Abdomen Adrenal
Siemens go.All

Application Examples: adrenal mass

Oral Contrast	No
IV Contrast / Volume	Omnipaque 300 / P3T
Injection Rate	P3T

Technical Factors

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

Venous	
Care Bolus ROI Location / HU	N/A
Monitoring Delay	N/A
Cycle Time	N/A
Scan Delay	60 seconds
Breath Hold	Inspiration
Typical CTDIvol	10.34 mGy ± 50%

Delayed	
Scan Delay	15 minutes
Breath Hold	Inspiration
Typical CTDIvol	10.34 mGy ± 50%

Topogram: Lateral & AP, 512 mm

Unenhanced	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL WITHOUT	PACS	None

Venous	Recon Type	Width / Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL VENOUS	PACS	None
Recon 2	3D:COR	3 x 3	Br40	2	Abdomen	COR	PACS	Coronal MPR
Recon 3	3D:SAG	3 x 3	Br40	2	Abdomen	SAG	PACS	Sagittal MPR

Delayed	Recon Type	Width Increment	Algorithm	Safire	Window	Series Description	Networking	Post Processing
Recon 1	Axial	3 x 3	Br40	2	Abdomen	AXIAL DELAYED	PACS	None

This protocol is used to evaluate adrenal glands.

Patient Position: Patient lying supine with arms above head.

Scan Instructions: Scan non-contrast through adrenal glands. Always check unenhanced images with Radiologist before continuing exam. If IV contrast is ordered, scan through the adrenals at 60 seconds and 15 minutes after the start of the injection.

Recons and Reformations: Adjust FoV to fit body contour.