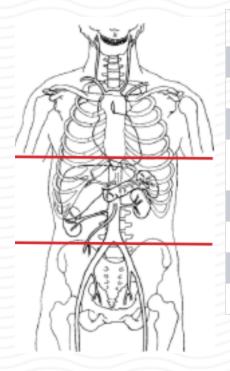
Reviewed: Jan 2025 Updated: Sept 2020



CT PANCREAS PROTOCOL



| Indications | Previous imaging indicating pancreas specific protocol | |
|------------------|--|--|
| Patient Position | Supine | |
| Contrast | IV = 100 mL | |
| Injection rate | 3.5 mL/sec minimum 22 g prefer 18 g | |
| Oral contrast | Negative oral contrast (WATER) 400 mL 20 minutes prior to scan, 400 mL immediately before scan | |
| Respiration | Breath- hold | |
| Scan Parameters | dome of diaphragm to iliac crest only for all phases | |
| Special note | NON-contrast CT abdomen NOT needed for pancreatic masses | |
| | Use small collimation for smaller cuts as needed. | |

| PLANE | ALGORITHM | THICKNESS | DFOV | |
|--------------|-----------|-----------|-------------------|-------------------------------------|
| Axial + C | Abdomen | 3.0 mm | pt largest + 4 cm | ARTERIAL phase - 25 sec delay |
| Axial + C | Abdomen | 3.0 mm | | VENOUS phase - 70 sec delay |
| Coronal + C | Abdomen | 2.0 mm | | Arterial reformats through pancreas |
| Sagittal + C | Abdomen | 2.0 mm | | Arterial reformats through pancreas |
| Coronal + C | Abdomen | 2.0 mm | | Venous reformats through pancreas |
| Sagittal + C | Abdomen | 2.0 mm | | Venous reformats through pancreas |



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