values for CTDIvol		
Patient size	weight(kg)	weight(lbs)	CTDIvol(mGy)
SMALL	50-70	110-155	4-10
AVERAGE	70-90	155-200	6-10
LARGE	90-120	200-265	14-22
NOTE	*The AAPM recommended NEMA XR29 Dose Notification value for an adult torso is 50mGy. Dose Notification levels less than the AAPM recommended can be set. The maximum CTDI vol 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.		

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Approved by Dr Verdini

