

PROTOCOL: KNEE WO ROUTINE

COIL: Multichannel knee coil. If too large or swollen try large flex coil wrapped around knee. Do NOT just lay flex coil over knee.

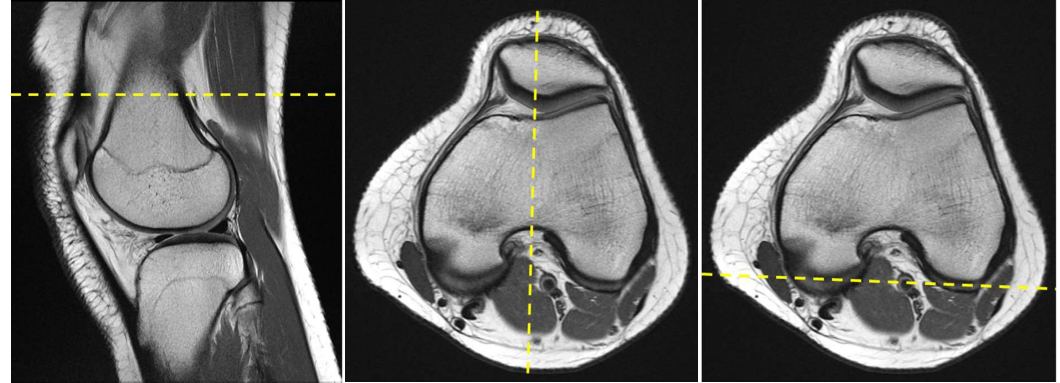
POSITIONING: Supine, knee extended. Make patient as comfortable as possible.

CLINICAL INDICATIONS/HISTORY: INTERNAL DERANGEMENT, LIGAMENT TEAR, MENISCAL TEAR, FRACTURE, OCD, CARTILAGE DEFECT, INTERNAL DERANGEMENT, INJURY, PAIN

PLOTTING: Axial = true axial to femur = parallel to posterior margin of femoral condyles
Coronal = perpendicular to posterior margin of femoral condyles
Sagittal =

COVERAGE: Above patella (must see quad tendon). Below tibial tubercle. Include all muscles, tendons, ligaments, bones.

TIPS: If necessary reposition coil so signal on localizer is highest at joint space. Knee is one of easiest joints to hold still if patient is comfortable



plane alignment for axial (left), sagittal (center), and coronal (right)

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	AX	PDFS	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	14-15	320 x 288	RL	FULL SERIES	WEAK
2	SAG	PDFS	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	14-15	256 x 256	SI	FULL SERIES	WEAK
3	SAG	PD	2D/FSE	2	150-180	8-12	3500-6000	38-45		>130	3.5/0	14-15	512 x 320-384	SI	FULL SERIES	NONE
4	COR	T2FS	2D/FSE	1	150-180	8-12	3500-6000	65-75		>130	3.5/0	14-15	256 x 256	RL	FULL SERIES	WEAK
5	COR	PD	2D/FSE	2	150-180	8-12	3500-6000	38-45		>130	3.5/0	14-15	512 x 320-384	RL	FULL SERIES	NONE
6	COR	T1	2D/FSE	1	150-180	2-3	450-650	8-10		>130	3.5/0	14-15	256 x 192	RL	FULL SERIES	NONE