

# CT Abdomen Hypervascular Malignancy

GE- 6001

**Maximum CTDI 25**

Indication: Hypervascular malignancy (melanoma, neuroendocrine, carcinoid, islet cell, pheochromocytoma, GIST (gastrointestinal stromal tumor), sarcomas, thyroid, gastric mass.

PT Prep: Negative Oral contrast (water) – Yes

\*\*If patient had CT barium do not reschedule, give water prior to scan.

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

**Place marker if indication is “palpable mass”**

Series 1: Scouts AP & LAT – Supine “O” at Xiphoid Process S20 to I400

Series 2: Unenhanced - Scan from above diaphragm to iliac crests.

	<b>750 HD (128) CT2</b>	<b>Optima 660 (32) OVIC</b>	<b>Optima 660 CT1</b>	<b>VCT 64 CT3</b>
Noise Level	18.23	14.64	11.60	11.60
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
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 0.8 sec

Series 3: Arterial Phase - Scan from above diaphragm to iliac crests.  
Inject IV contrast per MCR IV contrast dosing guidelines @ 3cc/sec.

Original Date: 4-8-04

Approved by: Dr. Songmen, MCR

Revised Date: 11/9/04, 1/11/10, 9/16/10, 12/8/10, 04/17/13, 12/15/2015, 2/27/18, 07/27/21, 1/30/24

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Technique - **Delay 35 Seconds**

	<b>750 HD 128 (room 2)</b>	<b>Optima 660 (32) OVIC</b>	<b>Optima 660 (room 1)</b>	<b>VCT 64 (room 3)</b>
Noise Level	18.23	14.64	11.60	11.60
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
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 0.8 sec

Series 4: Venous phase - Scan from above diaphragm to iliac crests.

Technique: **Delay: 70 seconds**

	<b>750 HD 128 (room 2)</b>	<b>Optima 660 (32) OVIC</b>	<b>Optima 660 (room 1)</b>	<b>VCT 64 (room 3)</b>
Noise Level	18.23	14.64	11.60	11.60
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
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 0.8 sec

Original Date: 4-8-04

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Networking/ PACs:   Send scouts  
                              Send series 2, 3, 4 Standard Soft Tissue Algorithm  
                              Recon and send lung images in Lung Algorithm 2.5mm  
                              Recon and send series 4 bone images with Bone Algorithm  
                              Recon and send MPR images for series 2,3,4 in Standard Algorithm  
                              Record DLP in PACS comments

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