

CT UROGRAPHY

DO ONLY IN ROOM 2 OR ROOM 5

No oral contrast.

1. **Unenhanced Phase**
5 mm – top of kidneys to symphysis pubis
2. **Injection:**
Use dual-head injector
Syringe #1: Load 100 cc Omnipaque-300
Then load 100 cc saline
Tilt the syringe slowly downward so that contrast moves to the bottom to be injected first.

Syringe #2: Fill with 200 cc saline

Inject syringe #1 at 2.5 cc/sec (100 cc Omnipaque 300 first chased with 100 cc saline).

Then immediately inject syringe #2 at 2.5 cc/sec (additional 200 cc saline)

This will give a total of 100 cc of Omnipaque 300 chased by a total of 300 cc saline.
3. **General Nephrogram Phase** – 85 seconds from start of injection
2.5 mm thick images reconstructed at 2.5 mm from diaphragm through the entire liver and kidneys
4. **Excretory Phase** – 10 minutes from start of injection
1.25 mm thick slices every .625 mm – top of kidneys to symphysis pubis. Send these native images done at 1.25 mm and reconstructed every .625 mm to the Vitrea in 3D workroom (by Chest). Reconstruct these images at 2.5 mm and send the 2.5 mm images to the PACS with the other phases.

Send all the raw data to the Vitrea as separate series for each phase. Be sure especially to send the original excretory 1.25 mm images done every .625 mm to the Vitrea in the 3D workroom by Chest Reading.

Send the non-contrast, general nephrogram and 2.5 mm reconstructed excretory images to the PACS as one study all together.

Charge for CT Abdomen and Pelvis with and without contrast. Call Dr. Evans or Dr. Champine with questions.