

PATIENT NAME: [patient name]

EXAM DATE: [exam date] **AGE:** [age] **SEX:** [sex] **I.D.#:** [patient I.D.]

CT HIP W/O	Fracture and Hip pain
CONSENT FORMS	Pregnancy Status Form (Female Patient) Consent to Contrast Material Form
ORAL CONTRAST	NONE
IV CONTRAST	NONE UNLESS PHYSICIAN ORDERS WITH CONTRAST
POSITIONING	SUPINE; FEET FIRST; ARMS OVER CHEST; CENTER AT ILIAC CREST, CENTER AT HIP HEIGHT; HEELS SEPARATED AND TOES TURNED IN; TAPE TOGETHER
SCOUT	S60 / I 350, 120 KVP @ 20 MA, AP & LAT NO BREATH-HOLD
TECHNIQUE - 16 SLICE	HELICAL - 1.25 MM, BONE W2500/L250 120 KVP @ AUTO/SMART MA- 30% ASIR SFOV - LGE BODY / DFOV - FIT TO ANATOMY NO BREATH-HOLD; SCAN FROM TOP OF ILIAC CREST THROUGH ENTIRE FRACTURE.
TECHNIQUE - 64 SLICE	HELICAL; 2.5 MM, BONE W2500/L250 120 KVP @ AUTO/SMART MA 30% ASIR SFOV - LGE BODY / DFOV - FIT TO ANATOMY NO BREATH HOLD; SCAN FROM TOP OF ILIAC CREST TO BOTTOM OF FRX
TECHNIQUE - 128 SLICE	
TECHNIQUE - SIEMENS	
RECONS	16 & 64 SLICE-1.25 MM, BONE W2500/L250 FOV 18 CM, CENTER OVER AFFECTED HIP AP & LAT 16 & 64 SLICE-2.5 MM STD W400/L40 FOV 18 CM, CENTER OVER AFFECTED HIP AP & LAT 16 SLICE-1.25 MM/INT 0.63 MM, BONE W2500/L250 (DMPR) 64 SLICE- 0.625 MM BONE W2500/L250 (DMPR) 64 SLICE- 1.25MM BONE W2500/L250 (Pelvis)
REFORMATIONS	OBL CORONAL LONG AXIS OF AFFECTED FEMORAL NECK, AVG 0.6 MM THICK / 1.5 MM, SPACING W2500/L250 CORONAL & SAGITTAL OF AFFECTED HIP, AVG 0.6 MM THICK / 1.5 MM, SPACING W2500/L250

	If fracture - 3D with right to left rotation If metal prosthesis- 3D Metal Suppression –right to left rotation
PACS	SCOUTS 1.25 MM – PELVIS WO 1.25 MM – HIP WO 2.5 MM - STD EXT COR & EXT SAG 3D- when appropriate
CHARGE	CT HIP WITHOUT CONTRAST
REMARKS	

CT PELVIS/ WO (For anteversion)	Femoral rotation/version
CONSENT FORMS	Pregnancy Status Form (Female Patients)
ORAL CONTRAST	NO
IV CONTRAST	NO
POSITIONING	SUPINE; FEET FIRST, ARMS OVER CHEST; TOES STRAIGHT UP AND TOGETHER
SCOUT	S50/I1500, 120 KVP @ 20 MA, AP STRAIGHT WITH TOES UP, SO BOTH HIPS LINE UP S50/I1500 120 KVP @ 30 MA, LAT SCOUTS ARE USED FOR MEASUREMENT
TECHNIQUE-16 SLICE ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON	HELICAL; 5 X 5 MM, BONE PLUS W2500/L250 120 KVP @ AUTO/SMART MA, 30% ASIR SFOV - LGE BODY / DFOV – TO INCLUDE BOTH HIPS/BOTH KNEES. POSSIBLY INCLUDE BOTH ANKLES (IF ORDERED) SCAN BOTH THROUGH ENTIRE PELVIS TO LESSER TOCHANTER SCAN FEMURAL CONDYLES THROUGH BOTH KNEE JOINT SCAN THROUGH BOTH ANKLE JOINT – <i>ONLY IF SPECIFICALLY ASK FOR</i>
TECHNIQUE-64 SLICE ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON	HELICAL; 5 X 5 MM, BONE PLUS W2500/L250 120 KVP @ AUTO/SMART MA, 30% ASIR SFOV - LGE BODY / DFOV - TO INCLUDE BOTH HIPS/KNEES AND ANKLE (IF ORDERED)

