Study Protocol

Control *syngo* DynaCT directly following endovascular aneurysm sealing procedure

Interventional Surgery

Immediate post-procedural DynaCT improves technical success of EVAR procedures.

Courtesy of
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Supported by
syngo DynaCT DSA

System & Software
Artis zeego VC14
syngo X Workplace VB21

Case Description

Patient history
73-year-old male

Diagnosis
Asymptomatic patient with progressive, penetrating atherosclerotic ulcer (PAU) in the infrarenal aorta (max. diameter 40 mm).

Treatment
Endovascular aneurysm sealing using Endologic Nellix™.

Tips & Tricks
syngo DynaCT in portrait orientation (24 cm vertical coverage) has a large anatomical coverage that allows visualization of the renal arteries, partially suprarenal aorta, infrarenal aorta and its branches, and the iliac arteries during EVAR procedures. Immediate post-procedural control DynaCT allows the physician to evaluate his treatment so that the physician can see the complications early and change the treatment strategy. *syngo* DynaCT removes the need for further postprocedural CT examinations.

General comments
Control *syngo* DynaCT directly following aneurysm sealing enables assesment of correct deployment of stent graft, patency of renal, visceral, and iliac arteries. Complications such as endoleaks and stent stenosis also excluded thanks to *syngo* DynaCT.

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Acquisition protocol	5s DCT Body CARE Portrait (prototype calibration)

Injection protocol	
Catheter position	Above renal arteries
Contrast medium (CM)	300 mg iodine/mL
Dilution	66 %
Injection volume	70 mL
Injection rate	10 mL/s
Duration of injection	7 s
X-ray delay	2 s
Power injector used	Yes

Reconstructions	Primary
Name	DynaCT Body Nat Fill HU
VOI size	Full
Slice matrix	512 × 512
Kernel type	HU
Image characteristics	Normal
Reconstruction mode	Nat fill
Viewing preset	Auto

Clinical Images

Figure 1: Coronal MIP 50 mm shows optimal deployment of stent and patency of renal arteries

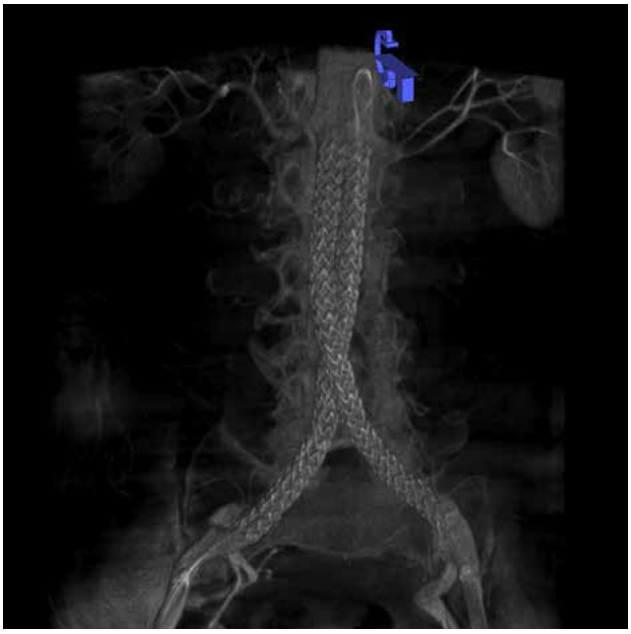

Figure 2: Coronal VRT shows correct deployment of stent and patency of vessels

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