

**PATIENT NAME:** [patient name]

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

<b>ABDOMEN WITH &amp; WO</b>	<b>TRIPHASE ADRENAL</b> <b>ALL SCANNERS</b>
INDICATION	CHARACTERIZE ADRENAL MASS
FORMS	Consent to Contrast Material. Pregnancy Status Form (female patients)
ORAL CONTRAST	WATER PREP 8 OZ OF WATER AT TABLE BEFORE SCANNING
IV CONTRAST	2.5 to 3.0 CC/SEC (use 50 cc NS for dual) Dual: <250 lbs = 100cc, >250 lbs = 100cc Single: <150 lbs = 100cc, >150 lbs = 100cc
POSITIONING	SUPINE; FEET FIRST; ARMS UP & OUT OF WAY CENTER AT XYPHOID INSPIRATION BREATH HOLD
SCOUT	S 60 /I 350, 120 KVP @ 10 MA AP & LAT
TECHNIQUE - NONCONTRAST	HELICAL; 1.25 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA, NI 28.6, 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY SCAN THROUGH ADRENALS, STD W400/L40 ROI MASS = <10 HOUNSFIELD UNITS
TECHNIQUE -PORTAL VENOUS	HELICAL; 1.25 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA , NI 24.2, 40% ASIR, SFOV-LG BODY/DFOV-FIT TO ANATOMY 3 ROIs IN LIVER FOR PORTAL VENOUS 45 SEC MONITOR DELAYS/50HU  SCAN FROM TOP OF LIVER TO ILIAC CREST

<p>TECHNIQUE- DELAY 15 MINUTES</p>	<p>HELICAL; 1.25 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA, NI 24.2, 40% ASIR SFOV - LG BODY/SFOV - FIT TO ANATOMY</p> <p>DELAY PHASE DELAY 15 MINUTES SCAN THROUGH ADRENALS ONLY AT 1.25 MM</p>
<p>RECONS</p>	<p>1.25 MM STD W400/L40 2.5 MM LUNG W1400/L-600 0.625 MM STD W400/L40 (DMPR)</p>
<p>REFORMATIONS</p>	<p>CORONAL &amp; SAGITTAL, AVG 2.5MM/2.5MM, W400/L40</p>
<p>PACS</p>	<p>SCOUTS 1.25 MM STD – ABD WO 1.25 MM STD – ABD W 1.25 MM STD - DELAY 2.5 MM - LUNG ABD COR &amp; ABD SAG</p>
<p>CHARGE</p>	<p>ABDOMEN WITHOUT AND WITH</p>
<p>REMARKS</p>	

<b>CT ABDOMEN WITH &amp; WO</b>	<b>TRIPHASE RENAL</b>
INDICATIONS	CHARACTERIZE RENAL MASS
FORMS	Consent Form Pregnancy Status Form (Female Patients)
ORAL CONTRAST	NONE 8 OZ OF WATER AT TABLE BEFORE SCANNING
IV CONTRAST	3.5 CC/SEC FOR 100 CC/NS 50 CC
POSITIONING	SUPINE; FEET FIRST; ARMS UP & OUT OF WAY; CENTER AT XYPHOID, INSPIRATION BREATH HOLD
SCOUT	S60/I 500, 120 KVP @ 10 MA, AP & LAT
TECHNIQUE - 16 & 64 SLICE NONCONTRAST	HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA - 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY THROUGH KIDNEYS ONLY
TECHNIQUE - 16 SLICE ARTERIAL/VENOUS	HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY  USE SMART PREP / ROI AORTA AT THE LEVEL OF THE RENALS 10 SEC MONITOR DELAY/100 HU/10 SEC FROM DIAGNOSTIC DELAY SCAN TOP OF KIDNEYS TO BOTTOM OF KIDNEYS FOR ARTERIAL PHASE  40 SEC DELAY VENOUS PHASE. SCAN FROM SCAN DIAPHRAGM TO ILIAC CREST

