LOW DOSE Screening CHEST WITHOUT 64 Sensation

Majority of patients	s screened are	between the ages of 55 and 8	30, Have a smoking history of 30 p	ack -years		
If no longer smokii	If no longer smoking, stopped smoking in the past 15 years, Persons who have undergone chest CT within 12 months should be excluded					
Screening should	Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantially					
limits life expectan	limits life expectancy or the ability or willingness to have curative lung surgery.					
Detect abnorma	Detect abnormalities that may represent lung cancer and may require further diagnositc evaluation. Detect nodules and masses.					
For individuals v	For individuals with no known signs or symptoms of lung cancer that have appropriate risk factors, such as those recommended by					
professional soc	ieties and he	alth care organizations.See	e the ACR LungCancer Screen	ing Resources webpag	ge for more information.	
	Helical					
	Head -Supine Craniocaudal					
	AP 120 kv 35mA					
	120kVp 35mas/Care Dose on					
	0.5/pitch 1					
	64x0.6					
	19.2					
CareDose 4D						
	0.25 mGy to 8 mGy					
	8 mGy					
	body	thickness			recon	
recon	part	spacing	kernel wi	indow d	estination	
1 chest	•	2mmx 2mm	31medium smooth	mediastinum	pacs	
		1.5mmx 1.5mm			pacs	
	chest		• •	•	pacs	
					pacs	
_				_	pacs	
O dalai iviii	iung	ΤΟΙΤΙΠΑΣΙΠΙΠ		larig	pacs	
		do				
		uei	леаѕе арргорпацету			
Па		Approvi	mate Values for CTDI	vol.		
_	Approximate values for CTDIVOI					
				C	CTDIvol(mGy)	
					0.25-2.8	
			155-200		0.5-4.3	
		90-120	200-265		1.0-5.6	
*The ACR Refer	rence Dose fo	r a "standard size patient"	(by definition, is approximate	ly 5' 7" and 155 lbs or	170 cm and 70 kg	
with a BMI of ab	out 24) is a C	TDIvol of less than 3 mGy				
*There is no AAPN	There is no AAPM recommended NEMA XR29 Dose Notification Value for lung screening scans. In general, lung screening exams should					
not have a CTD	lvol greater t	nan 7 mGy. Exams with C	ΓDIvol values less than the mir	nimum allowed range s	hould not be	
	-	•				
	recon 1 chest 2 lung 3 coronal 4 sag che 5 axial MIF na na Patient size SMALL AVERAGE LARGE *The ACR Refer with a BMI of ab *There is no AAPN not have a CTE	If no longer smoking, stopped sm Screening should be discontinued limits life expectancy or the ability Detect abnormalities that may For individuals with no known professional societies and here are some part 1 chest 2 lung 3 coronal chest 4 sag chest 5 axial MIP lung na na na Patient size SMALL AVERAGE LARGE *The ACR Reference Dose for with a BMI of about 24) is a Curtain the same part and here are some pa	If no longer smoking, stopped smoking in the past 15 years, Pe Screening should be discontinued once a person has not smok limits life expectancy or the ability or willingness to have curativ Detect abnormalities that may represent lung cancer and For individuals with no known signs or symptoms of lung professional societies and health care organizations. See Head AF 120kVp 00 body thickness recon part spacing 1 chest 2mmx 2mm 2 lung 1.5mmx 1.5mm 3 coronal chest 2mmx2mm 4 sag chest 2mmx2mm 5 axial MIP lung 10mmx2mm der ha na Approxi Patient size weight(kg) SMALL 50-70 AVERAGE 70-90 LARGE 90-120 "There is no AAPM recommended NEMA XR29 Dose Notification."	If no longer smoking, stopped smoking in the past 15 years, Persons who have undergone chest. Screening should be discontinued once a person has not smoked for 15 years or develops a heal limits life expectancy or the ability or willingness to have curative lung surgery. Detect abnormalities that may represent lung cancer and may require further diagnosit For individuals with no known signs or symptoms of lung cancer that have appropriate professional societies and health care organizations. See the ACR LungCancer Screen Helical Head -Supine Craniocauda AP 120 kv 35mA 120kVp 35mas/Care Dose 0.5/pitch 1 64x0.6 19.2 CareDose 4D 0.25 mGy to 8 mGy 8 mGy body thickness recon part spacing kernel will chest 2mmx 2mm 31medium smooth 2 lung 1.5mmx 1.5mm 70very sharp 3 coronal chest 2mmx2mm 31medium smooth 4 sag chest 2mmx2mm 31medium smooth 5 axial MIP lung 10mmx2mm B20f smooth lung apex lung base 35cm decrease appropriately na na Approximate Values for CTDI: Patient size weight(kg) weight(bs) SMALL 50-70 110-155 AVERAGE 70-90 155-200 LARGE 90-120 200-265 "The ACR Reference Dose for a "standard size patient" (by definition, is approximate with a BMI of about 24) is a CTDIvol of less than 3 mGy. "There is no AAPM recommended NEMA XR29 Dose Notification Value for lung screening scans not have a CTDIvol greater than 7 mGy. Exams with CTDIvol values less than the mir	Screening should be discontinued once a person has not smoked for 15 years or develops a health problem that substantis timits life expectancy or the ability or willingness to have curative lung surgery. Detect abnormalities that may represent lung cancer and may require further diagnosite evaluation. Detect in For individuals with no known signs or symptoms of lung cancer that have appropriate risk factors, such as the professional societies and health care organizations. See the ACR LungCancer Screening Resources webpash. Head - Supine Craniocaudal AP 120 kv 35mA 120kVp 35mas/Care Dose on 0.5/pitch 1 64x0.6 19.2 CareDose 4D 0.25 mGy to 8 mGy 8 mGy body thickness recon part spacing kernel window of the character of the part of t	