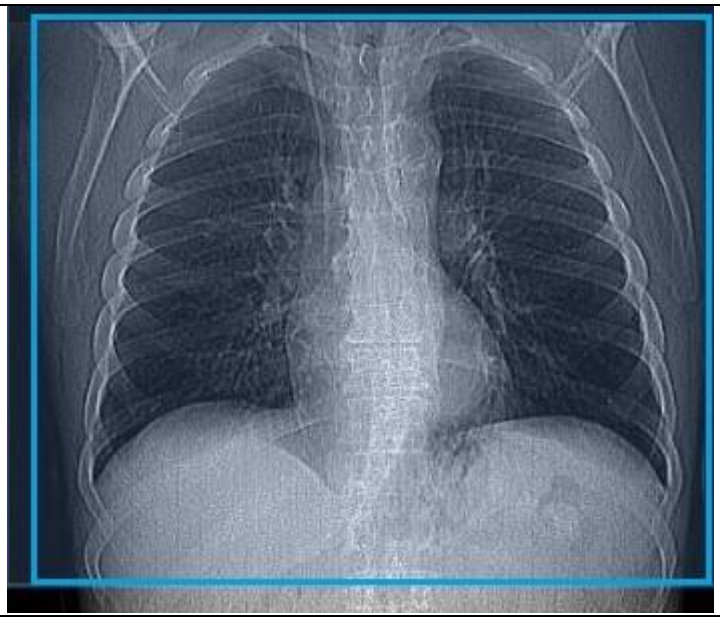
HRCT (Expiratory)

Position/Landmark	Feet first. Position at chin
Scout	
Scan coverage	Entire lungs. Apices of lungs to mid kidney
Respiratory Phase	Inspiratory and Expiratory
Scan Type	Helical
PO Prep	None
Reason for exam	The scan is used to evaluate for diffuse lung disease or small airway disease

Scan Settings - Routine CT Chest WO			
	Siemens SOMATOM Force	**Philips iCT/Ingenuity**	**Canon Aquilion ONE Vision**
kV Setting:	CAREkV Ref kV= 110	120	120
mA/mAs/TCM Setting:	CAREDose4D QRM = 51, Dose Savings Slider at 3	DoseRight DRI = 19, Liver DRI Boost +3	SureExposure3D (SD=12.5)
Iterative Reconstruction Setting:	Admire Strength 3	iDose 2	AIDR 3D Mild

Scan and Recon Instructions - Routine CT Chest WO	
1.	Scout – Above lung Apices through below Lungs (Arms above head)
2.	Inspiratory- Practice with the patient! Make sure the patient takes a deep breath in and is able to hold it for scan duration.
3.	Apices of lungs to mid kidney (Blue box) - Axial 3mm x 1.5mm (soft tissue) - Axial 1mm x 1mm (lung) - High Resolution - Coronal 3mm x 1.5mm (lung) - Coronal 3mm x 1.5mm (soft tissue) - Sagittal 3mm x 1.5mm (soft tissue)

Scan Settings - HRCT (Expiratory)			
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Scan and Recon Instructions - HRCT (Expiratory)	
1.	Use same scout as initial Chest WO
2.	Practice with the patient! A good technique is to have the patient open their mouth wide open like they are fogging up a mirror. Instruct the patient to take in a small breath, and then blow their breath out, keep blowing, keep blowing, etc. Begin the scan 2-3 seconds after starting breathing instructions
3.	Apices of lungs to mid kidney (Blue box) - Axial 1mm x 1mm (lung) - High Resolution