ROUTINE NECK GO ALL

| Indications | Sore throat, neck mass, difficulty swallowing, hoarseness | | | | |
|------------------------------|--|---------------------------------------|----------------------|----------------------------------|----------------|
| Diagnostic Task | Detect lymphoma, cancer, neck abscess, lymphoma, vocal cord paralysis | | | | |
| Scan Mode | Helical | | | | |
| Position/Landmark | Head first supine 1cm superior to skull vertex-Craniocaudal | | | | |
| Topogram | Lat 130kV 30mA | | | | |
| kVp/Reference mass | 130kv 112mAs | | | | |
| Rotation time/pitch | 1.0/0.8 | | | | |
| Detector Configuration | 32x0.7 | | | | |
| Table Speed/Increment | 17.92 | | | | |
| Dose reduction | Care Dose 4D | | | | |
| Allowed CTDI ranges* | 30mGy-80mGy | | | | |
| XR29 Dose Notification value | 80mGy | | | | |
| PRE INJECT | 40ml at 1.5cc/sec wait 90sec | | | | |
| Helical Set | body | thickness | | | recon |
| 60ML at 2.5cc/sec | recon part | spacing | kernel | window | destination |
| 30second delay | 1 neck | 2mmx 2mm | Br40 | mediastinum | pacs |
| | 2 sag neck | 2mmx2mm | Br40 | mediastinum | pacs |
| | 3 cor neck | 2mmx2mm | Br40 | mediastinum | pacs |
| | | | | | |
| Scan Start/end location | ROUTINE / VOICE CHANGE/ VOCAL CORD PARALYSIS top of orbital roof / top of orbital roof sternoclavicular junction / down to the carina | | | | |
| | | | | | |
| | | | | | |
| DFOV | 20cm-include area of interest | | | | |
| | do not clip nose | | | | |
| IV contrast volume/type | 40ml at 1.5cc/sec wait 90sec | | | | |
| Scan delay | 60ml at 2.5ml/sec at a 30sec delay | | | | |
| | note: Please place a BB on any palpable mass | | | | |
| Notes | The Diagnostic Deference Description | (CTDL vol.) in 75-20 (1) in 15-20 (1) | 16am CTDI =h ==t===\ | The peoplful limit (ACD and Man- | nington state) |
| Note: | The Diagnostic Reference Dose (CTDI vol) is 75mGy(with 16cm CTDI phantom). The pass/fail limit (ACR and Washington state) is 80mGy. Most routine head scans on modern scanners have CTDIvol ranges between 40 and 60mGy. | | | | |
| | *The AAPM recommended NEXA XR29 Dose Notification Value for an adult head is 80mGy. The maximum CTDIvol 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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