

# UT Southwestern Department of Radiology

**Protocol Name:** Foot CT

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

Adult only

**Protocol Epic Button:** Foot

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

CT LOWER EXTREMITY RIGHT WO IV CONTRAST

CTDIvol < 50 mGy

**# Acquisitions:** 1

Active Protocol

<b>Oral Contrast:</b> None	<b>IV Contrast:</b> None	<b>Other Contrast:</b> None	<b>Airway:</b>
			<p><b>Other Notes:</b>                  *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):140 KVp,align beam along metal.                  Dual energy scanner required at CUH &amp; OPB.</p>

Last Change: 2/10/2021

Last Review: 1/24/2022

Links:

[General Statements](#)

[Positioning Reference](#)

<b>Special Instructions</b>	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.
<b>Series Name</b>	<b>1</b> Noncontrast	<b>2</b> Noncontrast
<b>Phase Timing</b>		N/A
<b>Acquisition Protocol</b>		<a href="#">Recon Only</a>
<b>Coverage</b>	See illustration - Entire foot	Same
<b>FOV</b>	Whole foot	Same
<b>Algorithm</b>	Bone	Soft Tissue
<b>Primary Axial Recon</b>	3 mm	4 mm, Volume
<b>Other Recons</b>	3 mm coronal and sagittal (see illustration)	4 mm coronal and sagittal (see illustration)
<b>MIP Recons</b>		
<b>*Dual Energy Philips</b>	Gout maps (cor/sag), BM edema, SBI, mono E 100, mono E 120	
<b>*Dual Energy Siemens</b>	Gout maps (cor/sag), BM edema, low/high kVp, mono E 100, mono E 120	

\* When dual energy or spectral CT is used