<p>TECHNIQUE - 64 SLICE ARTERIAL/VENOUS</p>	<p>HELICAL; 2.5 MM, STD W400/L40, KVP 120 @ AUTO/SMART MA - 40% ASIR, SFOV-LG BODY/DFOV-FIT TO ANATOMY</p> <p>USE SMART PREP / ROI AT AORTA AT THE LEVEL OF THE RENALS 10 SEC MONITOR DELAY / 100 HU / 20 SEC FROM DIAGNOSTIC DELAY SCAN TOP OF KIDNEYS TO BOTTOM OF KIDNEYS FOR ARTERIAL PHASE</p> <p>50 SEC DELAY VENOUS PHASE SCAN FROM DIAPHRAGM TO ILIAC CREST</p>
<p>TECHNIQUE - 16 &amp; 64 SLICE DELAY 5 MINUTE</p>	<p>HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA 40% ASIR SFOV-LG BODY/DFOV - FIT TO ANATOMY</p> <p>5 MINUTE DELAY SCAN KIDNEYS ONLY-Use Siemens equiv. spacing.</p>
<p>REFORMATIONS</p>	<p>CORONAL &amp; SAGITTAL AVG 2.5MM/2.5MM, W400/L40</p>
<p>PACS</p>	<p>SCOUTS 2.5 MM = ABD WO 2.5 MM = ABD W 2.5 MM = LUNG ABD COR &amp; ABD SAG</p>
<p>CHARGE</p>	<p>ABDOMEN WITH AND WITHOUT</p>
<p>REMARKS</p>	<p>RENAL CANCER RESTAGING OR FOLLOW-UP NO WITHOUT CONTRAST SERIES PREP WITH ORAL CONTRAST</p>

<b>CT ABDOMEN WITH &amp; WO</b>	<b>TRIPHASE PANCREAS</b>
INDICATION	PANCREATIC MASS, PSEUDO CYST
FORMS	Consent to Contrast Material Pregnancy Status Form (Female Patients)
ORAL CONTRAST	WATER PREP 8 OZ OF WATER AT TABLE BEFORE SCANNING
IV CONTRAST	4-5 CC/SEC FOR 100 CC/NS 50 CC SMART PREP WITH ROI AORTA AT LEVEL OF THE CELIAC TRUNK ARTERY
POSITIONING	SUPINE; FEET FIRST; ARMS UP & OUT OF WAY; CENTER AT XYPHOID INSPIRATION BREATH HOLD
SCOUT	S60 / I 450, 120 KVP @ 10 MA, AP & LAT
TECHNIQUE - 16 & 64 SLICE NONCONTRAST	HELICAL; 5.0 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA, 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY LOCALIZE SCAN THRU PANCREAS
TECHNIQUE - 16 SLICE ARTERIAL / VENOUS	HELICAL; 1.25 MM, STD W400/L40, FOR ARTERIAL PHASE (PANCREATIC PHASE) & 2.5 MM (VENOUS PHASE) KVP 120 @ AUTO/SMART MA, 40% ASIR SFOV - 25 CM LG BODY  USE SMART PREP / ROI AORTA AT LEVEL OF CELIAC TRUNK WITH 10 SEC MONITOR DELAY / 12 SEC DIAGNOSTIC DELAY SCAN PANCREAS ONLY (ARTERIAL PHASE)  FOV - FIT TO ANATOMY DELAY 40 SEC FOR VENOUS PHASE AT 2.5 MM FROM TOP OF LIVER TO ILIAC CREST

<p>TECHNIQUE - 64 SLICE ARTERIAL / VENOUS</p>	<p>HELICAL; 1.25 MM, STD W400/L40, FOR ARTERIAL PHASE (PANCREATIC PHASE) &amp; 2.5 MM (VENOUS PHASE) KVP 120 @ AUTO/SMART MA, 40% ASIR SFOV- 25 CM LG BODY</p> <p>USE SMART PREP/ ROI AORTA AT LEVEL OF CELIAC TRUNK WITH 10 SEC MONITOR DELAY / 20 SEC DIAGNOSTIC DELAY SCAN PANCREAS ONLY (ARTERIAL PHASE)</p> <p>FOV - FIT TO ANATOMY DELAY 40 SEC FOR VENOUS PHASE AT 2.5 MM FROM TOP OF LIVER TO ILIAC CREST</p>
<p>RECONS</p>	<p>16 SLICE-1.25 MM/0.625 MM, STD W400/L40 VENOUS (DMPR) 64 SLICE- .625 MM, STD W400/L40 (DMPR) VENOUS</p> <p>2.5 MM, LUNG W400/L40-VENOUS</p>
<p>REFORMATIONS</p>	<p>CORONAL &amp; SAGITTAL-AVG 2.5MM/2.5MM, W400/L40</p>
<p>PACS</p>	<p>SCOUTS 5.0 MM STD – ABD WO 1.25 MM ARTERIAL/2.5 MM VENOUS – ART/ VEN 2.5 MM = LUNG ABD COR &amp; ABD SAG</p>
<p>CHARGE</p>	<p>CT ABDOMEN WITH AND WITHOUT CONTRAST USED</p>
<p>REMARKS</p>	<p>NOTE - PANCREAS USUALLY FINE W/WO ON FIRST STUDY, AND WITH ONLY ON SECOND OR FOLLOW-UP STUDIES</p>

