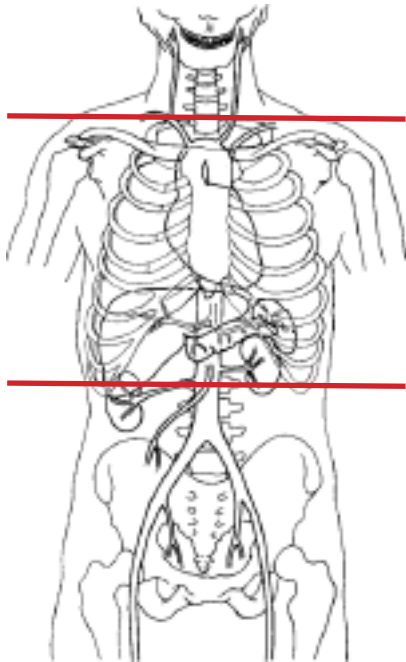


CTA Chest PE Protocol



Pt Position	Supine
Contrast	100 mL
Injection Rate	3.5 mL/sec minimum 20g prefer 18g
Respiration	Breath - hold
Aquisition Specs	Appropriate to achieve images as specified in the following tables

- just above lung apices thru adrenals

* You must have a clear indication for the exam if ordered as a CTA chest and a note that it was ordered to r/o PE.

Place all PE studies in STAT priority on PACS

Topogram (Scout)					
PLANE	ALGORITHM	THICKNESS	INTERVAL	DFOV	
Axial +C	Mediastinum	2.5 mm		pt largest + 4cm	
Axial +C	Lung	2.5 mm		pt largest + 4cm	
Axial +C	MIP	8.0 mm	3.0 mm	pt largest + 4cm	
Sagittal +C	MPR	2.5 mm	2.5 mm	pt largest + 4cm	reformats
Coronal +C	MPR	2.5 mm	2.5 mm	pt largest + 4cm	reformats
Sagittal +C	MIP	8.0 mm	5.0 mm	pt largest + 4cm	MIP reformat
Coronal +C	MIP	8.0 mm	5.0 mm	pt largest + 4cm	MIP reformat

Include Axial MIPs on all chest CTs

NOTES:

- Follow GFR and Metformin protocols for contrast studies
- LMP on pts of child-bearing age
- Shield children when possible