CTA ABDOMAN/PELVIS

GE Revolution

Approval: E. Alvarez, MD rev:1 8/2025

INDICATION	AAA, Possible dissection, pre-endovascular repair, vascular malformation
POSITION / LANDMARK	Supine / Xiphoid
START/END LOCATIONS	Above diaphragm through pubis
CONTRAST PARAMETERS	100cc Isovue300, 4cc per second
RESPIRATORY PHASE	Inspiration
SCAN DELAY	Smart prep - track in aorta
SCAN TYPE	Helical

	KV	mA	Rot Time (sec)	Pitch	Speed (mm/rot)	Noise Index	ASiR	Dose Reduction
	120	Smart mA 50-560	0.5	0.984:1	39.37	20		

TECHNIQUE	Using automated exposure control and adjustment of the mA and/or kV according to patient size, radiation dose to be kept as low as reasonably achievable to obtain optimal diagnostic quality images.

Scans

Series #	Series	Body Part	DFOV	Thick/Space	Algorithm	Notes
1	Loc					AP/Lat
2	Source data	Adb/Pel	36	2.5x2.5	STND	

Recons

Recon source Series #	Recon	Body Part	Thick / Space	Algorithm	W/L	Notes
2	AX	Abd/Pel	1.25x0.625	STND		Do not send to PACS, use for recons
AX STND 1.25x0.625	COR	Abd/Pel	2x2	STND		

*Please note, recons are displayed as thickness X spacing

AX STND 1.25x0.625	SAG	Abd/Pel	2x2	STND		

2D / 3D Processing

Source: Axial with 2.5x2.5 standard window

1. Coronal 2x2
2. Sagittal 2x2
3. MIP and VR rotation – rotate 360 with 36 images

Series required in PACS

Loc, Dose Report, Source data, ALL recons except AX STND 1.25x0.625, ALL 3D post processed images

ADDITIONAL INSTRUCTIONS:

Without done for special instructions on order

With and without done if patient has endostent for leak check

CTA Abd/Pelvis- Post Endo stent 3D post processing

Source: Axial without 2.5x2.5 and with 2.5x2.5 standard window

1. Coronal 2x2
2. Sagittal 2x2
3. MIP and VR rotation – rotate 360 with 36 images

*Please note, recons are displayed as thickness X spacing