## **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

CTDIvol < 60 mGy

Epic Button: CTA Chest/Abd/Pel (dual source)
Indications: Thoracic and/or Abdominal aortic aneurysm, Pre-op

# Acquisitions: 2 Active Protocol

Oral Contrast: None	IV Contrast: Link to Contrast Information	Other Contrast: None	Airway
	Rate (ml/sec): 4		Acquire on inspiration.
	Volume (ml): 100		
	IV Access:  Power injection: 20g or larger in large vein (prefer AC fossa or forearm)		Other Notes Read by VIR division or Cardiothoracic division. Consult body habitus kVp selection chart.
	Notes: Bolus tracking: 150 HU in ascending aorta @ aortic arch, initiate scan immediately after trigger. (send bolus tracker to PACS).		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.

Last Change: 2/21/2025 Last Review: 2/21/2025 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		
<b>Acquisition Protocol</b>	<u>Vascular</u>	<u>Vascular</u>		
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		
<b>Axial Recons</b>	2 mm, Volume	2mm, Volume		
Other Planar Recons	2mm coronal and sagittal	2mm coronal and sagittal		
MIP Recons	7x2mm axial, sagittal and coronal	7x2mm axial, sagittal and coronal		
†DECT Philips				
†DECT Siemens		MonoE 50 keV		
†PC-CT Siemens				

