

PROTOCOL: HIP ABDUCTORS WO

COIL: High channel count (12+) body array coil

POSITIONING: Supine. Hip INTERNAL ROTATION - sandbag lateral to foot / or tape toes of both feet together with sandbag between heels

CLINICAL INDICATIONS/ HISTORY: HIP ABDUCTOR TEAR/TENDINOSIS, GLUTEUS MINIMUS OR MEDIUS

PLOTTING: On whole pelvis sequences - true axial and true coronal axial, coronal, sagittal = true axial, coronal, sagittal **Unilateral**

COVERAGE:
 Whole pelvis coronal: Entire pubic symphysis, entire sacrum/coccyx
 Whole pelvis axial: Above iliac crest to below lesser trochanter
 Unilateral: Anterior to pubic symphysis, posterior to ischial tuberosity
 Unilateral: Lateral to greater trochanter, medial to ischial tuberosity & joint

TIPS: On Siemens use "seatbelt" straps to bring coil close to lateral thighs. Have patient empty bladder immediately before start of scan

SCAN ORDER	PLANE	IMAGE CONTRAST/WEIGHTING	MODE/SEQ TYPE	Averages (NEX)	BW (Hz/pixel)	ETL	TR RANGE	TE RANGE	TI	FLIP ANGLE	SLICE/GAP (mm)	FOV (cm)	Resolution	Phase Axis	Send to PACS	Fat sat
1	Whole pelvis AX	STIR	2D/FSE	1	150-180	8-12	3500-6000	20-30	140 - 150	>130	5/0.5	30-42	256 x 256	RL	FULL SERIES	
2	Whole pelvis COR	T1	2D/FSE	1	150-180	2-3	450-650	8-10		>130	5/0.5	36-44	256 x 256	SI	FULL SERIES	NONE
3	AX	PD	2D/FSE	2	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-20	512 X 320-384	SI	FULL SERIES	NONE
4	AX	T2FS	2D/FSE	1	150-180	8-12	3500-6000	65-75		>130	3.5/0	18-20	256 X 256	SI	FULL SERIES	WEAK
5	SAG	PD	2D/FSE	2	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-20	512 X 320-384	SI	FULL SERIES	NONE
6	COR	PDFS	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-20	320 X 288	AP	FULL SERIES	WEAK