

Align the phantom (16 cm or 32 cm as appropriate for the scan protocol) such that the axis of the phantom is at the isocenter of the scanner and centered in all three planes. If this configuration is not accessible in axial mode, use the N x T configuration most closely matching the clinical value. d. Make one exposure in axial mode using the clinical N x T configuration. If the protocol is normally scanned helically, convert this to an axial scan while keeping the remaining technical parameters the same. Note: For pediatric (40–50 pounds) abdomen protocols, some CT scanners report CTDIvol using the 16 cm phantom, while others use the 32 cm phantom. It is imperative that the detector configuration and total beam width used matches the site's clinical protocol (N x T) as closely as possible. At a minimum, the scans performed should include the following protocols: a. Adult Routine Brain b. Pediatric Routine Brain (1 year old) c. Pediatric Routine Abdomen (5 years old; 40–50 lb., approx. a. For adult head protocols, position the 16–cm phantom in the head holder or as heads are scanned clinically. 2.3.5.6.