

CT Neck Parathyroid Multi-Phase

Siemens go.All

Application Examples: parathyroid adenoma

IV Contrast / Volume	75ml Omnipaque 350 / 50 mL saline chase
Injection Rate	4.0 mL /sec

Technical Factors

Scan Delay	30 seconds
Patient Instructions	Do not swallow

Scan Type	Spiral
Detector Collimator	Acq 32 X 0.7 mm
X-Care	Off
Care kV	On / 120 kV
Care Dose 4D	On / 120 mAs
Rotation Time (seconds)	0.5
Pitch	0.55
Typical CTDIvol	11.28 mGy ± 50%

Topogram: AP & Lateral, 512 mm

Unenhanced	Recon Type	W / I	Algorithm	Safire	Window	FoV	Series Description	Networking	Post Processing
Recon 1	Axial	1 x 1	Br36	2	Larynx	200	AXIAL WITHOUT	PACS	None

Arterial	Recon Type	W/ I	Algorithm	Safire	Window	FoV	Series Description	Networking	Post Processing
Recon 1	Axial	1 x 1	Br44	2	Larynx	200	AXIAL ARTERIAL	PACS	None
Recon 2	3D:COR	1 x 1	Br44	2	Larynx	-	COR MIP	PACS	Coronal MIP
Recon 3	3D:SAG	1 x 1	Br44	2	Larynx	-	SAG MIP	PACS	Sagittal MIP

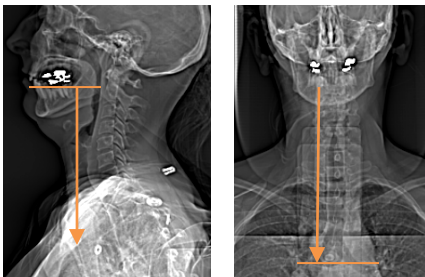
Venous	Recon Type	W/ I	Algorithm	Safire	Window	FoV	Series Description	Networking	Post Processing
Recon 1	Axial	1 x 1	Br44	2	Larynx	200	AXIAL VENOUS	PACS	None
Recon 2	3D:COR	1 x 1	Br44	2	Larynx	-	COR	PACS	Coronal MPR
Recon 3	3D:SAG	1 x 1	Br44	2	Larynx	-	SAG	PACS	Sagittal MPR

IV Placement: ≥ 20 gauge, preferably in antecubital (AC) fossa.

Patient Position: Patient lying in supine position, neck hyperextended slightly and head secured. IOML should be perpendicular to table.

Scan Instructions: Instruct patient not to swallow during scan.

Scan Range: From just below occlusal surface of teeth to level of carina for all phases.



Scan Phases: Unenhanced. Arterial, with a scan delay time of 30 seconds after start of contrast injection. Portal venous phase is performed at 80 seconds.

Recons and Reformations: Coronal and sagittal MIPs from arterial phase. Coronal and sagittal MPRs from PV phase.

*If Dental artifact- add an additional Axial recon with IMAR on and set start and end just through area of dental work and artifact.