## St Vincents & Optimal Imaging Body MR Protocol Cheat Sheet

Ask a body Radiologist (Carter, Jurasic, Barbee or Howard) if you are unsure of which protocol to use after reviewing the exam indication and patient history. Specifics for each protocol are in the protocol book.

<u>Protocol</u>	<u>Order</u>	<u>Indications</u>
General Abdomen	abd	liver, spleen, adrenal and renal issues, other general abdominal complaints
Eovist	abd	must be approved by a body Radiologist, ordered specifically as Eovist protocol, FNH versus adenoma after inconclusive standard liver MR, cholangiocarcinoma, biliary anatomy, bile leak, hepaticojejunostomy evaluation, presurgical evaluation in colon metastases to the liver
Pancreas	abd	pancreatic mass, pancreatitis, gallbladder disease, biliary obstruction, cholethiasis, choledocholithiasis
MRCP	abd	usually ordered specifically as MRCP for cholecystitis, gallstones, biliary dilatation, choledocholithiasis, jaundice, pancreatitis, RUQ/epigastric pain
AP Combo	abd/pel	ordered as abdomen & pelvis
Enterography	entero	ordered specifically as enterography protocol for abdominal pain, inflammatory bowel disease, Crohns disease, ulcerative colitis, bowel obstruction, small bowel or colon mass
Rectal/Anal Mass	pel	rectal or anal mass/cancer
Routine Fistula	pel	fistulas involving the rectum, colon, bladder or vagina
Perianal Fistula	pel	fistulas involving the anus
Urography	abd/pel	must be approved by a body Radiologist, ordered specifically as urography protocol, renal/ureteral stones, hydronephrosis, hydroureter, hematuria.
Bladder	pel	bladder mass, bladder diverticulum, urethral/periurethral diverticulum
Unisex Pelvis	pel	ovarian mass, uterine fibroids/leiomyomas, endometriosis, pelvic pain, lymphadenopathy and any pelvis exam which does not have a more specific protocol
Uterus/Cervix/Vagina	pel	endometrial/cervical/vaginal cancer, post menopausal bleeding
Congenital Uterus	pel	congenital uterine/Mullerian anomalies; septate, arcuate bicornuate, unicornuate or didelphys uterus
Pelvic Floor (Defacography)	pel	ordered specifically as defecography protocol for fecal/urinary incontinence, constipation, urinary stasis, rectocele, cystocele, vaginal/uterine prolapse
Prostate	pel	prostate cancer and other prostate issues
Penis/Scrotum	pel	testicular/penile/scrotal tumor, infection, pain or trauma, implant integrity/malfunction
KidPrego	abd/pel	must be approved by a Radiologist, child or pregnant patients with pain, frequently for appendicitis
Placenta	pel	must be approved by a Radiologist, morbidly adherent placenta, placenta accreta/increta/percreta, placenta previa and placental abruption
ER Adult	abd/pel	must be approved by a Radiologist, ordered from ER when CT machine down or patient refuses CT
Chest	chest	pericardial, mediastinal, thymic masses/cyst, bronchogenic cyst
MRA Chest	chest	aortic aneurysm/dissection, pulmonary embolus
MRA Renal	abd	renal artery stenosis, hypertension
MRA Mesenteric	abd	mesenteric ischemia, celiac or superior mesenteric stenosis, portal vein thrombosis
MRA Pelvis	pel	pre surgical uterine artery embolization for fibroids, pelvic renal transplant