CT Abd/Pelvis Venogram

64 GE

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|------------------------------|---|--------------------------|---|--|---------------------------------|
| Indications | For abdomen pain, pt with PE, evaluate for may thurner syndrome | | | | |
| Diagnostic Task | Detect deep venous thrombosis, evaluate venous anatomy | | | | |
| Scan mode | Helical | | | | |
| Position/Landmark | Head first-Supine Xiphoid S50-I500 | | | | |
| Topogram | AP 120kV 20mA Lat 120kV 40mA | | | | |
| kVp/Reference mass | 120kv Auto mA (300-700) | | | | |
| Rotation time/pitch | 0.5/0.984:1 | | | | |
| Detector Configuration | 64x0.625 | | | | |
| Table Speed/Increment | 39.37 | | | | |
| Dose reduction | Noise Index 15.86 | | | | |
| Allowed CTDI ranges* | 7mGy-50mGy | | | | |
| XR29 Dose Notification value | 50mGy | | | | |
| Helical Set | | body | thickness | | recon |
| 120 second delay | rec | on part | spacing | algorithm | destination |
| 1 | 1 | abdomen/pelvis | 2.5mmx 2.5mi | m standard | pacs |
| | 2 | sag abdomen | 2mmx2mm | standard | pacs |
| | 3 | coronal abdomen | 2mmx2mm | standard | pacs |
| | 4 | coronal MIP | 5mmx2mm | standard | pacs |
| Scan start/end location | 1cm superior to the diaphragm | | | | |
| | lesser trochanters | | | | |
| IV contrast volume/rate | | <20 | 0lbs 100ml, 200l | bs+ 125ml isovue 370 | 3cc/sec |
| Γ | Performed as directed by the supervising radiologist | | | | |
| Scan delay | 120seconds | | | | |
| Oral contrast | 1000ml water 30min prior to exam 32oz | | | | |
| | Approximate Values for CTDIvol | | | | |
| | | nt size we | ight(kg) | weight(lbs) | CTDIvol(mGy) |
| | | | 50-70 | 110-155 | 10-17 |
| | | | 70-90 90-120 | 200-265 | 15-25 22-35 |
| NOTE* | *The A | AAPM recommended NEMA XR | 29 Dose Notification Value ximum CTDI vol should match | for an adult torso is 50mGy. Dose No the dose notification value. Exams with C | tification levels less than the |

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