

CT Peritoneography

Position/Landmark	Feet first supine
Scout	Diaphragm (above the dome of the liver) to lesser trochanters 
Scan coverage	Above the dome of the liver to the lesser trochanters
Respiratory Phase	Inspiratory
Scan Type	Helical
IV access	None
PO Prep	None
Special Notes	1. Omnipaque will be added to the peritoneal dialysis fluid by pharmacy. 2. Fluid will be instilled by the patient in RN bay 3. Patient will walk around for 1 hour 4. After 1 hour patient will return for scan 5. After supine and decubitus scans tech will check with rads to see if post drainage scan is indicated (see below)
Reason for exam	evaluate peritoneal dialysis dysfunction
Protocol	Use an Abd/Pel WO protocol on scanner and use the relevant patient position during this exam

Scan Settings - CT Peritoneography (same for each position)

	Siemens SOMATOM Force	Philips iCT/Ingenuity	Canon Aquilion ONE Vision
kV Setting:	CAREkV	120	120

	Ref kV= 120		
mA/mAs/TCM Setting:	CAREdose4D QRM = 147, Dose Slider Setting at 3	DoseRight DRI = 19, Liver DRI Boost +3	SureExposure3D (SD=11.5)
Iterative Reconstruction Setting:	Admire Strength 3	iDose 3	AIDR 3D Standard

Scan and Recon Instructions - CT Peritoneography	
1.	NON-CONTRAST axial SUPINE position Perform 1 hour after dialysate instilled by the patient. Patient is to walk around in that hour. Ok to leave department to do this. If patient has limited mobility then we ask that they roll in the bed several times (check with rad if questions). - Axial 5mm x 2.5mm - Coronal 5mm x 2.5mm - Sagittal 5mm x 2.5mm
2.	NON-CONTRAST axial LEFT DECUBITUS position Perform immediately after the supine scan. Right decubitus ok if pt cannot lie on left side. - Axial 5mm x 2.5mm - Coronal 5mm x 2.5mm - Sagittal 5mm x 2.5mm
3.	NON-CONTRAST axial POST DRAINAGE supine position (optional) Perform only if indicated. The CT order may request this additional scan and if so, no need to check with rads. If not indicated please call body reading room to check the initial scans and ask if need for post drainage scan. If yes, pt to return to RN bay and be allowed time to drain, then return to CT scan. - Axial 5mm x 2.5mm - Coronal 5mm x 2.5mm - Sagittal 5mm x 2.5mm