## Gundersen Health System

## **Abdomen Two Phase KUB**

Application Examples: hematuria

Oral Contrast	H20			
IV Contrast / Volume <300lbs	150 ml Omnipaque 300 / Split Bolus			
IV Contrast / Volume >300lbs	150 ml Omnipaque 350 / Split Bolus			
Injection Rate	3.0 ml/sec			

Technical Factors

Renal Calc				
Detector Collimator	Acq 32 x 0.7 mm			
Care kV	On / 120 kV			
Care Dose 4D	On / 110 mAs			
Rotation Time (seconds)	0.5			
Pitch	0.8			
Typical CTDIvol	$10.34 \text{ mGy} \pm 50\%$			

AP				
Detector Collimator	Acq 32 x 0.7 mm			
Care kV	On / 120 kV			
Care Dose 4D	On / 110 m As			
Rotation Time (seconds)	0.5			
Pitch	0.8			
Typical CTDIvol	$10.34 \text{ mGy} \pm 50\%$			

## Topogram: Lateral & AP, 512 mm

<b>Renal Calc</b>	<b>Recon</b> Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL WITHOUT	PACS	None

AP	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL	PACS	None
Recon 2	3D:COR	3 x 3	Br40	2	Abdomen	COR	PACS	Coronal MPR
Recon 3	3D:SAG	3 x 3	Br40	2	Abdomen	SAG	PACS	Sagittal MPR
Recon 4	3D:COR	3 x 3	Br40	2	Abdomen	COR MIP	PACS	Coronal MIP
Recon 5	Axial	0.6 x 0.6	Br36	2	Abdomen	AXIAL 0.6 STND	TeraRecon	None

This protocol is used for evaluating common causes of persistent hematuria such as stones or tumors. It is used as an alternative to the Three Phase KUB protocol.

**Exam Instructions:** Patient should be instructed to drink one quart of water prior to arrival. If patient arrives without drinking water prior, give patient one quart of water to drink approximately 30 minutes before scan.

Patient Position: Patient lying supine with arms above head.

**Scan Instructions:** First, scan non-contrast kidneys through bladder with lower dose. Inject saline test bolus and 75mL IV contrast and wait 8 minutes. Then, inject 75 mL IV contrast and scan from diaphragm (include liver domes) to SP (including bladder) using a 90 second scan delay.

**Recons and Reformations:** Adjust FoV to fit body contour.

**3D:** Raysum

\*\*IMAR on hematuria protocols should be used on the non contrast axials and delayed axial phase images. (only need through the area of metal)

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