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# Abdominal Computerized Tomography

**N. M. Adam**

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## **Abdominal Computerized Tomography:**

**CT of the Acute Abdomen** Patrice Taourel, 2011-09-18 CT of the Acute Abdomen provides a comprehensive account of the use of CT in patients with acute abdomen Recent important developments in CT including multislice CT and multiplanar reconstructions receive particular attention CT features are clearly illustrated and pitfalls and differential diagnoses are discussed The first section of the book presents epidemiological and clinical data in acute abdomen The second and third sections document the key CT findings and their significance and discuss the technological background The fourth and fifth sections which form the main body of the book examine in detail the various clinical applications of CT in nontraumatic and traumatic acute abdomen This book will serve as an ideal guide to the performance and interpretation of CT in the setting of the acute abdomen it will be of value to all general and gastrointestinal radiologists as well as emergency room physicians and gastrointestinal surgeons *Abdominal Computerized Tomography* Jean-Louis Lamarque, J. M. Bruel, 1979 *Whole Body Computerized Tomography* O. H. Wegener, 1983-09-13 [Computed Tomography of the Abdomen](#) John Robert Haaga, Ralph J. Alfidi, 1985 *Computed Tomography* Ehsan Samei, Norbert J. Pelc, 2019-11-15 This book offers a comprehensive and topical depiction of advances in CT imaging CT has become a leading medical imaging modality thanks to its superb spatial and temporal resolution to depict anatomical details New advances have further extended the technology to provide physiological information enabling a wide and expanding range of clinical applications The text covers the latest advancements in CT technology and clinical applications for a variety of CT types and imaging methods The content is presented in seven parts to offer a structure across a board coverage of CT CT Systems CT Performance CT Practice Spectral CT Quantitative CT Functional CT and Special Purpose CT Each contain chapters written by leading experts in the field covering CT hardware and software innovations CT operation CT performance characterization functional and quantitative applications and CT systems devised for specific anatomical applications This book is an ideal resource for practitioners of CT applications in medicine including physicians trainees engineers and scientists **Visual grading evaluation of reconstruction methods and dose optimisation in abdominal Computed Tomography** Bharti Kataria, 2019-10-15 Since its introduction in the 1970 s CT has emerged as a modality of choice because of its high sensitivity in producing accurate diagnostic images A third of all Computed Tomography CT examinations are abdominal CTs which deliver one of the highest doses among common examinations An increase in the number of CT examinations has raised concerns about the negative effects of ionising radiation as the dose is cumulative over the life span of the individual Image quality in CT is closely related to the radiation dose so that a certain dose with an associated small but not negligible risk is a prerequisite for high image quality Typically dose reduction in CT results in higher noise and a decrease in low contrast resolution which can be detrimental to the image quality produced New technology presents a wide range of dose reduction strategies the latest being iterative reconstruction IR The aim of this thesis was to evaluate two different classes of iterative reconstruction

algorithms statistical SAFIRE and model based ADMIRE as well as to explore the diagnostic value of a low dose abdominal CT for optimisation purposes This thesis included a total of 140 human subjects in four image quality evaluation studies three of which were prospective studies Papers I II and IV and one retrospective study Paper III Visual grading experiments to determine the potential dose reductions were performed with pairwise comparison of image quality in the same patient at different tube loads dose and reconstructed with Filtered back projection FBP and SAFIRE strength 1 in a low dose abdominal CT Paper I and FBP and ADMIRE strengths 3 and 5 in a standard dose abdominal CT Paper II Paper IV evaluated the impact of slice thicknesses in CT images reconstructed with ADMIRE strengths 3 and 5 when comparing multiplanar reconstruction MPR formatted images in a standard dose abdominal CT Paper III on the other hand was an absolute assessment of image quality and pathology between the three phases of a CT Urography CTU protocol to explore the diagnostic value of low dose abdominal CT The anonymised images were displayed in random order and image quality was assessed by a group of radiologists using image quality criteria from the European guidelines of quality criteria for CT The responses from the reviewer assessment were analysed statistically with ordinal logistic regression i e Visual Grading Regression VGR Results in Paper I show that a small dose reduction 5.9 % was possible using SAFIRE strength 1 and indicated the need for further research to evaluate the dose reduction potential of higher strengths of the algorithm In Paper II a 30% dose reduction was possible without change in ADMIRE algorithm strength as no improvement in image quality was observed between tube loads 98 and 140 mAs When comparing tube loads 42 and 98 mAs further dose reduction was possible with ADMIRE strength 3 22.47% However for images reconstructed with ADMIRE strength 5 a dose reduction of 34.74% was possible for some but not all image criteria Image quality in low contrast objects such as the liver parenchyma was affected and a decline in diagnostic confidence was observed Paper IV showed potential dose reductions are possible with increasing slice thickness from 1 mm to 2 mm 24.35% and 1 mm to 3mm 25.41% ADMIRE strength 3 continued to provide diagnostically acceptable images with possible dose reductions for all image criteria assessed Despite objective evaluations showing a decrease in noise and an increase in contrast to noise ratio ADMIRE strength 5 had diverse effects on the five image criteria depending on slice thickness and further dose reductions were limited to certain image criteria The findings do not support a general recommendation to replace ADMIRE3 with ADMIRE5 in clinical abdominal CT protocols Paper III studied another aspect of optimisation and results show that visualisation of renal anatomy was as expected in favour of the post contrast phases when compared to the native phase Assessment of pathology showed no significant differences between the three phases Significantly higher diagnostic certainty for renal anatomy was observed for the post contrast phases when compared to the native phase Significantly high certainty scores were also seen for the nephrographic phase for incidental findings The conclusion is that a low dose series seems to be sufficient as a first line modality in certain patient groups This thesis clinically evaluated the effect of IR in abdominal CT imaging and estimated potential dose reductions The important

