

UT Southwestern Department of Radiology

Protocol Name: CT Leg Lower Half + IV

Orderable Name: CT LOWER EXTREMITY LEFT W IV CONTRAST

Adult Only

Epic Button: Lower Leg + IV

CT LOWER EXTREMITY RIGHT W IV CONTRAST

CTDIvol < 50 mGy

Indications: Suspected infection, inflammation, tumor

Acquisitions: 1

Active Protocol

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. 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.
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Last Change: 1/13/2023

Last Review: 1/29/2025

Links: [General Statements](#)

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 60 Sec Delayed	N/A 60 Sec Delayed
Phase Timing	60 seconds	N/A
Acquisition Protocol		Recon Only
Coverage	Above knee thru toes	Same
FOV	Focused to size of lower leg	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, SBI	
†DECT Siemens	VNC, Gout maps (cor/sag), BM edema, low/high kVp, mono E 100, mono E 140	
†PC-CT Siemens		

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

