

UT Southwestern Department of Radiology

Protocol Name: CTA Chest/Abd/Pel (dual source)

Orderable Name: CT ANGIOGRAM AORTA ENTIRE W AND/OR WO IV CONTRAST

Adult Only

Epic Button: CTA Chest/Abd/Pel (dual source)

CTDIvol < 60 mGy

Indications: Thoracic and/or Abdominal aortic aneurysm, Pre-op

Acquisitions: 2

Active Protocol

<p>Oral Contrast: None</p>	<p>IV Contrast: Link to Contrast Information</p> <p>Rate (ml/sec): 4</p> <p>Volume (ml): 100</p> <p>IV Access: Power injection: 20g or larger in large vein (prefer AC fossa or forearm)</p> <p>Notes: Bolus tracking: 150 HU in ascending aorta @ aortic arch, initiate scan immediately after trigger. (send bolus tracker to PACS).</p>	<p>Other Contrast: None</p>	<p>Airway Acquire on inspiration.</p> <p>Other Notes Read by VIR division or Cardiothoracic division. Consult body habitus kVp selection chart.</p> <p>UTSW: Check attenuation of the suprarenal aorta on the arterial phase at the time of scan. If HU < 250 HU, call radiologist to determine next steps and document in tech note.</p>
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Last Change: 4/12/2024

Last Review: 4/12/2024

Links: [kVp Body Chart](#)

[General Statements](#)

[CTA aorta parameter table 8-22 update](#)

Special Instructions	Use FLASH mode prospective ECG triggered @ 35% RR No breathing instructions.	Acquire in dual energy mode. Acquire on inspiration.
Acq # / Series Name	1 Arterial	2 Arterial
Phase Timing	Bolus Tracking	Minimum delay
Acquisition Protocol	Vascular	Vascular
Coverage	Base of neck to lesser trochanters	Base of neck to lesser trochanters
FOV	Skin to skin at widest portion of patient	Skin to skin at widest portion of patient
Algorithm	Soft Tissue	Soft Tissue
Axial Recons	2 mm, Volume	2mm, Volume
Other Planar Recons	2mm coronal and sagittal	2mm coronal and sagittal
MIP Recons		7x2mm axial
†DECT Philips		
†DECT Siemens		MonoE 50 keV
†PC-CT Siemens		

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

