

CTA PF PROTOCOL Upper extremity	Evaluate for perforator flap pre surgery
INDICATION:	Pre-Perforator flap surgery
FORMS	Consent to Contrast Material
ORAL CONTRAST	NONE
IV CONTRAST	4-5 CC/SEC FOR 100 CC/NS 50 CC
POSITIONING	SUPINE, HEAD FIRST; ARM OF INTEREST DOWN BY SIDE, OTHER ARM UP ; CENTER AT AREA OF INTEREST;
SCOUT	S60 / I 500, 120 KVP @ 10 MA, AP & LAT
TECHNIQUE – 16 SLICE ANGIO	HELICAL; 0.625 MM, STD W400/L40 120 KVP @ AUTO/SMART MA – 40% ASIR SFOV – LG BODY/DFOV-FIT TO ANATOMY SMART PREP- ROI VESSEL IN DISTAL UPPER EXT SCAN FROM AREA OF INTEREST)- INFERIOR TO SUPERIOR
TECHNIQUE – 64 SLICE ANGIO	HELICAL; 0.625 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA-40% ASIR SFOV- LG BODY/DFOV-FIT TO ANATOMY SMART PREP- ROI VESSEL IN DISTAL UPPER EXT SCAN FROM AREA OF INTEREST- INFERIOR TO SUPERIOR
TECHNIQUE – 128 SLICE	HELICAL; 0.625 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA-40% ASIR SFOV- LG BODY/DFOV-FIT TO ANATOMY SMART PREP- ROI VESSEL IN DISTAL UPPER EXT SCAN FROM AREA OF INTEREST- INFERIOR TO SUPERIOR
RECONS	16 SLICE-2.5 MM, STD W400/L40 64 SLICE-2.5 MM, STD W400/L40
REFORMATIONS	CORONALS & SAGITTAL MIPs, 2.5 THICK & 12.5 SPACING, W800/L100 CORONAL 0.625MM AVG, W400/L40
PACS	SCOUT 2.5 MM -CTA COR ABD THIN, COR TRAM FLAP, SAG TRAM FLAP 0.625 MM – THINS AXIAL

CHARGE	CTA UPPER EXTREMITY RT OR LT
REMARKS	MAKE SURE AND REVERSE SERIES FOR SUPERIOR TO INFERIOR IMAGING Tera Recon= use Aorta 4D then template to give images of the skin surface or CT Spect then Heart to give skin and muscle image