

Synergy CTA Head and Neck Protocols

Application: Ischemic stroke, Concern for dissection/ vascular injury

Oral contrast: none

IV contrast: Non-ionic contrast such as Omnipaque 350 or Isovue 370

Rate 4-5 cc/sec, 20 gauge antecubital IV

Delay: Bolus tracking

Images: Single phase • Arterial phase – Aortic arch through vertex ◊ Reformat arterial phase images to 1-1.5 mm with 50% overlap •

Comments ≥ 64 detectors are preferred for CTA

Submit to PACS:

	Label	Reformat	Slice Thickness (mm)	Space (mm)	FOV	Kernel
1	Axial - Head/Neck CTA	Avg	1.5	0.8	Aortic arch to vertex	Soft Tissue / Standard
2	Axial – Head MIP	MIP	20	1	Skull base to vertex	Soft Tissue / Standard
3	Cor – Head MIP	MIP	20	1	Skin to skin	Soft Tissue / Standard
4	Sag – Head MIP	MIP	20	1	Skin to skin	Soft Tissue / Standard
5	Cor – Head ST	Avg	1.5	1.5	Skin to skin	Soft Tissue / Standard
6	Sag - Head ST	Avg	1.5	1.5	Skin to skin	Soft Tissue / Standard
7	Cor – Neck MIP	MIP	5	1	Aortic arch to frontal sinus	Soft Tissue / Standard
8	Sag – Neck MIP	MIP	5	1	Skin to skin	Soft Tissue / Standard

CTA Neck

Application: Arterial disease/ stenosis, Concern for dissection or vascular injury

Oral contrast: none

IV contrast: Non-ionic contrast such as Omnipaque 350 or Isovue 370

Rate 4-5 cc/sec, 20 gauge antecubital IV

Delay: Bolus tracking

Images: Single phase • Arterial phase – Aortic arch through frontal sinus ◊ Reformat arterial phase images to 1-1.5 mm with 50% overlap •

Comments ≥ 64 detectors are preferred for CTA

Submit to PACS:

	Label	Reformat	Slice Thickness (mm)	Space (mm)	FOV	Kernel
1	Axial - Neck CTA	Avg	1.5	0.8	Aortic arch to frontal sinus	Soft Tissue / Standard
2	Axial – Neck MIP	MIP	5	1	Aortic arch to frontal sinus	Soft Tissue / Standard
7	Cor – Neck MIP	MIP	5	1	Skin to skin	Soft Tissue / Standard
8	Sag – Neck MIP	MIP	5	1	Skin to skin	Soft Tissue / Standard