<b>CT ABDOMEN WITH &amp; WO</b>	<i>If performing multiphase CT of liver for lesion characterization, this is a CT abdomen with study - please refer to that protocol (under CT Abd With). Do not do "without".</i>
INDICATIONS	<b>4-PHASE LIVER- only for f/u liver ablation, Y90 treatment, Chemobo Liver, or TACE</b>
FORMS	Consent Form Pregnancy Status Form (Female Patients)
ORAL CONTRAST	WATER 8 OZ OF WATER AT TABLE BEFORE SCANNING
IV CONTRAST	5.0 CC/SEC FOR 150 CC/NS 50 CC
POSITIONING	SUPINE; FEET FIRST; ARMS UP & OUT OF WAY; CENTER AT XYPHOID, INSPIRATION BREATH HOLD
SCOUT	S60/I 500, 120 KVP @ 10 MA, AP & LAT
TECHNIQUE - 16 & <b>64 SLICE</b> NONCONTRAST- <b>only for f/u liver ablation, Y90 treatment, Chemobo Liver, or TACE</b>	HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA - 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY SCAN THROUGH LIVER

<p>TECHNIQUE - 16 SLICE ARTERIAL/VENOUS</p>	<p>HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA 40% ASIR SFOV - LG BODY/DFOV - FIT TO ANATOMY</p> <p>FOR ARTERIAL PHASE USE SMART PREP / ROI AORTA AT THE LEVEL OF THE LIVER 10 SEC MONITOR DELAY/150 HU/25 SEC FROM DIAGNOSTIC DELAY SCAN THROUGH LIVER</p> <p>70 SEC DELAY FROM START OF INJECTION FOR VENOUS PHASE SCAN FROM DIAPHRAGM TO ILIAC CREST</p>
<p>TECHNIQUE - 64 SLICE ARTERIAL/VENOUS</p>	<p>HELICAL; 2.5 MM, STD W400/L40, KVP 120 @ AUTO/SMART MA - 40% ASIR, SFOV-LG BODY/DFOV-FIT TO ANATOMY</p> <p>ARTERIAL PHASE USE SMART PREP / ROI AT AORTA AT THE LEVEL OF THE LIVER 10 SEC MONITOR DELAY / 150 HU /25 SEC FROM DIAGNOSTIC DELAY SCAN LIVER</p> <p>70 SEC DELAY FROM START OF INJECTION FOR VENOUS PHASE SCAN FROM DIAPHRAGM TO ILIAC CREST</p>
<p>TECHNIQUE - 16 &amp; 64 SLICE DELAY 5 MINUTE</p>	<p>HELICAL; 2.5 MM, STD W400/L40 KVP 120 @ AUTO/SMART MA 40% ASIR SFOV-LG BODY/DFOV - FIT TO ANATOMY</p> <p>5 MINUTE DELAY SCAN LIVER-Use Siemens equiv. spacing.</p>
<p>REFORMATIONS</p>	<p>CORONALS &amp; SAGITTAL AVG 2.5MM/ 2.5MM, W400/L40</p>



PACS	SCOUTS 2.5 MM = ABD WO 2.5 MM = ABD W 2.5 MM = LUNG ABD COR & ABD SAG
CHARGE	ABDOMEN WITH AND WITHOUT
REMARKS	SCHEDULED BY IR STAFF, MAY HAVE INSTURCTIONS TO BE ASSIGNED FOR A SPECIFIC RADIOLOGIST TO READ.

CT PREPS	All CT contrast patients should be NPO for 4 hours before their exam. All patients should drink plenty of water before their exam
Routine Abdomen and Pelvis	<p><b>For:</b> Diverticulitis, pain, pancreatitis, appendicitis, elevated labs or cancer (not for adrenal, liver, GIST, stromal, or pancreas cancer).</p> <p><b>Outpatients:</b> Patients are to receive one 50 ml bottle of Omni 140, consent form, and prep sheet. Patient to mix Omni 140 50 cc into 32 oz water. Drink half the mixture 2 hours prior to exam. Drink last half of mixture 1 hour prior to exam</p> <p><b>Inpatients:</b> Mix Omni 140 50 cc into 32 oz of water. Drink half of mixture two hours prior to exam. Drink last half of mixture one hour prior to exam.</p> <p><b>ER patients:</b> only if doctor requests- Mix Omni 140 50 cc into 32 oz of water- Drink half of mixture an hour prior to exam. Drink last half of mixture 30 minutes prior to exam</p>

