
chest: HRCT

application	interstitial lung disease
landmarks	apices through adrenal glands

oral	—
IV	—
rate	—
delay	—

image order	axial: cranial → caudal coronal: anterior → posterior sagittal: right → left
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comments	window w/l: 1600/-550
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Scan

Supine chest scan (to be done first):
0.5 mm helical (pitch: 0.7)

High Resolution Scan (to follow chest scan)

axial supine inspiration: 1 mm @ 10 mm intervals (**full inspiration**)
axial supine expiration: 1mm @ 10 mm intervals (**end maximal expiration**)
axial prone inspiration: 1mm @ 10 mm intervals (**full inspiration**)

Reconstructions (to be sent to pacs):

Supine chest scan:

axial 1.5x1.5mm (standard)
coronal 1.5x1.5mm (standard)
sagittal 1.5x1.5mm (standard)
axial MIP 7 x 2 mm (standard)

High Resolution Scan

axial supine inspiration: 1 mm @ 10 mm intervals (standard)
axial supine expiration: 1 mm @ 10 mm intervals (standard)
prone inspiration: 1 mm @ 10 mm intervals (standard)

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