 University Health™	Policy #: Rad Proc 13.13.17
SUBJECT: CT Chest High Resolution (Dr. P) 5.17	Effective: 10/2013 Reviewed: 03/07/2017
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Purpose: To provide computed tomography staff with the required protocol for performing CT High Resolution Chest (DR. P).

Scope: All adult patients 18 years and older.

Clinical Indication: Interstitial disease, Bronchiectasis

Patient Preparation: Give clear breathing instructions

Orientation: Feet first

Breathing: Inspiration

Oral Contrast: None

IV Contrast per Weight: None


Coverage: Lung apices through lung bases

Anatomic Reference: Sternal notch

Scan Delay: None

Group 1: Supine Inspiration– Lung apices to lung bases

Scan Mode	Thickness Speed Pitch	Table Interval	SFOV	kVp	Auto mA/ Noise Index	Prep Time (sec)	Recon Type
LS 16 1 sec Axial	1.25 1i	5	Large	120	240	No	Standard Bone
VCT 1 sec Axial	1.25 1i	5	Large	120	240	No	Standard Bone
AS 64 1 sec Axial	1.0	5	360	120	250	No	Standard Bone

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Group 2 Supine Expiration– Lung apices to lung bases

Scan Mode	Thickness Speed Pitch	Table Interval	SFOV	kVp	mA	Prep Time (sec)	Recon Type
16 1.0 sec Axial	1.25 li	5	Large	120	240	N	Standard Bone
VCT 1.0 sec Axial	1.25 li	5	Large	120	240	N	Standard Bone
AS 64 1.0 sec Axial	1.0	5	360	120	250	N	Standard Bone

Group 3: ** OPTIONAL* Prone Inspiration– Lung apices to lung bases**

Scan Mode	Thickness Speed Pitch	Table Interval	SFOV	kVp	mA	Prep Time (sec)	Recon Type
16 1.0 sec Axial	1.25 li	5	Large	120	240	N	Standard Bone
VCT 1.0 sec Axial	1.25 li	5	Large	120	240	N	Standard Bone
AS 64 1.0 sec Axial	1.0	5	360	120	250	N	Standard Bone

Algorithm: Recon 1 & 2 Standard and bone

Reformation: None

Network: Recon 1 (5mm) to PACS. Recon 2 (1.25) auto transmit to AWSERV