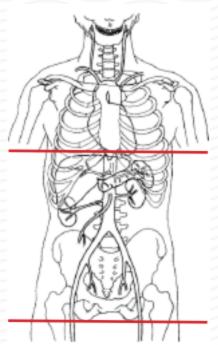
Reviewed: Jan 2022 Updated: Sept 2020







Indications	unspecified abdominal pain, trauma		
Patient Position	Supine		
Contrast	IV = 100 mL + oral if tolerated		
Injection rate	2.5 mL/sec minimum 22 g		
Contrast timing	Portal venous phase 60 - 75 sec		
Respiration	Breath- hold		
Scan Parameters	dome of diaphragm through ischial tuberosity		
Special instructions	<u>Trauma- use IV and oral IF patient can tolerate</u>		
	Standard trauma & general A/P scans should NOT have delayed imaging without approval from Radiologist. Exception: high clinical suspicion for severe pelvic fx or bladder rupture.		

PLANE	ALGORITHM	THICKNESS	DFOV	RECONS
Axial + C	Abdomen	5.0 mm	pt largest + 4 cm	Portal venous phase
Coronal + C	Abdomen	5.0 mm		X
Sagittal + C	Abdomen	5.0 mm		Χ



## NOTES:

- · Use at least 22g needle
- Follow GFR and Metformin protocols for contrast studies
- · LMP on pts of child-bearing age
- · Shield children when possible