


**HRCT (Expiratory)**

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

<b>Scan Settings - Routine CT Chest WO</b>			
	<b>Siemens SOMATOM Force</b>	<b>Philips iCT/Ingenuity</b>	<b>Canon Aquilion ONE Vision</b>
<b>kV Setting:</b>	CAREkV Ref kV= 110	120	120
<b>mA/mAs/TCM Setting:</b>	CAREdose4D QRM = 61, 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

<b>Scan and Recon Instructions - Routine CT Chest WO</b>	
<b>1.</b>	Scout – Above lung Apices through below Lungs (Arms above head)
<b>2.</b>	Inspiratory- Practice with the patient! Make sure the patient takes a deep breath in and is able to hold it for scan duration.
<b>3.</b>	Apices of lungs to mid kidney (Blue box) <ul style="list-style-type: none"> <li>- Axial 3mm x 1.5mm (soft tissue)</li> <li>- Axial 1mm x 1mm (lung) - High Resolution</li> <li>- Coronal 3mm x 1.5mm (lung)</li> <li>- Coronal 3mm x 1.5mm (soft tissue)</li> <li>- Sagittal 3mm x 1.5mm (soft tissue)</li> </ul>

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<b>Scan and Recon Instructions - HRCT (Expiratory)</b>	
<b>1.</b>	Use same scout as initial Chest WO
<b>2.</b>	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
<b>3.</b>	Apices of lungs to mid kidney (Blue box) <ul style="list-style-type: none"> <li>- Axial 1mm x 1mm (lung) - High Resolution</li> </ul>