Spine 3x3 Thoracic and/or Lumbar Spine   Siemens 16 Slice

Application Examples: T spine or L spine fracture, post-op

Oral Contrast	No
IV Contrast / Volume	No

Technical Factors

Scan Type	Spiral
Detector Collimator	Acq 16 x 0.6 mm
kV / mAs / Rotation Time	130 kV / 260 mAs / 1.0 seconds
Care Dose 4D	Yes
Pitch	0.9
Typical CTDIvol	32.65 mGy

Topogram: AP & Lateral, 512 mm

Spine 3x3	Width / Increment	Kernel	Window	FoV	Series Description	Networking
Recon 1	3 x 3	B60s	Bone	150	AXIAL BONE	PACS
Recon 2	3 x 3	B20s	Spine	150	AXIAL STND	PACS
Recon 3	0.75 x 0.5	B20s	Spine	150	AXIAL 0.75 x 0.5 SMOOTH	MPR / Definition / TeraRecon

This protocol is intended for thoracic and/or lumbar spines.

Patient Position: Patient lying in supine position, arms positioned comfortably above the head, lower legs supported. Place a cushion under the patient's knees—this will reduce the curve in the spine and also make the patient more comfortable.

Scan Instructions: Zero the gantry above area of interest to include enough vertebral bodies for counting levels. If thoracic spine only is ordered, include entire thoracic and lumbar on topogram. Scan area of interest.

Reformations: Post processing done in 3D card.

Series: Spine 3x3	Reformat Type	Width / Increment	Window	Series Description	Networking
Recon 3	Coronal MPR	L-spine = 3x3 / T-spine = 2x2	Bone	COR	PACS
Recon 3	Sagittal MPR	L-spine = 3x3 / T-spine = 2x2	Bone	SAG	PACS