

UT Southwestern Department of Radiology

Protocol Name: Ankle CT With IV Contrast

Orderable Name: CT LOWER EXTREMITY LEFT W IV CONTRAST

Adult Only

Epic Button: Ankle + IV

CT LOWER EXTREMITY RIGHT W IV CONTRAST

CTDIvol < 50 mGy

Indications: Suspected infection, inflammation, tumor

Acquisitions: 1

Active Protocol

| | | | |
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| Oral Contrast: None | IV Contrast: Link to Contrast Information Rate (ml/sec): 3 Volume (ml): 60 - 75 IV Access: Power injection: 20g or larger strongly preferred (if 22g use reduce rate to 2.5 mL/sec) Notes: Adjust contrast volume based on patient size. | Other Contrast: None | Airway Other Notes *Place a marker at the site of most concern. Dual energy/Spectral scanner required. Photon Counting CT preferred unless gout is indicated. Position: supine, toes pointing straight up, foot inverted slightly. Metal (FOV): Use 140 kVp. Use Right/Left orderable based on protocol or side indicated in reason for exam. |
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Last Change: 1/13/2023

Last Review: 1/29/2025

Links: [General Statements](#) [Positioning Reference](#)

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| Special Instructions | Use 5mm cor/sag if large patient or metal in FOV. | Do not repeat CT scan, recon soft tissue from 1st acquisition, send soft tissue kernal volume to TeraRecon Use 5mm cor/sag if large patient or metal in FOV. |
| Acq # / Series Name | 1 60 Sec Delayed | N/A 60 Sec Delayed |
| Phase Timing | 60 seconds | N/A |
| Acquisition Protocol | | Recon Only |
| Coverage | Region of interest around ankle(s) | Same |
| FOV | Ankle(s) center in scanner | Same |
| Algorithm | Bone | Soft Tissue |
| Axial Recons | 3 mm | 4 mm, Volume |
| Other Planar Recons | 3 mm coronal and sagittal | 4 mm coronal and sagittal |
| MIP Recons | | |
| †DECT Philips | VNC, Gout maps (cor/sag), BM edema, mono-E 100, mono-E 140, SBI | |
| †DECT Siemens | VNC, Gout maps (cor/sag), BM edema, mono-E 100, mono-E 140, low/high kVp | |
| †PC-CT Siemens | | |

† When dual energy (DE) or photon counting (PC) CT is used

