RIH – PELVIS FOR FRACTURE
GE LIGHTSPEED VCT PROTOCOL

Indication: trauma, fracture, dislocation, abscess

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 (120-450) / 0.5 sec .984:1 , 39.37mm 11.5 / 70 / 30%
Detector width x Rows = Beam Collimation	0.625mm x 64 = 40mm
Average Tube Output	ctdi – 10.7 mGy dlp – 313 mGy.cm
Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination . 1 **pelvis bone** 2.5mm x 2.5mm bone pacs 2 thin pelvis/hip .6mm x .6mm bone for dmpr 3 **pelvis soft tissue** 5mm x 5mm standard pacs
Scan Start / End Locations **DFOV**	1 cm superior to iliac crest lesser trochanters 38cm decrease appropriately
IV Contrast Volume / Type / Rate	
Scan Delay	
2D/3D Technique Used	DMPR: **sagittal and coronal reformats**, 3.0mm x 3.0mm, average mode

Comments: Recon 2 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 50mL of Iohexol (Omnipaque 240) into 500mL of normal saline and retrograde drip into the bladder via the patient's foley.

Images required in PACS	Scouts, 2.5mm x 2.5mm axial pelvis for bone, 5mm x 5mm pelvis for soft tissue, 3mm x 3mm sagittal reformats, 3mm x 3mm coronal reformats, Dose Report