conclusion from papers I II and IV is that IR improves image quality in abdominal CT allowing for some dose reductions However the clinical utility of the highest strength of the algorithm is limited to certain criteria The results can be used to optimise the clinical abdominal CT protocol The conclusion from paper III may increase clinical awareness of the value of the low dose abdominal protocol when choosing an imaging method for certain patient groups who are more sensitive to radiation

Datortomografi DT anv nds i allt st rre omfattning vid bilddiagnostik och ger en viss str ldos till patienten DT r en viktig snabb och patientv nlig unders kningsteknik En f rdel med denna teknik r att bildmaterialet kan rekonstrueras i olika format f r att sk dligg ra anatomin p b stas tt beroende p vilken fr gest llning som ska besvaras Joniserande str lning fr n dessa unders kningar anses ka risken f r negativa effekter ven om risken f r den enskilde patient r mycket liten Antalet datortomografiunders kningar kar fr n r till r vilket kan leda till kade str ldoser tillbefolkningen Optimering av unders kningsteknik och val av unders kning f r att minska negativa effekter av r ntgenstr lning r d rf r n dv ndig Det vergripande m let med avhandlingen var att utv rdera bildkvalitetvid en DT unders kning av buken d dessa medf r en av de h gstastr ldoserna bland de vanliga r ntgenunders kningarna att kvantifieram jlig str ldosminskning med hj lp av iterativa rekonstruktionsalgoritmer och att utv rdera diagnostiska v rdet av l gdosunders kningsteknik vid DT buk Av de fyra delstudierna var delarbeten I II och IV prospektiva och delarbete III retrospektivt F r de prospektiva studierna samlades bildmaterial in vid en kliniskber ttigad unders kning av l gdos DT av buken delarbetet I eller standarddos DT av buken delarbetet II och IV Bilder rekonstruerades meden standard bildrekonstruktionsalgoritm filtrerad terprojektion FBP och med styrka 1 av den iterativa algoritmen SAFIRE delarbetet I I delarbeten II och IV gjordes bildrekonstruktioner med FBP och med styrka 3 och 5 av den iterativa algoritmen ADMIRE Aidentifierade bildmaterialf r varje patient visades parvis i slumpm ssig ordning f r ett antal granskare och bildkvaliteten bed mdes med hj lp av europeiska bildkriterier I den retrospektiva studien delarbete III h mtades bildmaterialet fr n utf rda DT urografiunders kningar fr n bildarkivet F r varje unders kning visades bilder fr n varje fas i DT urografiunders kningen separat i slumpm ssig ordning F r samtliga delarbeten h mtades bildkriteriernafr n European Guidelines of Quality Criteria for CT och modifierades f r att passa till varje studie Granskarnas bed mning analyserades med ordinal logistisk regression s kallad visual grading regression VGR Resultat fr n delarbetet I visade att det fanns en signifikant inverkan av dos p

