

CT CERV SPINE WITH	Infection to assess abscess, neoplasm for soft tissue extent when patient cannot have an MRI.
CONSENT FORMS	Consent Form
ORAL CONTRAST	NONE
IV CONTRAST	0.8 ML/SEC FOR 75CC, 90 SEC DELAY
POSITIONING	SUPINE; HEAD FIRST; ARMS DOWN BY SIDE; HEAD IMMOBILIZED; CENTER AT STERNAL NOTCH
SCOUT	S250/I 50, 120 KVP @ 10 MA, AP & LAT
TECHNIQUE – 16/64 SLICE	HELICAL; 1.25 MM, STD, W400/L40 120 KVP @ AUTO/SMART MA/30% ASIR SFOV-LGE BODY/DFOV-15 CM 90 SEC DELAY THEN SCAN FROM EAM THROUGH T1
TECHNIQUE – 128 SLICE	
RECONS	16 SLICE: 1.25MM/INT 0.625MM BONE W/2500/L250 (DMPR BONE) 64 SLICE: 0.625 MM BONE W2500/L250 (DMPR BONE) 16 SLICE: 1.25MM/INT 0.625MM STD W/400/L40 (DMPR STD) 64 SLICE: 0.625 MM BONE W400/L440 (DMPR STD) 1.25 MM BONE W2500/L250
REFORMATIONS	SAGITTAL & CORONAL, AVG 1.25 MM THICK / 1.25 MM SPACING, W2500/L250 SAGITTAL & CORONAL, AVG 1.25 MM THICK / 1.25 MM SPACING, W400/40
PACS	SCOUTS 1.25 MM = C SPINE W 2.5 MM STD SPINE COR & SPINE SAG – BOTH BONE & STD
CHARGE	CT CERVICAL SPINE WITH
REMARKS	