

Pancreas 3 phase 64 Toshiba

Indications	For acute pancreatitis, pancreatic mass, pancreatic mass ordered by GI or other subspecialist				
Diagnostic Task	Detect masses, abscess				
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(120-550)				
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 con	body	thickness			recon
	recon	part	spacing	algorithm	destination
	1	abdomen	2mmx 2mm	standard	pacs
Helical Set #2 40 sec delay	body	thickness			recon
	recon	part	spacing	algorithm	destination
	1	abdomen	2mmx 2mm	standard	pacs
	2	sag abdomen	2mmx2mm	standard	pacs
Helical Set #2 70 sec delay	body	thickness			recon
	recon	part	spacing	algorithm	destination
	1	abdomen	2mmx 2mm	standard	pacs
	2	sag abdomen	2mmx2mm	standard	pacs
	3	coronal abdomen	2mmx2mm	standard	pacs
Scan start/end location	1cm superior to diaphragm				
for both helical sets	iliac crest				
IV contrast volume/rate	75ml < 200lbs, 100ml 200-250lbs, 125ml>250lbs isovue 370 4cc/sec				
Scan delay	Performed as directed by a supervising radiologist				
	non-con/40sec-arterial/ 70sec-venous				
	Approximate Values for CTDIvol				
NOTE*	Patient size	weight(kg)	weight(lbs)	CTDIvol(mGy)	
	SMALL	50-70	110-155	10-17	
	AVERAGE	70-90	155-200	15-25	
	LARGE	90-120	200-265	22-35	

*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.