**Atlas of Pathological Computer Tomography** A. Wackenheim,L. Jeanmart,A.L. Baert,2012-12-06 In this monography we report some confrontations of CT and ana tomical data recorded during the last years in Leuven Bruxelles and Strasbourg three neighbouring universities This material represents only a small part of our cases but we have selected those which seemed the most suited for didactic purposes This study is made in the traditional european way and confronts the data of an investigation with the examination of the corresponding anatomic specimen Obviously this is only possible in very few cases But then these cases provide a striking demonstration of the morphol ogy of lesions seen at CT Our aim was to provide material for teaching This book is the first part of a trilogy the two

others deal with the pathology of the trunk A WACKENHEIM L JEANMART A L BAERT Strasbourg Bruxelles Leuven  
 Contents 1 Malformations 1 1 1 V en tric1es 1 1 2 Hydrocephalus 1 1 3 Bourneville Disease 1 1 4 Aneurysms 1 1 5  
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 Disease 27 3 1 2 Multiple Hematoma 27 3 1 3 Coffee Bean Hematoma 27 3 1 4 Septate Hematoma 27 3 1 5 Cockade Shaped  
 Hematoma 28 3 1 6 Geometric Hematoma 28 3 1     **Computed Tomography of Abdominal Abnormalities** John Robert  
 Haaga,Norbert E. Reich,1978     *CT of the Peritoneum* Armando Rossi,Giorgio Rossi,2001-09-20 This elaborately illustrated  
 book written by two of the leading radiologists in Italy is devoted entirely to computed tomography of the peritoneum The  
 case documentation encompasses both common and rare pathological conditions and is the product of 20 years of  
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 Michael M. Raskin,1979     **Radiology Noninterpretive Skills: The Requisites eBook** Hani H Abujudeh,Michael A.  
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E. Chang, Stephen Lowry, Sean J. Mulvihill, Harvey I. Pass, Robert W. Thompson, 2009-04-21 Much anticipated the Second Edition of Surgery Basic Science and Clinical Evidence features fully revised and updated information on the evidence based practice of surgery including significant new sections on trauma and critical care and the often challenging surgical care of unique populations including elderly pediatric immunocompromised and obese patients as well as timely new chapters on the pre and post operative care of the cardiac surgery patient intestinal transplantation surgical infections the fundamentals of cancer genetics and proteomics Also new to this edition are discussions of electrosurgical instruments robotics imaging modalities and other emerging technologies influencing the modern practice of surgery Clinically focused sections in gastrointestinal vascular cardiothoracic transplant and cancer surgery enable the surgeon to make decisions based upon the most relevant data in modern surgical practice The text is enhanced by more than 1 000 illustrations and hundreds of the signature evidence based tables that made the first edition of SURGERY an instant classic **Total Body Computerized Tomography** N. M. Adam, 1979 **Atlas of Pathological Computer Tomography** A. L. Baert, A. Wackenheim, L. Jeanmart, 1981-09-15 It was our aim to place at the disposal of radiologists within a short time an atlas of high quality valuable pictures of abdominal CT without We felt that the image degradation inherent to slower scanning apparatus notwithstanding rapid evolution in CT scanning apparatus and the resulting rapid advances in our clinical knowledge about the value limitations and applications of this new diagnostic imaging modality an effort should be made to realize an atlas of reference From more than 7 000 patients studied with abdominal CT we tried to assemble images with maximal anatomical detail which implies the use of large window settings being well aware that in daily routine practice basic CT methodology includes the use of different window settings for optimal information It was however a conscious decision not to use comparative images with large and small window settings in order to stay within a reasonable total number of figures Much emphasis has been placed upon the use of contrast enhancement by intravenous contrast media This is based on the conviction that essentially new and better morphological information about normal and pathological processes within the abdomen can be obtained because short exposure times now allow one to capture the rapidly changing aspect and degree of contrast enhancement of the lesions as a function of their vascularity **CT and Sonography of the Acute Abdomen** R. Brooke Jeffrey, Philip Whitney Ralls, Faye C. Laing, 1996 CT Scan in Abdominal Emergency Surgery Fausto Catena, Salomone Di Saverio, Luca Ansaloni, Federico Coccolini, Massimo Sartelli, 2018-06-26 This book focuses on the diagnostic impact of CT scans in severe abdominal trauma and in non traumatic acute abdomen the two clinical entities that constitute the main reasons for referrals for this imaging technique from the intensive care unit The concept behind it is that emergency surgeons and physicians not only need the clinical knowledge to manage the different pathological conditions but that they must also have a full understanding of diagnostic imaging modalities To this end each chapter includes a description of a specific acute abdominal disorder In addition to the clinical presentation and the diagnosis and management

guidelines there is a special focus on imaging studies with clear and concise descriptions high quality images and the evolution grading scale to aid interpretation This easy to read book is an ideal source of practical information for acute care surgeons radiologists and for all the members of the emergency team     **Essentials of Body Computed Tomography**

Mark Greenberg, Brent M. Greenberg, Irving M. Greenberg, 1983     Computed Tomography and Magnetic Resonance Imaging of the Whole Body John Robert Haaga, 1994     Computed Tomography in the Evaluation of Trauma Michael P. Federle, Michael Brant-Zawadzki, 1986

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