

CAP Trauma

Siemens Flash

Application Examples: Trauma

Oral Contrast	If requested, 1 glass
IV Contrast / Volume	Omnipaque 300 / P3T
Injection Rate	P3T

Technical Factors

Care Bolus ROI Location / HU	N/A
Monitoring Delay	N/A
Cycle Time	N/A
Scan Delay	65 seconds
Breath Hold	Inspiration

Detector Collimator	Acq 128 x 0.6 mm
Care kV	On / 120 kV
Care Dose 4D	On / 150 mAs
Rotation Time (seconds)	0.5
Pitch	0.6
Typical CTDIvol	10.14 mGy \pm 50%

Topogram: Lateral & AP, 768 mm

CAP	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	5 x 5	I41f	2	Abdomen	AXIAL	PACS	None
Recon 2	Axial	2 x 2	I70f	2	Lung	AXIAL LUNG	PACS	None
Recon 3	3D:COR	3 x 3	I30f	2	Angio	COR MIP	PACS	Coronal MIP
Recon 4	3D:SAG	3 x 3	I30f	2	Angio	SAG MIP	PACS	Sagittal MIP
Recon 5	3D:OBL	3 x 3	I30f	2	Angio	OBL MIP	PACS	Oblique MIP
Recon 6	Axial	0.6 x 0.6	I30f	2	Abdomen	AXIAL 0.6 STND	TeraRecon	None

This protocol is a combination of a chest and abdomen study with a history of trauma. MIPs are created instead of MPRs in effort to look for traumatic vascular injury.

Patient Position: Patient lying supine with arms above head and lower legs supported.

Scan Range: Lung apices through ischial tuberosities.

Recons and Reformations: Set begin and end points on 2 to include lungs only.