UT Southwestern Department of Radiology

Anatomy: LOWER EXTREMITY

Sub-Anatomy: Ankle- 1.5T Ortho

-Exams - Routine ORDERABLE- ANKLE Coil: <u>Ankle/Chimney coil</u>

SEQUENCE - BASICS														
PLANE	SEQ	Slice thickness (mm)	Mine /			% R			Nex		ETL	Dhara	0 THE	Pixel Shift
ROUTINE		Slice thickness (mm)	Misc / Comment	MT X	gap	F O V	TR	TE	Avg Acq	NS	Turbo Factor	Phase Encode	Scan TIME (min)	BW-kHz
	3 plane scout		Only GRE											
1	Cor PD FS	3.5x0.4x0.5			10%		4000	35-40						
2	Sag PD FS	3.5x0.4x0.5			10%		4000	35-40						
3	Sag PD	3.5x0.4x0.5			10%		4000	40-45						
4	Ax PD FS	3.5x0.4x0.5			10%		4000	35-40						
5	Ax PD	3.5x0.4x0.5			10%		4000	40-45						
6	Cor T2 Dixon (or) dual FFE	4.0 x0.5x0.6			10%			55						
↓ 0	PTIONAL \downarrow						•	•						
	STIR	3-4	Failed fat sat		10%		4000	30-35						

Instructions: FOV and Coverage- On axials, cover 1-2 cm above the ankle joint to skin surface. On coronals, cover from posterior skin to base of metatarsals. On sagittals, cover from slightly medial to medial mallelolus to slightly lateral to lateralmallelolus. Also, on Sagittal acquisitions, try to cover as high as possible superiorly (with increased FOV permissible by the coil).

Large subject: Increase voxel-4x0.5x0.6 mm,, if problem with SNR or wrap, etc- call OPB/PMH for remote monitoringhelp.

Others- Always put marker at the site of most pain, injury or swelling. If motion observed, stop the scan, instruct patient to lay still and repeat the sequence. Leave TR as 4000ms and not as the shortest by default.

