

CT Abdomen and/or Abdomen/Pelvis Bariatric Leak

Maximum CTDI 35

Indication: Evaluation of immediate post op leak or within the first 30 days' post op

Note: If patient is an inpatient an NG tube may be needed for oral contrast administration

PT Prep: Oral contrast 2-3 cc Omni 240 with 30cc of water immediately before patient gets on the table.

IV contrast – Yes (follow MCR IV contrast dosing guidelines)

Series 1: Scouts AP & LAT – Supine “O” at Xiphoid Process S20 to I550

Series 2: Scan from above the diaphragm to iliac crest (abdomen only) or to pubic symphysis (if pelvis ordered.)
Inject IV contrast per MCR contrast dosing guidelines @ 2-3cc/sec.

Technique: **Delay: 70 seconds**

	750 HD (128) CT2	Optima 660 OVIC	Optima 660 CT1	VCT 64 CT3
Noise Level	18.23	14.64	11.60	11.60
Interval	5mm	5mm	5mm	5mm
Axial/Helical Thickness	5mm	5mm	5mm	5mm
Pitch	0.984:1	1.375:1	0.984:1	0.984:1
Speed mm/rotation	39.37	55	39.37	39.37
Detector Rows				
Detector Configuration				
Beam Collimation	40mm	40mm	40mm	40mm
KV/mA	Auto mA – if large pt. use manual & maximize mA	Auto mA – if large pt. use manual & maximize mA	Auto mA – if large pt. use manual & maximize mA	Auto mA – if large pt. use manual & maximize mA
Scan Type	Helical Full 0.8 sec	Helical Full 0.7 sec	Helical Full 0.7 sec	Helical Full 0.7 sec

Networking/ PACs: Send scouts
Send series 2 Standard Soft Tissue Algorithm
Recon and send lung images in Lung Algorithm
Recon and send bone images with Bone Algorithm
Recon and send MPR images in Standard Algorithm
Record DLP in PACS comments

Original Date: 4-8-04

Approved by: Dr. Songmen, MCR _____

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Revised Date: 11/9/04, 1/11/10, 12/8/10, 04/17/13, 12/15/15, 02/28/18, 07/27/21, 1/30/24 Page 1 of 1