

Prescription for Radiology

Date	
From [Physician Name]:	
For [Patient Name]:	

Anatomy:

- Abdomen.** The preferred scan range is from 2 cm above the celiac artery origin to the femoral artery bifurcation.
- Thoracic pre-op.** The preferred scan range is 3 cm superior to the top of the aortic arch to the femoral artery bifurcation.
- Thoracic post-op.** The preferred scan range is 3 cm superior to the top of the aortic arch to 1 cm inferior to the celiac artery origin.

Please process this patient with the suggested CT scan protocols in the next page

Suggested CT Scan Protocols

- Data must be uncompressed DICOM
- 2 mm slice spacing (no greater than 3 mm)
- Patient motion should be avoided during scan. If possible, avoid scanning non-patient objects in field of view. Do not change patient position, table height, or field of view during scan.

	Abdominal Aorta	Thoracic Aorta
Scan Mode	Helical	Helical
Scan Parameters	110-140kVp, Auto mAs or 170-400 mA scan time of 0.5 sec	110-140kVp, Auto mAs or 170-400 mA scan time of 0.5 sec
Slice Thickness	0.625 - 2 mm	0.625 - 2 mm
Slice Interval	0.625 - 2 mm	0.625 - 2 mm
Pitch	0.984:1	0.984:1
Superior Extent AAA	2 cm above celiac artery origin	3 cm above aortic arch to include head and neck vessel origins
Inferior Extent AAA	<i>Pre-op:</i> Lesser trochanter of femurs to include femoral bifurcations <i>Post-op:</i> At least 2 cm distal to the lowest hypogastric artery origin	<i>Pre-Op:</i> Lesser trochanter of femurs to include femoral bifurcations <i>Post-op:</i> 1-2 cm distal to the celiac artery origin
Contrast	Standard per Radiology Department	Standard per Radiology Department
Volume	80ml contrast with 40ml saline flush or Standard Contrast Volume with Saline flush per Radiology Department	80ml contrast with 40ml saline flush or Standard Contrast Volume with Saline flush per Radiology Department
Rate	4 ml/sec	4 ml/sec
Scan Delay	ROI – threshold 90-100 HU in aorta	ROI – threshold 90-100 HU in aorta
Field of View	Large Body	Large Body
Reconstruction Algorithm	Standard	Standard

Instructions:

- Fax completed order form to 603-298-5055.
- Send CT data to Astute Imaging at: 12 Commerce Avenue | West Lebanon, NH 03784
- *Questions*
 - *Please call: Customer Service 603-298-5509*
 - *or email: support@astuteimaging.com*