CTA Acute GI Bleed

Position/Landmark	Feet first supine
Scout	Diaphragm (above the dome of the liver) to lesser trochanters 
Scan coverage	Diaphragm to pubis
Respiratory Phase	Inspiratory
Scan Type	Helical
IV access	18g or 20g
IV contrast	125mL OMNI 350 @ 4.0 or 5.0mL/sec
Pediatric IV contrast	2ml/kg of patient weight. OMNI 300 @ 1.0-4.0ml/sec.
Contrast Delay	Bolus Tracked: Trigger Scan from HU. - Each scanner has a different HU trigger.
Reason For Exam	Evaluate Active Bleeding/Active GI Bleed

Scan Settings – CTA Acute GI Bleed (Same for each phase unless otherwise noted)			
	Siemens SOMATOM Force (non con, arterial, delay)	**Philips iCT/Ingenuity**	**Canon Aquilion ONE Vision**
kV Setting:	CAREkV Ref kV= 120	120	120
mA/mAs/TCM Setting:	CAREDose4D QRM = 147 Dose Slider Settings at 3 for non con, 7 for other phases	DoseRight DRI = 16, Liver DRI Boost +3	SureExposure3D (SD=11.5)

Iterative Reconstruction Setting:	Admire Strength 3	iDose 3	AIDR 3D Standard

Scan and Recon Instructions - CTA Acute GI Bleed	
1.	Non-contrast - Diaphragm through pubis. (Red box) - Axial 2mm x 1mm
2.	Bolus injection: ROI in the descending aorta level of the Hepatic artery
3.	Arterial - Diaphragm through pubis (Red box) - Axial 2mm x 1mm - Coronal 2mm x 2mm - Sagittal 2mm x 2mm - Coronal MIP 10mm x 5mm - Sagittal MIP 10mm x 5mm
4.	Delay phase - Diaphragm through the pubis **80 second delay**. (Red box) - Axial 2mm x 1mm - Coronal 2mm x 2mm - Coronal MIP 10mm x 5mm