


**CT Esophogram WO**

<b>Position/Landmark</b>	Feet first. Position at chin
<b>Scout</b>	
<b>Scan coverage</b>	Entire lungs. Mid neck to mid kidney
<b>Respiratory Phase</b>	Inspiratory
<b>Scan Type</b>	Helical
<b>PO Prep</b>	30ml Omni 300 mixed in 500ml of water. (Double the concentration of regular PO+) -Have the patient take several sips of PO+ prep prior to laying down on the table. -Pt will need to swallow more PO+ seconds before the scan starts
<b>Reason for exam</b>	The scan is used to evaluate for esophageal perforation or rupture.

Scan Settings – CT Esophogram WO			
	Siemens SOMATOM Force	Philips iCT/Ingenuity	Canon Aquilion ONE Vision
<b>kV Setting:</b>	CAREkV Ref kV= 110	120	120
<b>mA/mAs/TCM Setting:</b>	CAREdose4D QRM = 51, Dose Savings Slider at 3	DoseRight DRI = 19, Liver DRI Boost +3	SureExposure3D (SD=12.5)
<b>Iterative Reconstruction Setting:</b>	Admire Strength 3	iDose 2	AIDR 3D Mild

Scan and Recon Instructions – CT Esophogram WO	
<b>1.</b>	Have the patient take several sips of PO+ prep prior to laying down on the table
<b>2.</b>	Scout – Chin to mid abdomen (Arms above head)
<b>3.</b>	Go over swallowing instructions with patient. <ul style="list-style-type: none"> <li>• Patient should take a large mouthful of contrast into their mouth. They should not swallow until given an agreed upon prompt. After swallowing the patient needs to stop breathing.</li> <li>• IE: The tech gives the patient a mouthful of contrast, tells them to swallow, and then begins the scan with 1-2s delay.</li> </ul>
<b>4.</b>	Lower neck to mid kidney (Blue box) <ul style="list-style-type: none"> <li>- Axial 3mm x 1.5mm (soft tissue)</li> <li>- Axial 3mm x 1.5mm (lung)</li> <li>- Coronal 3mm x 1.5mm (lung)</li> <li>- Sagittal 3mm x 1.5mm (bone)</li> </ul>