Temporal Bones UHR

Siemens go.All

Application Examples: cholesteatoma

Oral Contrast	No
IV Contrast / Volume	No

Technical Factors

Care Bolus ROI Location / HU	N/A
Monitoring Delay	N/A
Cycle Time	N/A
Scan Delay	N/A
Breath Hold	N/A

Detector Collimator	Acq 32 x 0.7mm
Care kV	Semi / 120 kV
Care Dose 4D	Off / 180 mAs
Safire	Off
Rotation Time	1.0
Pitch	0.85
Typical CTDIvol	

Topogram: PA and Lateral, 256 mm

Temp Bones	Recon Type	Width / Increment	Algorithm	Window	FoV	Series Description	Networking	Post Processing
Recon 1	Axial	0.6 x 0.3	Hr68	Inner Ear	*200	AXIAL RT	PACS	None
Recon 2	Axial	0.6 x 0.3	Hr68	Inner Ear	100	AXIAL LT	PACS	None
Recon 3	3D:COR	0.8 x 0.5	Hr68	Inner Ear	100	COR RT	PACS	Coronal MPR
Recon 4	3D:SAG	0.8 x 0.5	Hr68	Inner Ear	100	SAG RT	PACS	Sagittal MPR
Recon 5	3D:COR	0.8 x 0.5	Hr68	Inner Ear	100	COR LT	PACS	Coronal MPR
Recon 6	3D:SAG	0.8 x 0.5	Hr68	Inner Ear	100	SAG LT	PACS	Sagittal MPR

Patient Position: Position head with chin tucked and head in a symmetrical position (no rotation or tilt). Petrous ridges should be in the lower third of the orbits on PA topogram. Repeat PA topogram until positioning is accurate and before furthering with scan.

Scan Range: Top of petrous ridges through mastoid process including all mastoid air cells.

Scan Instructions: *First recon is initially set at 200 FoV to help plan recons. After acquiring data, change Recon 1 to 100 FoV and center on right temporal bone.

Recons and Reformations: Recons are pre-labeled on series description. Always start with the right side, and then reconstruct left side. When making coronal and sagittal MPRs in the 4D workplace, it is important to choose the right or left planning base corresponding with the correct side. Check labeling and keep FoV consistent at 100. If for dehiscence, include Oblique MPR's.

Note: Smooth kernel recons and reformats are *only* required if enhanced. Enhancement application examples include Pulsatile tinnitus, glomus tumor, or aberrant carotid/jugular. Technique should be increased when using IV contrast.