PROTOCOL: MRA NECK WO/CAROTID+VERTEBRAL MRA WO

CLINICAL INDICATIONS/ HISTORY: trauma, stenosis, transient ischemic attack, carotid bruit, dissection

SCAN ORDER	PLANE	IMAGE CONTRAST/ WEIGHTING	MODE	PULSE SEQ	COVERAGE	TR RANGE	TE RANGE	TI	FLIP ANGLE	THICKNESS/ GAP (mm)	FOV (cm)	Max Pixel (mm) Fr x Ph	Freq Axis	SEND TO PACS	Max scan time (target)
1	SAG	PC LOC	2D	PC	2 SLICES TO COVER CAROTIDS AND VERTEBRALS- VENC=60CM/S	MIN	MIN		20-30	50/0	30	1.5X1.5	SI	COLLAPSE	3:00
2	COR	PC LOC	2D	PC	1-2 SLICES TO COVER CAROTIDS AND VERTEBRALS VENC=60CM/S	MIN	MIN		20-30	60/0	30	1.5X1.5	SI	COLLAPSE	3:00
*ADD IF DISSECTION	AX	T1-FS	2D/ 3D	FSE OR VIBE/ LAVA	1-2 SLICES TO COVER CAROTIDS AND VERTEBRALS VENC=60CM/S	<790 IF FSE	MIN		>130 OR 15-25	<4/1	18	1.0X1.0	RL	FULL SERIES	5:00
3	AX	TOF MRA	3D	TOF-MULTI	COVER FROM FORAMEN MAGNUM TO ARCH BELOW ORIGINS	MIN	6.9 IF FLOW COMP, MIN IF NO FC	SUPERIOR TRACKING SAT	20-30	1.0-1.5/0VLP (SLABS OF 26-30 PARTITIONS WITH 10-12 DISCARDS/ OVERLAPS)	16-20	.9X.9	RL	FULL SERIES + BELOW	8:00
POST PROCESSING: IF NOT AUTOGENERATED (SIEMENS) 2 PLANES OF FULL-VOLUME PROJECTED MIP: AP, LATERAL; ROTATED/SPIN MIPS OF LEFT AND RIGHT CAROTID+VERTEBRAL SEPARATED FROM EACH OTHER; CORONAL AND SAGITTAL THICK (SLIDING SLAB) MIPS THRU BOTH CAROTIDS AND VERTEBRALS.															
USE SERIES 3 AS SOURCE DATA FOR THESE MIPs	AP	VOLUME MIP	3D												
	LAT	VOLUME MIP	3D												
	LEFT SPIN	SUB-VOLUME MIP	3D		COVER 180 DEGREES MINIMUM					5-10 DEGREE SEPARATION					
	RIGHT SPIN	SUB-VOLUME MIP	3D		COVER 180 DEGREES MINIMUM					5-10 DEGREE SEPARATION					
	COR	THICK MIP	2D		COVER CAROTIDS AND VERTEBRALS					7-10/OVLP 5-8					
	SAG	THICK MIP	2D		COVER CAROTIDS AND VERTEBRALS					7-10/OVLP 5-8					