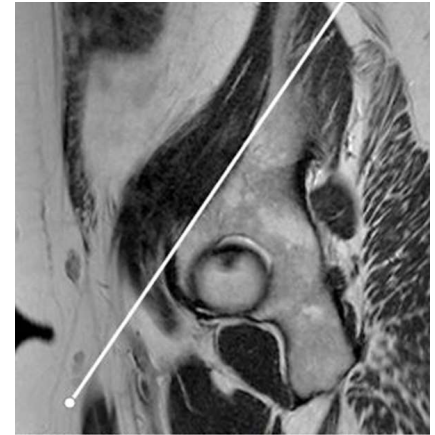


PROTOCOL: ATHLETIC PUBALGIA - SPORTS HERNIA

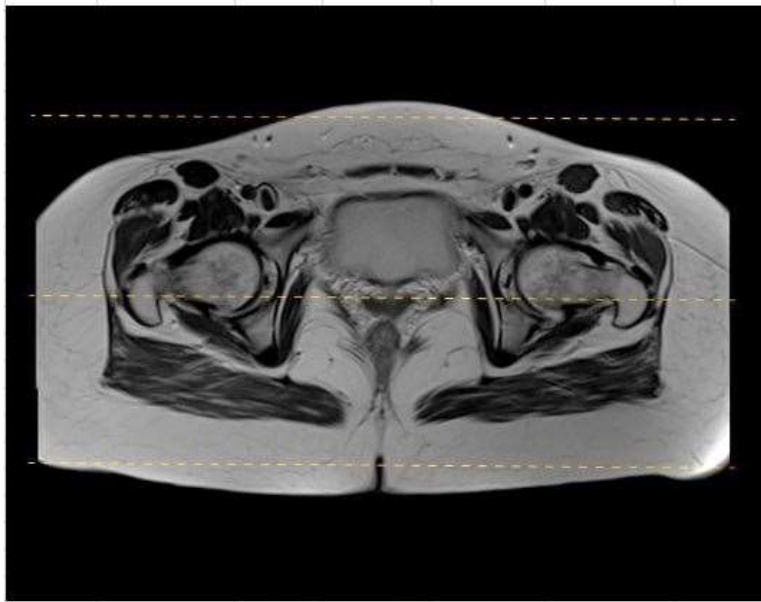
COIL:	High channel count (12+) body array coil
POSITIONING:	SUPINE. AVOID PUTTING LARGE BOLSTER UNDER KNEES-KEEP THIGHS AS FLAT AS POSSIBLE TO THE TABLE
CLINICAL INDICATIONS/ HISTORY:	ATHLETIC PUBALGIA, SPORTS HERNIA, ADDUCTOR TEAR, RECTUS ABDOMINIS TEAR
PLOTTING:	On whole pelvis sequences: true axial and true coronal axial: slices midline - plot along iliac crest from SAG coronal and sagittal: true coronal and sagittal
COVERAGE:	Imaging midline, centered at pubic symphysis. Include from anterior to symphysis through posterior aspect of pubic rami
TIPS:	Oblique axial = "adductor unfolding plane" - short axis of symphysis patient empty bladder immediately before starting scan

PLANE ALIGNMENT FOR OBLIQUE AXIAL "ADDUCTOR UNFOLDING PLANE"

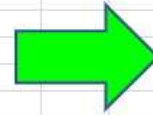


OBLIQUE AXIAL *ALIGNMENT*: SCANS SHOULD BE PRESCRIBED FROM MIDLINE SLICE

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	4.5/0.5	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	36-44	256 x 256	SI	FULL SERIES	NONE
3	SAG	PDFS	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-22	320 x 288	SI	FULL SERIES	WEAK
4	AX OBL	PD	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-22	512 X 320	RL	FULL SERIES	WEAK
5	AX OBL	PDFS	2D/FSE	2	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-22	256 x 256	RL	FULL SERIES	NONE
6	COR	PDFS	2D/FSE	1	150-180	8-12	3500-6000	38-45		>130	3.5/0	18-22	320 x 288	RL	FULL SERIES	WEAK



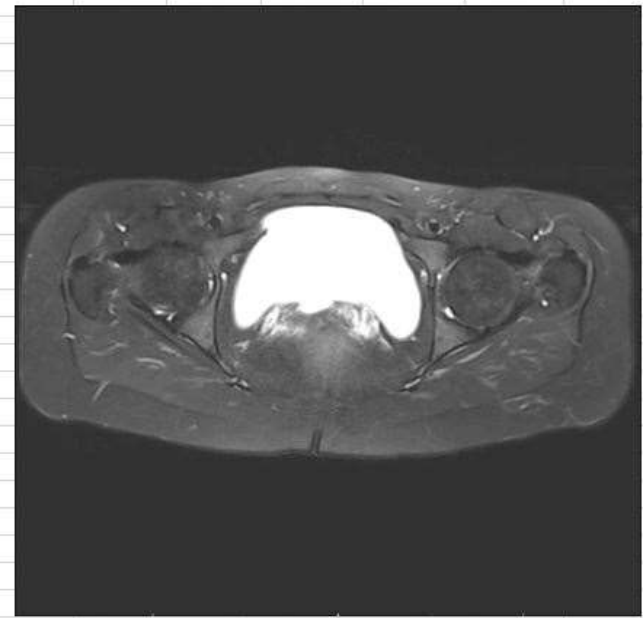
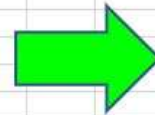
COVERAGE FOR CORONAL T1



EXAMPLE OF CORONAL T1 AND FOV COVERAGE



COVERAGE FOR AXIAL T2FS/STIR



EXAMPLE OF AXIAL T2FS/STIR AND FOV COVERAGE