

UT Southwestern Department of Radiology

Protocol Name: Foot CT

Orderable Name: CT LOWER EXTREMITY LEFT WO IV CONTRAST
CT LOWER EXTREMITY RIGHT WO IV CONTRAST

Adult Only

Epic Button: Foot

CTDIvol < 50 mGy

Indications: Trauma, Degenerative arthropathy, intra-articular bodies Evaluation for tarsal coalition

Acquisitions: 1

Active Protocol

Oral Contrast: None	IV Contrast: None	Other Contrast: None	Airway
			Other Notes *Place a marker at the site of most concern. Position: Foot float on positioning, sponge to create gap between table and area of interest (center on foot of interest) Use Right/Left orderable based on protocol or side indicated in reason for exam. Metal (FOV): Use 140 kVp. Dual energy/Spectral scanner required. Photon counting scanner preferred unless gout is indicated.

Last Change: 1/13/2023

Last Review: 1/29/2025

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

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 kernel volume to TeraRecon Use 5mm cor/sag if large patient or metal in FOV.
Acq # / Series Name	1 Noncontrast	N/A Noncontrast
Phase Timing		N/A
Acquisition Protocol		Recon Only
Coverage	See illustration - Entire foot	Same
FOV	Whole foot	Same
Algorithm	Bone	Soft Tissue
Axial Recons	3 mm	4 mm, Volume
Other Planar Recons	3 mm coronal and sagittal (see illustration)	4 mm coronal and sagittal (see illustration)
MIP Recons		
†DECT Philips	Gout maps (cor/sag), BM edema, SBI, mono E 100, mono E 120	
†DECT Siemens	Gout maps (cor/sag), BM edema, low/high kVp, mono E 100, mono E 120	
†PC-CT Siemens		

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

