

Child Abdomen

Siemens 16 Slice

Application Examples: abdominal pain

Oral Contrast	*Yes
IV Contrast / Volume	Omnipaque 300 / **see below

Technical Factors

Injection Rate	1-2 ml/sec
Care Bolus ROI Location / HU	Liver / 30
Monitoring Delay	20 seconds
Cycle Time	2.25 seconds
Scan Delay	18 seconds
Breath Hold	Inspiration, if age appropriate

Scan Type	Spiral
Detector Collimator	Acq 16 x 1.2 mm
kV / mAs / Rotation Time	110 kV / 60 mAs / 0.6 seconds
Care Dose 4D	On
Pitch	1.2
Typical CTDIvol	4.33 mGy

Topogram: AP, 512 mm

Abdomen	Width / Increment	Kernel	Window	FoV	Series Description	Networking
Recon 1	3 x 3	B30	Abdomen	-	AXIAL	PACS
Recon 2	1.5 x 0.7	B30	Abdomen		AXIAL 1.5 x 0.7 STND	MPR / TERARECON

This protocol is used for routine abdominal studies.

Oral Contrast: *Guidelines for oral contrast for children

Neonates	per neonatologist
< 1 year	120 ml
1-5 years	240-350 ml
6-12 years	350-500 ml
> 12 years	600-900 ml

Patient Position: Patient lying supine with arms above head.

Scan Range: Scan from above diaphragm to IC or through ischial tuberosities as per order.

Recons: Adjust FoV to fit body contour.

Reformations: Post processing done in 3D card.

Series: Abdomen	Reformat Type	Width / Increment	Window	Series Description	Networking
Recon 2	Coronal MPR	3 x 3	Abdomen	COR	PACS
Recon 2	Sagittal MPR	3 x 3	Abdomen	SAG	PACS

**Amount of contrast used is based on child's weight. Weight in pounds (lbs) x 0.62 = total contrast amount.