

# CTA Chest for PE+AP 16 GE

<b>Indications</b>	SOB, Chest pain, cough, elevated d-dimer, hemoptysis				
<b>Diagnostic Task</b>	Detect pulmonary embolism, nodules or masses and characterize their size and shape, abnormal fluid collections in chest				
<b>Scan mode</b>	Helical				
<b>Position/Landmark</b>	Head first-Supine Sternal Notch S25-I350				
<b>Topogram</b>	AP 120kV 10mA Lat 120kV 30mA				
<b>kVp/Reference mass</b>	120kv Auto mA (100-440)				
<b>Rotation time/pitch</b>	0.5/1.375:1				
<b>Detector Configuration</b>	PE 16x0.625//AP 16x1.25				
<b>Table Speed/Increment</b>	PE 27.5// AP 27.5				
<b>Dose reduction</b>	Noise Index 21.45				
<b>Allowed CTDI ranges*</b>	7mGy-50mGy				
<b>XR29 Dose Notification value</b>	50mGy				
<b>Helical Set #1</b>	recon	body part	thickness spacing	algorithm	recon destination
	1	chest	1.25mmx 1.25mm	standard	paces
	2	lung	1.25mmx 1.25mm	lung	paces
	3	sag chest	2mmx2mm	standard	paces
	4	coronal chest	2mmx2mm	standard	paces
	5	axial mip lung	10mmx2mm	standard	paces
	6	thin chest	1.25mmx1mm	standard	paces
	7	MIP Pulmonary art RT	10mmx2mm	standard	paces
	8	MIP Pulmonary art LT	10mmx2mm	standard	paces
<b>Helical Set #2</b> <b>70 sec delay</b>	recon	body part	thickness spacing	algorithm	recon destination
	1	abdomen/pelvis	2.5mmx 2.5mm	standard	paces
	2	sag abdomen	2mmx2mm	standard	paces
	3	coronal abdomen	2mmx2mm	standard	paces
<b>Scan Start</b>	Chest-2cm superior to lung apices// AP Diaphragm				
<b>end location</b>	Chest-inferior aspect of L-1//AP lesser trochanter				
<b>DFOV</b>	40cm/decrease for lung recons				
<b>IV contrast volume/type</b>	<200lbs 100ml isovue 370 @4cc/sec >200lbs 125ml isovue 370 @5cc/sec				
<b>Scan delay</b>	Performed as directed by a supervising radiologist				
	bolus tracking at pulmonary trunk(level just inferior to carina)//70sec				
	Initiate scan manually-enhancement threshold of 80HU				
	Comments: Being able to locate the pulmonary trunk 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.				
	<b>Approximate Values for CTDIvol</b>				
	Patient size	weight(kg)	weight(lbs)	CTDIvol(mGy)	
	SMALL	50-70	110-155	4-10	
	AVERAGE	70-90	155-200	8-16	
	LARGE	90-120	200-265	14-22	
<b>NOTE*</b>	*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.				

