Abdomen Renal Calculi

Siemens 16 Slice

Application Examples: flank pain, hematuria, stone

Oral Contrast	No
IV Contrast / Volume	No

Breath Hold	Inspiration

Technical Factors

Scan Type	Spiral
Detector Collimator	Acq 1.6 x 1.2 mm
kV / mAs / Rotation Time **BMI > 30**	**130 kV** / 155 mAs / 0.6 seconds
kV / mAs / Rotation Time **BMI < 30**	**110 kV** / 155 mAs / 0.6 seconds
Care Dose 4D	On
Pitch	0.8
Typical CTDIvol **BMI > 30**	17.26 mGy
Typical CTDIvol **BMI < 30**	11.10 mGy

Topogram: Lateral & AP, 512 mm

Abdomen	**Width / Increment**	**Kernel**	**Window**	**Series Description**	**Networking**
Recon 1	3 x 3	B30s	Abdomen	AXIAL	PACS
Recon 2	1.5 x 0.7	B30s	Abdomen	AXIAL 1.5 x 0.7 STND	MPR / TeraRecon

This protocol is used for the evaluation of urinary tract stones.

Patient Position: Patient lying supine with arms above head.

Scan Instructions: Set kV according to patient BMI.

Scan Range: Scan from top of the liver through bladder.

Recons: Adjust FoV to fit body contour.

Reformations: Post processing done in 3D card.

Series: Abdomen	**Reformat Type**	**Width / Increment**	**Window**	**Series Description**	**Networking**
Recon 2	Coronal MPR	3 x 3	Abdomen	COR	PACS
Recon 2	Sagittal MPR	3 x 3	Abdomen	SAG	PACS

Epic documentation: Enter patient responses to the following four questions in study notes using **.ctrc**: (1) history of stones (2) if hematuria present (3) if still has appendix (4) what side is pain on.

Protocol Variation: **Renal Calculi Follow Up from Urology Only.**

This protocol is *only* to be used on Urology patients with history of follow up urinary calculi. The goal is to give half the dose from patient's previous renal calculi study.

Scan Instructions: First obtain topograms. Next, with Care Dose still ON, slide your scan range through abdomen noting the effective mAs the computer prescribes—this can be found on Routine card. Estimate the average mA value and then cut in half. Use this value as your new effective mAs and turn Care Dose OFF.