

Modality - CT	Radiology
Standardised CT Scan Protocols	



Radiology CT Scan Protocols

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Reviewed by	SBU radiologists/ SBU CT Supt radiographers
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Approved by:	Radiology Clinical Director
Name	
Signature	
Approval date	
Review date	

Log of document review

The Service Manager, or delegated radiographer(s), in conjunction with the responsible radiologists will review this document in accordance with procedure **EP-9** and sign below **if no changes** are required.

Any changes to the document will be agreed by the Radiology clinical director. The document may then be re-issued and authorised by the Radiology Clinical Director signing the front page.

This document has been reviewed and is satisfactory.		
Name	Job Title	Date

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	Prep	Contrast	Parameters	Comments
Brain	None	50ml hand inject if required	C1 to vertex	5mm Axial reformats
Sinuses	None	50ml hand inject if required	Frontal to maxillary sinuses	0.6 mm reformats Cor and Sag. Bone plus and Soft
Orbits	None	50ml hand inject if required	To cover orbits	0.6mm reformats Cor and Sag. Bone plus and Soft
Orbital cellulitis/ Complications of mastoiditis	None	100ml contrast at 3ml/s	50s delay	0.6mm reformats Cor and Sag. Bone plus and Soft
Pituitary	None	50ml @3ml/s then 45ml @ 1ml/s	60s delay	0.6mm reformats Cor and Sag. Bone plus and Soft
IAMS	None	50ml hand inject if required	Helical Head pre Helical IAMS post	0.6mm reformats Cor and Sag. Bone plus and Soft
Petrous	None	None	Helical	0.6mm reformats Cor and Sag. Bone plus and Soft

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Neck Oncology	None	100ml @1ml/s	100s delay Sup orbital margin to lung apices	3mm AxialSag and Cor reformats. Bone reformats Arms by side. Quiet respiration
Neck Thyroid Multi Nodular Goitre	None	None	Hyoid to carina	3mm AxialSag and Cor reformats. Bone reformats Arms by side. Quiet respiration
4D Neck	None	100ml	Pre, 25s & 85s Skull base to T4	3mm AxialSag and Cor reformats. Bone reformats Arms by side. Quiet respiration
Neck infection	None	100ml @ 3ml/s	Skull base to T4. 50s delay	3mm AxialSag and Cor reformats. Bone reformats Arms by side. Quiet respiration

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Lung cancer	None	100ml @ 3ml/s	PV 70s delay Chest/Liver	Lung recons
HR Thorax	None	None	Inspiration (Supine), If requested Inspiration (Prone) carina to lung bases	
Breast Cancer	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP 70s delay Including supraclavicular fossa	Lung recons
Oesophagus & Gastric, Neuroendocrine	1 litre water 0.5 hours before scan 1 glass water immediately before the scan NBM 6 hours prior	100ml @ 3ml/s Buscopan Water load	PV CAP	Lung recons
Pancreatic Cancer	500ml water 1.5 hours before scan 2 glasses water immediately before the scan	100ml @ 3ml/s	Late arterial Chest/Liver PV Abdo/Pelvis	Lung recons

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Bowel & rectal Cancer	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP	Lung recons
Other Bowel Pathology	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV AP	
Renal Mass	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP	Lung recons
Renal Cyst Characterisation	500ml water 1.5 hours before scan	100ml @ 3ml/s	Pre Renal Area Then PV AP	
TCC upper track Surveillance	500ml water 1.5 hours before scan 1 glass of water immediately before	100ml @ 3ml/s Or 120ml @3ml/s	Split bolus 20/80 Or 20/100 12min delay Abdo/pelvis	
Bladder Cancer	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP	Lung recons
Testicular Cancer	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP	
Prostate cancer	500ml water 1.5 hours	100ml @ 3ml/s	PV CAP	Lung recons

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	before scan			
KUB Calculus	1 litre water 1 hour before scan	None	Prone Lowish dose + Dual energy if calculus seen	Full bladder
Adrenal Mass Characterisation	None	100ml @ 3ml/s	Pre, 60s & 15min delay	Just adrenal area
Liver Hepatocellular Carcinoma/ Haemangioma		100ml @ 3ml/s	Arterial Liver Then PV AP	
Lymphoma	500ml water 1.5 hours before scan	100ml @ 3ml/s	PV CAP	Lung recons
Melanoma	1st Visit: Omni 25ml in 500ml water 2 hours before scan. Omni 25ml in 500ml water 1 hour before scan. Water only for follow up	100ml @ 3ml/s	PV CAP	Lung recons

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Gynae cancer	Omni 25ml in 500ml water 2 hours before scan. Omni 25ml in 500ml water 1 hour before scan.	100ml@3ml/s	PVCAP	Lung recons

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Circle of Willis	None	Omni 350 50ml@ 4ml/s 50ml saline chase	Whole head Arterial	Multi planar reformats
Cerebral Venogram	None	Omni 300 100ml@ 3ml/s	Whole head 50s delay	Multi planar reformats
Carotids	None	Omni 350 100ml@ 4ml/s	Arterial Aortic arch to skull base	Multi planar reformats
Subclavian angio	None	Omni 350 100ml@ 4ml/s	Hyoid to below elbow of affected side	Cannula situated in NON affected side
Thoracic Angio	None	Omni 350 100ml@ 4ml/s	Apices to lung bases	Lung Reformats
Abdominal/Mesenteric Angio	None	Omni 350 100ml@ 4ml/s	Diaphragms to acetabular	
Renal angio	None	Omni 350 100ml@ 4ml/s	Diaphragms to iliac crests	
Dissection	None	Omni 350 100ml@ 4ml/s	Pre Thorax Arterial CAP From C6 to symph	
Peripheral Lower Limb angio	None	Omni 350 100ml@ 4ml/s	Diaphragm to toes	
Pulmonary Angio	None	Omni 350 100ml@ 4ml/s	Top of aortic arch to base of heart. Unless	

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			specified by radiologist	

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