### **CTA chest/abdomen/pelvis: aortic dissection**

application aortic dissection, aortitis, postoperative aorta, aortic aneurysm

landmarks apices through pubic symphysis

oral none

IV 100 cc Omnipaque 300, 75 cc Omnipaque 350, or equivalent agent

rate 4-5 cc/sec followed by 75 cc saline chaser bolus

delay Vendor-specific timing software with ROI placed on mid descending thoracic aorta using an appropriate threshold, scanner-dependent

image order axial: cranial → caudal

coronal: anterior → posterior

sagittal: right → left

comments

Pre-contrast: axial chest 2.5 x 2.5 mm (standard algorithm)

axial chest 1.25 x 1.25 mm (lung algorithm)

Arterial: axial chest, abdomen, pelvis 2.5 x 2.5 mm (standard algorithm)

sagittal and coronal 3 x 3 mm MPR (standard algorithm)

coronal 7 x 4 mm MIP\*\*\*

**\*\*\*please include the 7x4 mm MIP series**

obtain images during suspended inspiration

**patient’s arms up. If unable to raise arms, please document reason**

approved, body subcommittee 6/11/24

### **CTA Bilateral Lower Extremity Runoff**

application Peripheral arterial disease (PAD), trauma, embolism

landmarks liver dome through feet

oral none

IV <200lb: 100 cc Omnipaque 350, Isovue 370, or equivalent agent

 >=200 lb: 125 cc Omnipaque 350, Isovue 370, or equivalent agent

rate 4-5 cc/sec followed by 75 cc saline chaser bolus (20g IV or larger). Imaging performed at end-expiration

delay Vendor-specific timing software with ROI placed in the abdominal aorta at the celiac axis using an appropriate threshold, scanner-dependent

image order axial: cranial → caudal

coronal: anterior → posterior

sagittal: right → left

comments

Pre-contrast: none, unless requested

Arterial: axial abdomen, pelvis, & lower extremities 2.5 x 2.5 mm or less (standard algorithm)

sagittal and coronal 3 x 3 mm MPR (standard algorithm)

sagittal and coronal 7 x 2 mm MIP abdomen/Pelvis (standard algorithm)

sagittal and coronal 7 x 2 mm MIP thighs (standard algorithm)

sagittal and coronal 7 x 2 mm MIP legs (standard algorithm)

3D MIP spin of entire scan (horizontal) 0.5 mm x 360 degrees

3D VRT tumble of the entire scan (360 degrees horizontal)

3D VRT spin of the entire scan (360 degrees horizontal)

**\*\*\*patient’s arms up. If unable to raise arms, please document reason\*\*\***