

MYOCARDIAL SPECT PERFUSION PROCESSING & PACS  
UPDATED: MARCH 2012

CPT CODE: N/A

### Recon / Reformat Screen

- Select Patient and Start QGS/QPS processing protocol.
- Check for patient motion on the raw data cines. If patient motion is found, perform motion correction.
- Reconstruction pre-filters are set at:

#### For Tc99m

Stress Un-gated	Butterworth 0.41	Power 10
Stress Gated	Butterworth 0.4	Power 10
Rest	Butterworth 0.394	Power 10

#### For Thallium Tl-201

Stress Un-gated	Butterworth 0.35	Power 10
Stress Gated	Butterworth 0.314	Power 20
Rest	Butterworth 0.38	Power 20

Adjust the angles and limits on the myocardial slices and do additional masking of bowel uptake if needed.

### Go to the Review Screen and start Myometrix

- Select the "Stress/Rest" layout and align the stress and rest slices and screen cap the image.
- Under the option menu select "Comparison Review", then select "UW1" layout and screen cap. For HWKY images select UW1. For Non-HWKY images select "NON-HWKY" (stress FBP rest FBP, stress IRNC).
- Next select the "Summary Stress/Rest Raw" layout and do a dynamic screen capture using the "Dynamic SC Screen Color" option in the Print Dialog Box.

### Start Quantitative Gated SPECT (QGS)

- Check to see if the ROIs track the myocardium for the stress and rest data sets. If they do not, reprocess manually to exclude any bowel uptake.
- Screen cap the QGS EF screen.
- Also save a dynamic screen cap of the QGS screen by selecting "Dynamic SCVP Color" found under the Print Dialog options.
- Change the color scale on the slices to gray. Turn off the contours and save a second "Dynamic SCVP Color".

### Start Quantitative Perfusion SPECT (QPS)

- Check to see if the ROIs track the myocardium for the stress and rest data sets. If they do not, reprocess manually to exclude any bowel uptake.
- No screen cap needed.

File, Save and Exit from QGS/QPS.

Send all 6 screen caps to ALI PACS.

Send all files MDXel viewing station.

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