

CT Abdomen Pelvis 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 lesser trochanter.

	750 HD (128) CT2	Optima 660 (32) OVIC	Optima 660 CT1	VCT 64 CT3
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 lesser trochanter.
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

Page 1 of 1

GE MDCT

CT Abdomen Pelvis Hypervascular Malignancy

GE- 6001

Maximum CTDI 25

Technique - **Delay 35 Seconds**

	750 HD (128) CT2	Optima 660 (32) OVIC	Optima 660 CT1	VCT 64 CT3
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 lesser trochanter.

Technique: **Delay: 70 seconds**

	750 HD (128) CT2	Optima 660 (32) OVIC	Optima 660 CT1	VCT 64 CT3
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

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

CT Abdomen Pelvis Hypervascular Malignancy

GE- 6001

Maximum CTDI 25

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

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

Page 3 of 3

GE MDCT