HIPINSIGHT

CT Protocol

Patient Orientation	• Supine, feet first, legs parallel in neutral rotation if possible
Slice Thickness / Scan Range	 There are two scan regions: Exclude surrounding soft tissues if possible in larger patients. The width and height (x,y) of both FOVs must be equal, so that the center points have the same x, y coordinates. <u>Region 1:</u> The Pelvis: Include the whole pelvis and the upper part of the femurs (approximately 20cm below the tip of the greater trochanters). The slice thickness should be 1 to 1.25mm and the interslice distance should also be 1 to 1.25mm <u>Region 2:</u> Femoral Condyles: Please scan 50mm of the left and right distal femurs <i>Slice Thickness</i>: maximum 5mm
Scout View	• Obtain AP and lateral scout views from above the iliac crest to below the ankles.
Image / Pixel Size	• Pixel size must be the same for both regions!
Scan Properties	• The primary purpose of the scan is for bone detail. Please note that if the patient has an existing implant, it is imperative that the scan be performed with sufficient power to allow visualization of the ischium behind the posterior/inferior acetabulum.
Scan Technique	 Sequential scans: continuous or overlapping slices with no gaps. Helical Scans: pitch (table:scan ratio) =1:1 recommended. Slice thickness can be changed during the scan.
Gantry Tilt	No gantry tilt.
Table Height	• Must remain the same during the scan.
Matrix Size	Any, recommended squared: 512x512
Scan Direction	 cranial to caudal OR caudal to cranial
Storing	• Store both scanning sets as one patient file .
Uploading Data	 Transfer the scout views and axial image data to a computer with internet access. This can be done by direct push (dicom to pc applet), by usb drive, or by CD. Highlight dicom images and create a single zip archive that includes all images. Log onto HipInsight.com to securely upload the zip archive. Send an email to <u>info@hipinsight.com</u> if you have questions or do not have a username and password for HipInsight.com.