

## Adult CTA Neck Trauma 01/11/2024

CTDI: ~10-25mGy

### Setup:

1. Neck positioned on the flat table top
2. Retract shoulders as much as possible
3. Head First Supine lateral scout from below the aortic arch through the bottom half of the orbits

**DFOV:** Preferred 15cm for CTA (18 cm can be used when the required anatomy is not displayed in a 15cm DFOV)  
Preferred 12cm for Cervical Spine reconstructions

### Exam:

1. CTA Neck
  - Scan from the **floor of the sella** through the level of arch (includes great vessel origins and most of the arch)
  - Smart Prep or Bolus Tracking in the descending aorta at level of arch (trigger set at 80 HU on Siemens) (45 HU on GE)
  - 10 second monitoring delay on Bolus Tracking/Smart Prep

### Contrast:

1. at the discretion of the Radiologist
2. 75ml of 320- 370 mg/dl non-ionic contrast @ 5 ml/sec with an 18 gauge catheter
3. If unable to access an 18 gauge, please use a 20 gauge and adjust to 4ml/sec

### Injector Setup:

- 30ml Saline Flush @ 5ml/sec
- 75ml Omnipaque 350 @ 5ml/sec
- 100ml Saline Flush @ 5ml/sec

### PACS Series:

- 1x1 CTA axial (source Images)
- 1x1 CTA Soft Tissue Coronal MIP
- 1x1 CTA Soft Tissue Sagittal MIP

***Include the following Cervical Spine reconstructions from CTA scan when a CT Cervical Spine has also been ordered***

### **Focused DFOV of 12cm from T1 through C1**

- 1x1 Axial Cervical Soft Tissue
- 1x1 Axial Cervical Bone
- 1x1 Coronal/Sagittal