UT Southwestern Department of Radiology

Protocol Name: Ankle CT

Epic Button: Ankle

Indications: Trauma, Degenerative arthropathy, intra-articular bodies Talar dome osteochondral lesions

Orderable Name: CT LOWER EXTREMITY LEFT WO IV CONTRAST
CT LOWER EXTREMITY RIGHT WO IV CONTRAST

Adult Only

CTDIvol < 50 mGy

 # Acquisitions: 1

Active Protocol

Oral Contrast: None	IV Contrast: None	Other Contrast: None	Airway
			Other Notes *Place a marker at the site of most concern. Dual energy/Spectral scanner required. Photon counting preferred unless gout is indicated. Position: supine, toes pointing straight up, foot inverted slightly. Use Right/Left orderable based on protocol or side indicated in reason for exam. Metal (FOV): Use 140 kVp.

Last Change: 1/13/2023 **Last Review:** 1/29/2025 **Links:** General Statements Positioning Reference

Special Instructions	Use 5mm cor/sag if large patient or metal in FOV.	Do not repeat CT scan, recon soft tissue from 1st acquisition, send soft tissue volume to TeraRecon Use 5mm cor/sag if large patient or metal in FOV.
Acq # / Series Name	1 Noncontrast	N/A Noncontrast
Phase Timing		N/A
Acquisition Protocol		Recon Only
Coverage	See illustration - Entire ankle(s)	Same
FOV	Ankle(s) center in scanner	Same
Algorithm	Bone	Soft Tissue
Axial Recons	3 mm	4 mm, Volume
Other Planar Recons	3mm coronal and sagittal (see illustration)	4 mm coronal and sagittal (see illustration)
MIP Recons		
†DECT Philips	Gout maps (cor/sag), BM edema, mono-E 100, mono-E 140, SBI	
†DECT Siemens	Gout maps (cor/sag), BM edema, mono-E 100, mono-E 140, low/high kVp	
†PC-CT Siemens		

† When dual energy (DE) or photon counting (PC) CT is used