

Abdomen for ACUTE GI Bleed

Siemens go.All

Application Examples: acute GI bleed

Oral Contrast	None
IV Contrast / Volume	125 ml Omnipaque 350
Injection Rate	5.0 ml/sec

Technical Factors

Care Bolus ROI Location / HU	Descending Aorta (2cm above diaphragm) / 120
Monitoring Delay	10 seconds
Cycle Time	1. second
Scan Delay	6 seconds
Breath Hold	Stop Breathing

Detector Collimator	Acq. 32 X 0.7 mm
Care kV	On / 120 kV
Care Dose 4D	On / 110 mAs
Rotation Time	0.5
Pitch (seconds)	0.8
Typical CTDIvol	10.34 mGy ± 50%

Topogram: Lateral & AP, 512 mm

Non-Contrast	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	2 x 1	Br40	2	Abdomen	AXIAL NON CONTRAST	PACS	None

Arterial	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	2 x 1	Br40	2	Abdomen	AXIAL ARTERIAL	PACS	None
Recon 2	Axial	0.6 x 0.6	Br40	2	Abdomen	AXIAL ARTERIAL 0.6 STND	TeraRecon	None

70 seconds	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	2 x 1	Br40	2	Abdomen	AXIAL 70 SEC	PACS	None
Recon 2	3D:COR	2 x 1	Br40	2	Angio	COR MIP	PACS	Coronal MIP
Recon 3	3D:SAG	3 x 3	Br40	2	Angio	SAG MIP	PACS	Sagittal MIP

This protocol is particularly used for evaluating an acute GI bleed and uses three phases.

Oral Contrast: None.

Patient Position: Patient lying supine with arms above head.

Scan Range: Scan diaphragm to the symphysis pubis during each acquisition.

Recons and Reformations: Adjust FoV to fit body contour.