

CT Abd/Pelvis Venogram

16 GE

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 S25-I500					
Topogram	AP 120kV 10mA Lat 120kV 20mA					
kVp/Reference mass	120kv Smart mA (75-440)					
Rotation time/pitch	0.8/1.375:1					
Detector Configuration	16x1.25					
Table Speed/Increment	27.5					
Dose reduction	Noise Index 15.86					
Allowed CTDI ranges*	7mGy-50mGy					
XR29 Dose Notification value	50mGy					
Helical Set	body		thickness		recon	
120 sec delay	recon	part	spacing	algorithm	destination	
	1	abdomen/pelvis	2.5mmx 2.5mm	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 diaphragm					
	lesser trochanters					
IV contrast volume/rate	<200lbs 100ml, 200lbs+ 125ml isovue 370 3cc/sec					
Scan delay	Performed as directed by the supervising radiologist					
	120seconds					

Oral contrast 1000ml water 30min prior to exam

Approximate Values for CTDIvol			
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

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.

