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Welcome New Users of the University of Wisconsin-Madison CT Protocols

We encourage you to review the UW Madison CT protocol manual that should have been provided with your scanner. The first few pages of your user manual list our most recent protocol updates and additional protocols that have been included in this current release of our CT protocol package. You will also find extensive instructions covering the set-up of CT Perfusion scans, set-up of Direct Multi-Planar Reformats, and Patient Size-Selection guidelines. These resources augment our protocol offering and are intended to assist you in your practice in all facets of CT scanning.

In addition to the protocols contained in this booklet, we have cultivated a website with additional resources. <https://cteccc.radiology.wisc.edu/> Here you will find our UW Protocol Resource Ecosystem. It includes a Protocol Quick Guide and information on Accreditation Requirements, Series Description and Hanging Protocols, Quality Assurance, Dose Check and Dose Benchmarking, Contrast Guidance and much more.

The list below addresses some common issues first-time users of our protocols have encountered. Please review the entire manual, and especially the items on this list, with your CT protocol optimization team as soon as possible.

1. Our perfusion protocols have been optimized to utilize only Shuttle Mode and Axial Mode scanning options. These methods provide effective perfusion assessment while reducing unnecessary radiation exposure compared with CINE acquisitions, which maintain a constant beam-on time. Please see our Perfusion appendix page for guidance on selecting the perfusion parameters you prefer.
2. For Revolution CT (256) protocols, we utilize Auto Prescription (previously known as kV Assist and kV Assist 2.0) to enable a “one-size-fits-all” approach to patient imaging. This feature automatically selects from three available size profiles based on patient measurements, helping to optimize acquisition parameters across a wide range of patient sizes.
3. Some protocols are configured to use Dynamic Transition. With this feature enabled, the scanner monitors the enhancement level and automatically begins the scan once the preset HU threshold is achieved. Because the scan initiation is controlled by the scanner, technologists should be aware of this process when preparing and monitoring the exam.
4. Reformats need to be constructed the first time you get a scanner or change protocols. Please carefully follow our Direct Multi-Planar Reformat (DMPR) instructions in the CT protocol manual to populate the DMPR settings. Our protocols are set up to follow a specific DMPR naming convention.

If you have any questions or would like to have any of the above clarified, please contact your GE applications specialist.

Sincerely,

The UW CT Protocol Optimization Team