CT Chest Esophogram
GO ALL

Indications	Concern for esophageal perforation				
Diagnostic Task	Detect perforation of esophagus				
Scan mode	Helical-inspiration				
Position/Landmark	Head first-Supine 1cm to shoulders-arms above head				
Topogram	AP 110kv 15mA				
kVp/Reference mass	130kV 54Eff mAs/Care Dose ON				
Rotation time/pitch	0.33/0.8				
Detector Configuration	32x0.7				
Table Speed/Increment	17.92				
Dose reduction	CareDose 4D				
Allowed CTDI ranges*	7mGy-50mGy				
XR29 Dose Notification value	50mGy				
Helical Set	recon	body part	thickness spacing	kernel	window	recon destination
	1	chest	2mmx 2mm	Br40	mediastinum	pacs
	2	lung	1mmx 1mm	Br36	lung	pacs
	3	Super D	1mmx.8mm	Br36	mediastinum	pacs
	4	Lung Mip	10mmx2mm	Br38smooth	lung	pacs
	5	sag chest	2mmx2mm	Br40	mediastinum	pacs
	6	cor chest	2mmx2mm	Br40	mediastinum	pacs
Scan Start/end location	C4/5					
	L2/3					
DFOV	35cm/decrease for lung recons decrease appropriately					
	Immediately before scout, pt drinks all contrast but one swallow					
	immediately after scout with pt lying down 1 swallow of contrast by straw					
	Approximate Values for CTDIvol					
	Patient size	weight(kg)	weight(lbs)	CTDIvol(mGy)		
	SMALL	50-70	110-155	4-10		
	AVERAGE	70-90	155-200	8-16		
	LARGE	90-120	200-265	14-22		

NOTE

*The AAPM recommended NEMA XR29 Dose Notification Value for an adult torso is 50mGy. Dose Notification levels less than the AAPM recommended can be set. The maximum CTDI vol should match the dose notification value. Exams with CTDI vol values less than the minimum allowed range should not be performed unless approved by a radiologist.

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