GUNDERSEN LUTHERAN NUCLEAR MEDICINE DEPARTMENT PROTOCOL MANUAL

PROCEDURE: Tc-99m SESTAMIBI MYOCARDIAL PERFUSION IMAGING

SECTION: CARDIOVASCULAR 2.1

ORIGINAL DATE: 9 - 30 - 99

DATE REVISED: 9-27-18

REVIEWED: ANNUAL

Indications	Detection of coronary artery disease. Classification of left ventricular myocardium as normal, infarcted, and reversibly ischemic. Documentation of myocardial perfusion abnormalities before and after interventional therapy.			
Exam time length	Rest study: 1. Initially: 15 minutes for injection. 2. 1 hour later: 20 minutes for image acquisition. Stress study 1. Initially: 30 minutes for stress and injection. 2. 30 – 60 minutes later: 20 minutes for stress acquisition.			
Patient Preparation	-Patients may not have caffeine 12 hours prior to examPatients may not have any solids 4 hours prior to stress test, may have liquids up to 2 hours before stressNTG for Cardiolite patients- Stress study: stop NTG 2 hrs. prior to start of test. Rest study: standard RD/ST, no need to stop NTG Rest study: acute chest pain, stop NTG 1/2 hr prior to injection Female patients should be imaged with their bras removed			
Radiopharmaceutical & Dose	Radiopharmaceutical: Tc-99m-Sestamibi Dose: Adjusted according to patient weight One day protocol: For all patient weights. REST: minimum 7 mCi, maximum 10 mCi (0.093 mCi/Kg) STRESS/PAIN INJ: minimum 21 mCi, maximum 30 mCi (0.28 mCi/Kg)			
Administration Technique	Technique of administration: Rest: IV placement on one day exam, injection of sestamibi. Stress: IV placement and injection of sestamibi under direction of stress test provider or according to pharmaceutical utilized.			

CARDIOLITE REST/STRESS PROCESSING

	Rest Study	Stress Study (Pain Inj)	
Minimum time interval between rest and stress studies: 90 minutes; 60 minutes for inpt ASAP			
Time interval between tracer injection and imaging	45-60 minutes	15-60 minutes (Pain Inj-60 min)	
Camera/Collimator	LEHR	LEHR	
Patient position	Supine	Supine	
Energy	140 keV 10%	140 keV 10%	
Matrix	64 x 64 Zoom of 1.33	64 x 64 Zoom of 1.33	
Pixel size	6.91 mm	6.91 mm	
Number of projections	60	60	
Orbit CW or CCW	180 CCW	180 CCW	
Orbit type	Circular	Circular	
Start Angle	L-mode 0 degrees	L-mode 0 degrees	
End Angle	L-mode 90 degrees	L-mode 90 degrees	
Time per view	20 sec : low dose/high dose (1-day) 35 sec : =>110 (1-day)	15 sec : low dose/high dose (1-day) 20 sec : =>110 (1-day)	
Gating (Y/N)	No	Yes	
Gating frames	NA	8	
R to R window	NA	+/- 20% (adjust for a –fib)	
Uniformity and COR	Yes	Yes	
Prefilter Type	BUTTERWORTH	BUTTERWORTH	
Filter cutoff/power	0.4/10 : low dose (1-day) 0.5/5 : =>110 (1-day)	0.5/5	
Motion correction	Repeat study if motion	Repeat study if motion	
Attenuation correction	Yes - CT	Yes - CT	
Normal database used Y/N	Yes	Yes	
Reconstruction filter	Ramp	Ramp	
Name of Quant program used	Cedars' Sinai	Cedars' Sinai	
Screen Caps to make	Myometrix: FBP (These are done for a REST ONLY TEST)	Quantitative Gated SPECT Quantitative Perfusion SPECT Myometrix: FBP	
Send to FUJI	The 2 screen caps	The 4 screen caps	
Send to Dr Cardio	The Whole Patient Study	The Whole Patient Study	

Myovation Evolution Updated 12/11/14

Highlight Cardiolite Study

Click Myovation Evolution

Click Attn. Corr QC

Proceed

Click on adjust registration, click on organ.

Check, adjust registration

Make any adjustments to CT position starting with sagittals. If sagittals line up, look at coronals and adjust as needed, the axials should line up.

Scroll thru images

Proceed

Line up heart for slicing; adjust ROI to mask bowel, if needed.

Hit review page

Screen cap slices review pages for Cardiolite and Cardiolite AC

File, Save and Exit.

Take entire study and run QGSQPS

Screen cap polar map review pages only

When done exit and save.

Use QGS/QPS for review.

Pain Inj

1st set of images. Aquire images using Stress Gating.

Process per normal protocol.

Page reading Cardiologist. Ask if there will need to be any REST images acquired the next morning. If yes, order high dose Cardiolite...

Next day, change Stress label to REST. Then acquire new images as STRESS.

For processing change study name to TWO DAY>

Cardiac Doses – ACR guidelines

Weight	Rest dose (0.093mCi/kg	Stress Dose (.28mCi/kg)	Total (mCi)
75	7.0 – min	21.0 - min	28
80	7.4	22.4	29.8
85	7.9	23.8	31.7
90	8.4	25.2	33.6
95	8.8	26.6	35.4
100	9.3	28.0	37.3
105	9.8	29.4	39.2
110	10.0- max	30.0 (max)	40.0