## Gundersen Health System

## Venography AP with Legs

Application Examples: stenosis or occlusion of deep veins in the pelvis and/or legs, pelvic congestion

Oral Contrast	None					
IV Contrast	Omnipaque 350	Injection duration of 40 seconds				
Weight	Volume	Injection Rate				
< 121 lbs.	100mL	2.5 mL/sec				
122-143 lbs	120mL	3.0 mL/sec				
144-165 lbs.	135mL	3.4 mL/sec				
166-187 lbs.	150mL	3.8 mL/sec				
188-209 lbs.	175mL	4.4 mL/sec				
>209 lbs.	200mL	5 mL/sec				

Technical Factors				
Scan Type	Spiral			
Detector Collimator	Acq 32 x 0.7 mm			
Care kV	Semi / 100kV			
Care Dose 4D	On / 180 mAs			
Rotation Time (seconds)	0.5			
Pitch	0.8			
Scan Delay for AP	110 seconds			
Scan Delay for Legs	70 seconds			
Breath Hold	Inspiration			
Typical CTDIvol	$12.00 \text{ mGy} \pm 50\%$			

Topogram: Lateral 512 mm and AP, 1970 mm

Venography AP	<b>Recon</b> Type	Width/Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL	PACS	None
Recon 2	3D:COR	3 x 3	Br36	2	Abdomen	COR	PACS	Coronal MPR
Recon 3	3D:SAG	3 x 3	Br36	2	Abdomen	SAG	PACS	Sagittal MPR
Recon 4	Axial	0.6 x 0.6	Br36	2	Abdomen	AXIAL 0.6 STND	TR & PACS	None

Venography Legs	<b>Recon Type</b>	Width/Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL	PACS	None
Recon 2	3D:COR	2 x 2	Br36	2	Abdomen	RUN OFFS COR	PACS	Coronal MPR
Recon 3	3D:SAG	2 x 2	Br36	2	Abdomen	RUN OFFS SAG	PACS	Sagittal MPR
Recon 4	Axial	0.6 x 0.6	Br36	2	Abdomen	AXIAL 0.6 STND	TR & PACS	None

Injector- Pick the Enterography protocol and adjust according to the above weight chart.

**IV Placement:**  $\geq$  20 gauge, *preferably* in antecubital (AC) fossa.

**Patient Position:** Patient lying supine feet first with arms comfortably above head and legs extended flat on table (no cushions or wedges under legs or feet). Position legs as close together as possible in their neutral position.

**Scan Instructions: Must use 100 kV.** Increase mAs as needed to make CTDI the same as it would be for an abdominal CT at 120 kV. DFoV and x-y coordinates should be identical for both venography volumes.

Scan Range: The abdomen is scanned diaphragm through SP. The legs are scanned just above SP to ankles.

Recons and Reformations: FoV to fit body contour. Make coronal and sagittal MPRs of abdomen and legs.

3D: None