

**RIH – ROUTINE PELVIS
GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL**

Indications: mass, metastases, lymphoma. For CT cystograms, see modifications below.

Position/Landmark	Head first or feet first-Supine Iliac Crest				
Topogram Direction	Craniocaudal				
Respiratory Phase	Suspension				
Scan Type	Helical				
KV / mA / Rotation time (sec) Pitch / Speed (mm/rotation) Noise Index / ASiR / Dose Reduction	120kv / smart mA (100-440) / 0.5 sec 1.375:1 , 27.50mm 13.5 / 30 / 30%				
Detector width x Rows = Beam Collimation	1.25mm x 16 = 20mm				
Average Tube Output	ctdi – 10.7 mGy dlp – 313 mGy.cm				
Helical Set		body	thickness/		recon
Slice Thickness/ Spacing	recon	part	spacing	algorithm	destination .
Algorithm	1	pelvis	5mm x 5mm	standard	pac
Recon Destination	2	thin pelvis	1.2mm x .6mm	standard	for dmpr
Scan Start / End Locations	1 cm superior to iliac crest lesser trochanters				
DFOV	38cm decrease appropriately				
IV Contrast Volume / Type / Rate	100cc omni 350 / 2cc per second if prescribed				
Scan Delay	65 seconds				
2D/3D Technique Used	DMPR of 5mm x 5mm coronal pelvis series (auto-batch on), average mode, auto-transferred to PACS.				
Comments: Recon 1 is a thin helical volume of the pelvis that is archived and used in direct multi-planar reformats. When a ct cystogram is ordered, instill 50 cc of Omni 240 into 500cc of normal saline and retrograde drip into the bladder via the patient's foley.					
Images required in PACS	Scouts, 5mm x 5mm axial pelvis, 5mm x 5mm coronal pelvis, Dose Report				