# CT Scan Protocol LOWER EXTREMITY (ANKLE AND KNEE)



If available, include weight bearing x-rays in the Anterior, Lateral, and Mortise View of the full or partial limb.

## **CT SCAN PROTOCOL**

The following CT Scan protocol is used to ensure uniformity between scans at multiple centers. The following CT Scan protocol may be used for the Axiom PSR System.

### **1. Patient Position**

- A. The foot of interest should be positioned in neutral (90°) to the leg with a positioning device or heavy box. If neutral is not possible, a  $\pm 25^{\circ}$  deviation is acceptable.
- B. The entire foot is to be scanned through the ball of the foot and tip of toes.
- C. If a contra-lateral implant is present, bend the contra-lateral limb out of the field of view of the ankle to be scanned.
- D. Do not allow patient movement between or during scans.
- E. Provide full Knee-to-Foot images (coronal and sagittal).
- F. Scan both the Foot and Ankle AND Knee Sections at the same time.

### 2. Knee Scan Protocol Requirements

- A. Scan **5cm** proximal and **5cm** distal to the knee joint line with a **2.5mm** (or smaller) Slice Increment
- B. Typical Field of View **28cm** (Maximum **40cm**).
- C. In-plane pixel size (resolution) must be less than **0.8mm**.

### 3. Foot and Ankle Scan Protocol Requirements

- A. Scan at least **10cm** above the ankle joint line.
- B. Scan the **entire foot**. Scan past the ball of the foot and toe tips to ensure the entire foot is captured.
- C. <u>Slice increment **1.0mm** (or smaller)</u>
- D. Measure or calculate to achieve >10cm above the ankle joint line.

Examples: 100 slices at 1.00mm or 160 slices at 0.625mm

### 4. Scanning Instructions

- A. Helical, axial, and cone beam CT modes are acceptable.
- B. Bone or Standard algorithms are acceptable.
- C. No contrast agent is to be used.
- D. All scan groups' edges should stay aligned.
- E. Maintain a single coordinate system for both the knee and foot scan.
- F. Maintain a consistent field of view and pixel size for both the knee and foot scan.
- G. Adjusting the width of both knee and foot groups together to span the required anatomy of both groups is appropriate.

## **ANKLE & KNEE**



### **Scan Parameters**

	Pixel Spacing	≤ 0.8mm
	Slice Thickness	≤ 1.00mm
	кVр	120
	мА	Determined by software scanner
	File Type	Uncompressed DICOM



- H. One single scan from the bottom of the foot through the knee is also acceptable.
- I. In-plane pixel size (resolution) must be less than 0.8mm.

Example: A Field of View of  $\sim$ 28 cm is ideal for a 512x512 matrix in order to keep the pixel size small. The Field of View must be less than 40 cm.

J. Include full knee-to-foot images (coronal and sagittal) when submitting CT files.

K. Other:

- Do not scan at higher slice spacing and reconstruct to smaller increments.
- Only the raw axial images are needed; coronal and sagittal reconstructions are not necessary.
- Images must be provided in uncompressed DICOM format.
- If the ankle of interest has existing hardware it can be scanned with the same parameters as listed here.





ANKLE Joint Line

### 5. How to Submit Scan

Mail To: restor3d Research Triangle Park 4001 E. NC 54 Highway Suite 3160 Durham, NC 27709

# **ANKLE & KNEE**



#### **Questions:**

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#### Mail to:

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This document outlines restor3d's recommended CT scan parameters. restor3d does not practice medicine and is making these recommendations for optimal design of patient-specific implants, instruments, and anatomic models as necessitated by surgeon prescription. Please use these guidelines appropriately for each patient under the guidance of a physician.



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