

CT chest/abdomen/pelvis: trauma protocol

application	trauma
landmarks	apices through pubic symphysis
acquisition	helical
oral	none
IV	100 cc Omnipaque 300, 75 cc Omnipaque 350, or equivalent agent
rate	4 cc/sec followed by 75 cc saline chaser bolus

image order

axial: cranial → caudal

coronal: anterior → posterior

sagittal: right → left

****Comments:** Remove leads/monitors away from area, when possible. Remove bra, if possible.

Scan parameters:

Arterial & Venous: kVp 120 / Ref mAs 300

Delayed: kVp 120 / Ref mAs 100

Initial scan: **Arterial** (lung apex to iliac crest) - 2.5 x 2.5 mm; scan immediately after trigger (auto trigger 100 HU).

Venous (Diaphragm through symphysis) - 70-sec scan delay (standard algorithm).

Delayed scan (Diaphragm through symphysis) - 300-sec scan delay to evaluate for renal collecting system/bladder injury

Reformats (Arterial & Venous):

axial abdomen, pelvis 2.5 x 2.5 mm (standard algorithm)

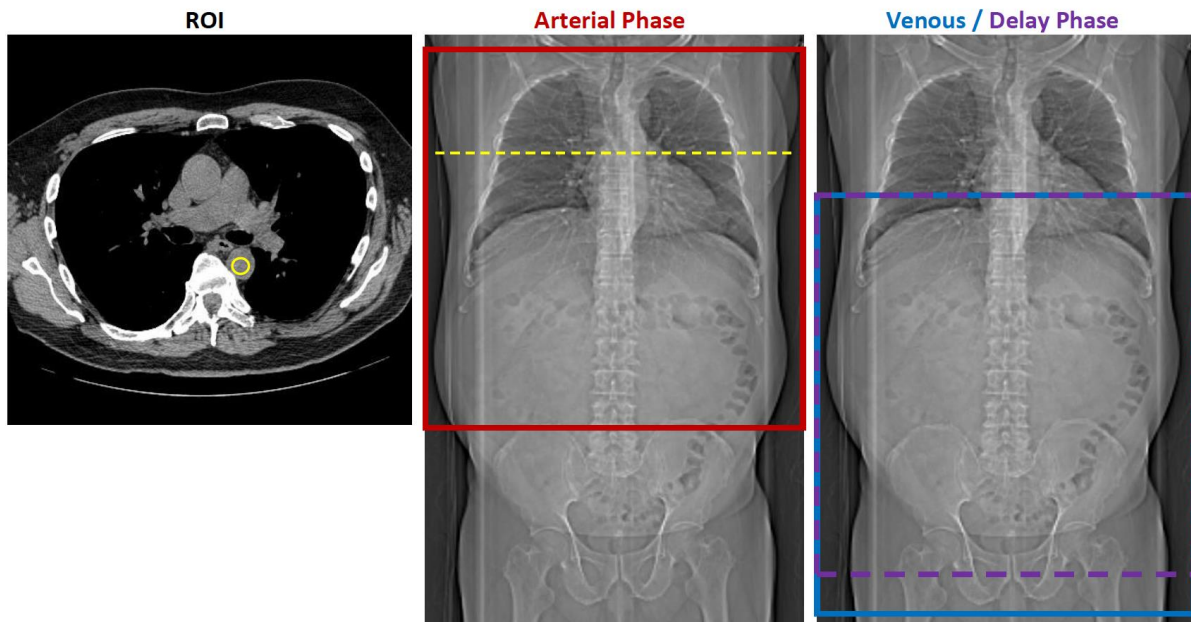
sagittal and coronal 3 x 3 mm MPR (standard algorithm)

sagittal 3 x 3 mm MPR (bone algorithm)

Reformats (Delayed)

axial 3 x 3 mm (standard algorithm)

Notes: obtain images during suspended inspiration, if feasible per patient's condition; **Arms up, if feasible and if patient condition allows.**



approved body committee 6-10-24. (rev. 8-11-24)