<p>Abdomen CT's</p>	<p>For Stomach (stromal) cancer, small bowel evaluation, GIST, stomach mass, Crohn's. Patients receive 2 bottles of Volumen. Drink one bottle 2 hours prior to exam. Drink one bottle 1 hour prior to exam. For CT Enterography: Patients should arrive 1.5 hours early to drink Volumen prep. Drink one bottle of Volumen every 20 minutes for the hour before their exam.</p>
<p>Gastric Bypass Protocol</p>	<p>For: Patients who have had gastric bypass. Mix Omni 140 50 cc into 32 oz of water- Patients to drink 8 oz mixture of Omni 140 and water an hour before exam. The second dose (8oz) of mixture will be given just before getting on the table.</p>
<p>Pancreas Evaluations</p>	<p>For: Mass, cysts, recurrent pancreatitis, history of pancreatitis who has had a routine CT abdomen already done. Patient to drink 64 oz of water the hour before their exam.</p>
<p>All Triphase Renal/ Dual Adrenal/Dual Liver</p>	<p>For: Renal/Adrenal/Liver), mass, cyst, hepatitis C, and/or Adrenal/Liver Cancer. Water prep. Patients are to start drinking at least 64 oz of water the hour before their exam. For Renal Cancer follow-up: Mix Omni 140 50 cc into 32 oz of water- Drink half of mixture two hours prior to exam. Drink last half of mixture one hour prior to exam.</p>
<p>UT/Urogram/Hernia/ Abdomen with/wo &amp; pelvis with (GI vs stones)</p>	<p>For: Stone, hernia, hematuria Water prep</p>

Tumor Type	Common Tumors	C/A	C/A/P	A/P
------------	---------------	-----	-------	-----

<p><b>Hypovascular</b></p> <p><b>*ROI- in aorta (Chest)</b></p> <p><b>*ROI- liver (Abd/ Pelvis)</b></p>	<p><b>Lung</b></p> <p><b>Colorectal</b></p> <p><b>Breast/Ovarian/ Uterine</b></p> <p><b>Prostate/Testicular</b></p> <p><b>GIST/Stomach/Sm</b></p> <p><b>Bowel Sarcoma</b></p> <p><b>Merkel Cell</b></p> <p><b>Cholangiocarcinoma</b></p> <p><b>Etc...</b></p> <p><i>ORAL PREP</i></p>	<p>Arterial Chest</p> <p>Short Delay</p> <p>PV Abdomen</p> <p>LD delay A-bladder/</p> <p>transitional cell/ureteral cancer</p>	<p>Arterial Chest</p> <p>Short Delay</p> <p>PV A/P</p> <p>LD delay A/P-bladder/</p> <p>transitionalcell /ureteral cancer</p> <p>Prostate cancer-bladder only</p>	<p>PV A/P</p> <p>LD delay A/P-bladder/</p> <p>transitional cell/ureteral cancer</p> <p>Prostate cancer- bladder only</p>
<p><b>Hypervascular</b></p> <p><b>*ROI- in pulmonary artery(Chest)</b></p> <p><b>*ROI- in aorta (Abd/ Pelvis)</b></p>	<p><b>Melanoma</b></p> <p><b>Carcinoid</b></p> <p><b>Neuroendocrine</b></p> <p><i>ORAL PREP</i></p>	<p>Arterial C/A</p> <p>PV Liver Only</p>	<p>Arterial C/A/P</p> <p>PV Liver Only</p>	<p>Arterial A/P</p> <p>PV Liver Only</p>
<p><b>Hypervascular</b></p> <p><b>*ROI- in pulmonary artery(Chest)</b></p> <p><b>*ROI- in aorta (Abd/ Pelvis)</b></p>	<p><b>Renal</b></p> <p><b>Islet Cell</b></p> <p><b>Gastrinoma</b></p> <p><b>Insulinoma</b></p> <p><b>Choriocarcinoma</b></p> <p><b>Thyroid</b></p> <p><i>ORAL PREP</i></p>	<p>Arterial C/</p> <p>Liver</p> <p>PV Abdomen</p>	<p>Arterial C/</p> <p>Liver</p> <p>PV A/P</p>	<p>Arterial Liver only</p> <p>PV A/P</p>

	<b>Pancreas Pancreatic neuroendocrine</b>  Water prep	Arterial C Pancreas protocol: late art pancreas PV Abd	Arterial C Pancreas protocol: late art pancreas PV A/P	Pancreas protocol 4cc/sec inject
	<b>Hepatocellular CA- water prep</b> “Liver Cancer” “Hep C & Cirrhosis w/ mass seen” Water prep	Chest rarely ordered Art Liver PV C/A Delay Liver	Chest rarely ordered Art Liver PV C/A/P Delay Liver	Multiphase Liver protocol (often w/o P) 4 -5 cc/sec inject for 150cc Delay Liver

**Note:**

**LD- low dose    C-chest    A-abdomen    P – pelvis    PV- portal venous phase**  
**Art- arterial phase    Hypovascular- Non hypervascular**