	<p>SCAN BOTH THROUGH ENTIRE PELVIS TO LESSER TOCHANTER</p> <p>SCAN FEMURAL CONDYLES THROUGH BOTH KNEE JOINT</p> <p>SCAN THROUGH BOTH ANKLE JOINT – ONLY IF SPECIFICALLY ASK FOR</p> <p>SCAN THROUGH ANKLE JOINT – <i>ONLY IF SPECIFICALLY ASK FOR</i></p>
<p>TECHNIQUE – 128 SLICE</p> <p>ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON</p>	
RECONS	<p>STD W400/L40</p> <p>16 SLICE: 1.25 MM/INT 0.625 MM, BONE W2500/L250 (DMPR PELVIS)</p> <p>64 SLICE: 0.625 MM (DMPR PELVIS)</p>
REFORMATIONS	<p>CORONAL & SAGITTAL OF PELVIS, AVG 0.6 MM THICK / 1.5 MM SPACING W2500/L250</p>
PACS	<p>SCOUT</p> <p>5 MM – PELVIS WO</p> <p>5 MM – STD</p> <p>EXT COR & EXT SAG</p>
CHARGE	CT PELVIS WO
REMARKS	CALL MSK MRI RADIOLOGIST TO FIND OUT WHAT IMAGES TO OVERLAY TO MEASURE HIP DEGREES FOR ANTEVERSION.

<p>CT PELVIS/ WO (For anteversion) ROTH SPECIAL</p>	Femoral rotation/version
CONSENT FORMS	Pregnancy Status Form (Female Patients)
ORAL CONTRAST	NO
IV CONTRAST	NO
POSITIONING	<p>SUPINE; FEET FIRST, ARMS OVER CHEST; TOES STRAIGHT UP AND TOGETHER</p> <p>Patient to perform a reverse crunch- lift up pelvis and place back down just before the scan...</p>
SCOUT	<p>S50/I1500, 120 KVP @ 20 MA, AP STRAIGHT WITH TOES UP, SO BOTH HIPS LINE UP</p>

	S50/I1500 120 KVP @ 30 MA, LAT SCOUTS ARE USED FOR MEASUREMENT
TECHNIQUE-16 SLICE ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON	HELICAL; 5 X 5 MM, BONE W2500/L250 120 KVP @ AUTO/SMART MA, 30% ASIR NO BREATH HOLD SFOV - LGE BODY / DFOV – TO INCLUDE BOTH HIPS/BOTH KNEES. POSSIBLY INCLUDE BOTH ANKLES (IF ORDERED) SCAN FROM ILIAC CREST TO 2 CM BELOW LESSER TROCHANTER SCAN FEMURAL CONDYLES THROUGH BOTH KNEE JOINT SCAN THROUGH BOTH ANKLE JOINT – <i>ONLY IF SPECIFICALLY ASK FOR</i>
TECHNIQUE-64 SLICE ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON	HELICAL; 5 X 5 MM, W2500/L250 120 KVP @ AUTO/SMART MA, 30% ASIR NO BREATH HOLD SFOV - LGE BODY / DFOV - TO INCLUDE BOTH HIPS/KNEES AND ANKLE (IF ORDERED) SCAN FROM ILIAC CREST TO 2 CM BELOW LESSER TOCHANTER SCAN FEMURAL CONDYLES THROUGH KNEE JOINT SCAN THROUGH ANKLE JOINT – <i>ONLY IF SPECIFICALLY ASK FOR</i>
TECHNIQUE – 128 SLICE ONE SERIES W/ TWO TO THREE GROUPS AND SAME FOV INCLUDING BOTH JOINTS FOR COMPARISON	
RECONS	5MM STD W400/L40 0.625 MM BONE PLUS, W2500/L250 –DMPR 0.625 MM STD W400/L40 – 3D
REFORMATIONS	CORONAL & SAGITAL, W2500/L250 AVG 0.6 MM THICK / 1.5 MM SPACING
PACS	SCOUT 5 MM, -STD 5 MM - PELVIS EXT COR & EXT SAG 3D INDIVIDUAL FEMORAL HEAD/NECK
CHARGE	CT PELVIS WO
REMARKS	CALL MSK MRI RADIOLOGIST TO FIND OUT

WHAT IMAGES TO OVERLAY TO MEASURE HIP DEGREES FOR ANTEVERSION.