Child Lower Extremity   Siemens go.All

Application Examples: fracture

Technical Factors

Detector Collimator	Acq 32 x 0.7mm
kV / mAs / Rotation Time	110 kV / 80 mAs / 0.5 seconds
Care Dose 4D	On
Pitch	1.0
Typical CTDIvol	

Topogram: Lateral, 128 mm

Extremity	Recon Type	Width / Increment	Kernel	Window	FOV	Series Description	Networking	Post Processing
Recon 1	Axial	2 x 2	Br60	Baby Extremity	-	AXIAL	PACS	-
Recon 2	3D:COR	2 x 2	Br60	Baby Extremity	-	COR	PACS	COR MPR
Recon 3	3D:SAG	2 x 2	Br60	Baby Extremity	-	SAG	PACS	SAG MPR
Recon 4	Axial	0.6 x 0.3	Br36	Baby Extremity	-	AXIAL 0.6 STND	TeraRecon	-

Notes: Most lower extremities are done with this protocol. Any extremity that is not in the iso-center of the scan field must be done using this protocol. Load images into the 3D recon card. Do the required reformats, label and send to PACS. Refer to the Orthopedic Protocols for more detailed instructions. If 3-D (SSD) ordered, recon B20s very smooth. If there is hardware, increase technique to 140kv and 220mAs