Orbits

Siemens Flash

Application Examples: proptosis, swelling, foreign body, fracture

Oral Contrast	No
IV Contrast / Volume	*If requested, 80 mL Omnipaque 300
Injection Rate	*2.5 mL /sec

Technical Factors

Care Bolus ROI Location / HU	N/A
Monitoring Delay	N/A
Cycle Time	N/A
Scan Delay	*60 seconds if contrast given
Breath Hold	N/A

Scan Type	Spiral
Detector Collimator	Acq 128 x 0.6 mm
X-Care	Off
Care kV	Off / 120 kV
Care Dose 4D	Off / 150 mAs
Rotation Time	1.0
Pitch	0.8
Typical CTDIvol	21.14 mGy ± 50%

Topogram: Lateral, 256 mm

Orbits	Recon Type	Width / Increment	Algorithm	Safire	Window	FoV	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	J40s	2	Base Orbita	170	AXIAL STND	PACS	None
Recon 2	Axial	3 x 3	J70h	2	BONE	170	AXIAL BONE	PACS	None
Recon 3	3D:COR	2 x 2	J40s	2	Base Orbita	170	COR STND	PACS	Coronal MPR
Recon 4	3D:COR	2 x 2	J70h	2	BONE	170	COR BONE	PACS	Coronal MPR
Recon 5	3D:SAG	2 x 2	J40s	2	Base Orbita	170	SAG STND	PACS	Sagittal MPR
Recon 6	3D:SAG	2 x 2	J70h	2	BONE	170	SAG BONE	PACS	Sagittal MPR
Recon 7	Axial	0.6 x 0.6	J30s	2	Base Orbita	170	AXIAL 0.6 STND	TeraRecon	None

Patient Position: Position so IOML is perpendicular to the table and head is in a symmetrical position (no rotation or tilt).

Patient Instructions: Instruct patient to keep eyelids gently closed.

Scan Range: Scan above orbital roof through orbital floor.
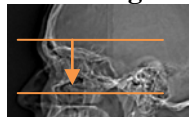
Recons and Reformations: Coronal and sagittal MPRs made in examination card using raw data in bone and soft tissue kernels. If unable to place patient in ideal position, make axial MPRs parallel to optic nerve in bone and soft tissue kernels. If performed with and without IV contrast, create ALL reformats on both data sets—unenhanced and enhanced series.

Recon 8	3D:Axial	2 x 2	J70h	2	BONE	170	AXIAL MPR BONE	PACS	Axial MPR
Recon 9	3D:Axial	2 x 2	J40s	2	Base Orbita	170	AXIAL MPR STND	PACS	Axial MPR