

Anatomy: Forefoot-Midfoot
 Sub-Anatomy: Foot 1.5T

- Exams **ORDERABLE- Foot**
 - Routine
 Coil: Ankle or Chimney Coil

SEQUENCE - BASICS																	
PLANE	SEQ	Slice thickness (mm)	Misc / Comment	M T X	% R F O V	Gap (mm)	Voxel size (mm)	TR	TE	F A/ Tl	Nex Avg Acq	NS	ETL Turbo Factor	Phase Encode	Scan TIME (min)	Pixel Shift BW-kHz	
	ROUTINE																
	3 plane scout		Only GRE														
1	AX T2 SPAIR	3-4x0.5x0.6				0.4		4000	50-65								
2	Ax T1	3-4x0.5x0.6				0.4		600	6-9								
3	Cor STIR	3-4x0.5x0.6				0.4		4000	25-35								
4	Sag T2 FS	3-4x0.5x0.6				0.4		4000	50-65								
5	Cor T1	3-4x0.5x0.6				0.4		600	6-9								
↓ OPTIONAL ↓																	
	Sag STIR	3-4x0.5x0.6	Failed fat sat			0.4		4000	25-35								

Instructions: FOV and Coverage- Don't do whole foot in one setting. Ankle and hindfoot should be separate protocol and forfoot midfoot separate. If for midfoot pathology, like peroneus longus tendon or cuboid or base 5th MT fracture, use ankle protocol and extend the FOV to cover the pathology.

On axials, cover from naviculum-cunieform joint to distal toe skin. On coronal and sagittal, cover from skin to skin.

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.

