Gundersen Health System

Angio Upper Extremity

Siemens go.All

Application Examples: cold finger

Oral Contrast	No			
IV Contrast / Volume / Injection Rate	Omnipaque 350 / 100 mL / 5 mL/sec			
MedRad Protocol	Angio Upper Extremity			

Technical Factors							
Care Bolus ROI Location / HU	Aortic Arch / 100						
Monitoring Delay	10 seconds						
Cycle Time	1 second						
Scan Delay	6 seconds						
Patient Instructions	Do not swallow						

Scan Type	Spiral		
Detector Collimator	Acq 32 x 0.7 mm		
Care kV	On / 100 kV		
Care Dose 4D	On / 80 mAs		
Rotation Time (seconds)	0.5		
Pitch	0.6		
Typical CTDIvol	$5.38 \text{ mGy} \pm 50\%$		

Topogram: Lateral and AP, 768 mm

CTA Upper Extremity	Recon Type	Width / Inc	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	1 x 1	Bv36	2	Angio	AXIAL	PACS	None
Recon 2	3D:COR	1.5 x 1.5	Bv40	2	Angio	COR MIP	PACS	Coronal MIP
Recon 3	3D:SAG	1.5 x 1.5	Bv40	2	Angio	SAG MIP	PACS	Sagittal MIP
Recon 4	Axial	0.6 x 0.6	Bv36	2	Angio	AXIAL 0.6 STND	TR & PACS	None

IV Placement: preferably 18 gauge in antecubital (AC) fossa of unaffected arm.

Patient Preparation: Have patient remove any detachable dental work.

Patient Position: Patient lying supine with unaffected arm at side. Tuck chin slightly and position head so the sella is parallel to the gantry in a symmetrical position (no rotation or tilt) with neck in neutral position. Put affected arm above head as straight as possible.

Scan Range: Include aortic arch through fingers.



Scan Instructions: Place pre-monitoring ROI in aortic arch. **Recons and Reformations:** Make coronal and sagittal 1x1 MIPs.