Ochsner LSU Health SHREVEPORT	Policy #: Rad Proc 13.16.6
SUBJECT: Whole Body Low-Dose Computed Tomography 8.5	Effective: 11/2018 Reviewed: 05/2019
APPROVED BY: Body Imaging Medical Director	Page 1 of 2

Purpose: To provide computed tomography staff with the required protocol for performing Whole Body Low-Dose Computed Tomography (WBLDCT)

Scope: All adult patients 18 years and older.

Clinical Indication: Survey for Osteolytic Lesions Multiple Myeloma Patients

Patient Preparation: None

Orientation: Head first; arms down by side

Breathing: Inspiration Oral Contrast: None

IV Contrast per Weight: None

Coverage: Head, Neck, Chest (include Humerus, Abdomen Pelvis, Proximal Femur

Anatomic Reference: Sternal notch

Scan Delay: N/A

Group 1: Brain and Cervical Spine- Vertex of head to Arch

Scan Mode	Thickness Speed Pitch	Table Interval	SFOV	kVp	Auto mA/ Noise Index	Prep Time (sec)	Recon Type
LS 16 0.8 sec Helical Full	1.25 9.37 0.938:1	0.8	Large	120	90	No	Standard Bone
VCT 0.8 sec Helical Full							
AS 64 0.5 sec Helical							

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Group 2: Chest (include Humerus), Abdomen, pelvis (include proximal Femur) Lung Apex to Proximal Femur

Scan Mode	Thickness Speed Pitch	Table Interval	SFOV	kVp	Auto mA/ Noise Index	Prep Time (sec)	Recon Type
LS 16 0.8 sec Helical Full	1.25 9.37 0.938:1	0.8	Large	120	90	No	Standard Bone
VCT 0.8 sec Helical Full							
AS 64 0.5 sec Helical							

Comments: Manual technique 90 mAs. Scout from top of head to proximal femur; Include

Humerus with chest

Algorithm: Standard and bone. Show recon 1 Standard 2 Bone 3 Standard

Reformat: Sagittal and Coronals on standard and bone

Network: Recon 1 and 2 to PACS. Recon Exam auto transmit AWSERV