

CT Cervical Spine

GE- 4001

Maximum CTDI 60

Note: Indications such as abscess, s/p surgery or infection may require the use of IV contrast. Consult the Radiologist when these indications are given - IV contrast per MCR IV contrast dosing guidelines with a 60 sec delay.

PT Prep: Remove all metal objects from neck and chest to eliminate artifacts.

Series 1: Scouts AP & LAT — Supine (head first) "0" at Sternal Notch S 250 to 1 50

Series 2: Helical scan from base of skull to just above body of T1

Reconstruction Standard & Bone DFOV 12cm

Technique:

	750 HD (128) CT2	Optima 66 (32) OVIC	Optima 660 CT1	VCT 64 CT3
Noise Level	12.50	12.50	12.50	12.50
Interval	2.5mm	2.5mm	2.5mm	2.5mm
Axial/Helical Thickness	2.5mm	2.5mm	2.5mm	2.5mm
Pitch	0.969:1	0.969: I	0.984: I	0.984: I
Speed mm/rotation	19.37	19.37	39.37	39.37
Detector Rows				
Detector Configuration				
Beam Collimation	20mm	20mm	40mm	40mm
Kv/mA	120KV/650mA	120KV/250mA	120KV/250mA	120KV/250mA
Scan	Helical 1.0 sec	Helical 1.0 sec	Helical 1.0 sec	Helical 1.0 sec

Networking/ PACs: Send scouts

Send series 2 Standard Algorithm

Send series 2 Bone Algorithm, 1.5mm

Send coronal/sagittal bone and soft tissue reformats to PACS for Post Myelogram imaging.

Original Date: 4-8-04

Approved by: Dr. Barbu, MCR

Revised Date: 11/9/04, 1/1 1/10, 9/16/10, 12/8/10, 01/28/13, 12/15/15, 08/20/20, 3/11/24

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