RIH - CERVICAL SPINE
GE LIGHTSPEED 16 / OPTIMA CT580 PROTOCOL

Indication: fracture, trauma, mets, disc rupture, disc herniation, stenosis, post myelo.

Position/Landmark	Head first or feet first-Supine Sternal Notch
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 12.0 / 20 / 20%
Detector width x Rows = Beam Collimation	1.25mm x 16 = 20mm
Average Tube Output	ctdi – 11.7mGy dlp – 375.6 mGy.cm
Helical Set Slice Thickness/ Spacing Algorithm Recon Destination	recon / body part / thickness/ spacing / algorithm / recon destination . 1 / **c spine** / 2.5mm x 2.5mm / bone / pacs 2 / **c spine** / 2.5mm x 2.5mm / standard / pacs 3 / thin c spine / 1.2mm x .6mm / bone / for dmpr
Scan Start / End Locations **DFOV**	external auditory meatus mid body of T1 18cm decrease appropriately
IV Contrast Volume / Type / Rate	70cc omni 350 / 2cc per second if needed
Scan Delay	65 seconds
2D/3D Technique Used	DMPR of 3mm x 3mm **coronal and sagittal c-spine** series (auto-batch off), average mode, auto-transferred to PACS
Comments:	
Images required in PACS	Scouts, 2.5mm x 2.5mm axial c spine bone, 2.5mm x 2.5mm axial c spine standard, 3mm x 3mm sagittal c spine, 3mm x 3mm coronal c spine, Dose Report