RIH – PEDI LOW DOSE FOLLOW UP SHUNT BRAIN SIEMENS DEFINITION AS20 PROTOCOL

| Position/Landmark | Supine head first or feet first 1cm superior to skull vertex | | | |
|---|---|--|---|---|
| Topogram Direction | Craniocaudal / Craniocaudal | | | |
| Respiratory Phase | Any | | | |
| Scan Type | Helical | | | |
| Ref kV/Ref mAs/Rotation time (sec) Pitch / Speed (mm/rotation) Safire Strength / Dose Optimization | Care kV 100 / Care Dose4D 160 / 0.5 sec .7:1, 8.75mm 1/3 | | | |
| Detector width x Rows = Beam Collimation | $0.625 \text{mm} \times 20 = 12.5 \text{mm}$ | | | |
| Average Tube Output | ctdi – 17.0 mGy dlp – 300 mGy.cm | | | |
| Helical Set Slice Thickness/ Spacing Algorithm Recon Destination | | thickness/ spacing 5mm x 5mm 75mm x .7mm 75mm x .7mm | algorithm J40f medium J40f medium H60f sharp J40f medium J40f medium H60f sharp | pacs pacs pacs pacs terarecon terarecon |
| Scan Start / End Locations | 1cm inferior to skull base 1cm superior to skull vertex 25cm | | | |
| DFOV | decrease appropriately | | | |
| IV Contrast Volume / Type / Rate | 100mL Iohexol (Omnipaque 350), 1.5mL/sec if needed | | | |
| Scan Delay | minimum of 2 minutes | | | |
| 2D/3D Technique Used | Workstream 4d mpr 5mm x 5mm axial brain reformats in the glabellomeatal plane, auto transferred to PACS Workstream 4d mpr 5mm x 5mm axial skull reformats in the glabellomeatal plane, auto transferred to PACS Workstream 4d mpr 5mm x 5mm coronal brain reformats perpendicular to the glabello-meatal plane, auto transferred to PACS | | | |
| Comments: Since this study is comprised of all mpr's, Recon 1 is used only to acquire data. Recons 2-4 are workstream 4d reformats for pacs. Recon 5 and 6 are thin image data to terarecon. | | | | |
| Do not alter the pitch setting of this Images required in PACS | Topograms, 5mm x 5mm axial brain, 5mm x 5mm coronal brain, 5mm x 5mm axial skull, Patient Protocol | | | |