## **SC Joints**

## Siemens Flash

Application Examples: dislocation, fracture				
Oral Contrast	No			
IV Contrast / Volume	No			

Breath Hold	Inspiration
D104111 1101G	mophation

## Technical Factors

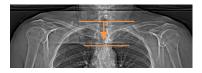
Detector Collimator	Acq 128 x 0.6 mm
Care kV	On / 120 kV
Care Dose 4D	On / 200 mAs
Rotation Time (seconds)	1.0
Pitch	0.6
Typical CTDIvol	13.52 mGy ± 50%

Topogram: Lateral and AP, 256 mm

Shoulder	Recon Type	Width / Increment	Algorithm	Safire	Window	FoV	<b>Series Description</b>	Networking	Post Processing
Recon 1	Axial	2 x 2	I70h	2	Shoulder	150	AXIAL	PACS	None
Recon 2	3D:COR	2 x 2	I70h	2	Shoulder	-	COR	PACS	Coronal MPR
Recon 3	3D:SAG	2 x 2	I70h	2	Shoulder	-	SAG	PACS	Sagittal MPR
Recon 4	3D:AXIAL	2 x 2	I70h	2	Shoulder	150	OBL AXIAL	PACS	Oblique Axial MPR
Recon 5	Axial	0.6 x 0.6	I26s	2	Shoulder	150	AXIAL 0.6 STND	TeraRecon	None

Patient Position: Patient lying in supine position, head first, shoulders square.

Scan Range: Entire sternoclavicular joints.

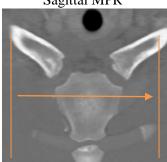


Recons and Reformations: Align all three viewports in orthogonal planes to SC joints before planning coronal, sagittal and oblique axial MPRs as depicted below.

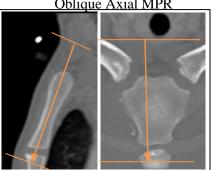




Sagittal MPR



Oblique Axial MPR



**3D:** Upon request—see post processing protocol.