

# ER Adults

Updated

11/4/2023

Indications: primary indication is ER patients who refuse or cannot undergo CT imaging.

**This protocol must be approved by a Radiologist.**

**IV contrast is not given unless a Radiologist approves regardless of how it is ordered.**

If IV contrast is approved, just run the AP combo protocol.

The exam includes orders/requisitions for both the abdomen and pelvis. Put all images into one folder to send to PACS.

Place skin marker at site of maximal pain.

Full Abdomen FOV: Lung bases to iliac crest or to bottom of liver/spleen/kidneys if they extend low (top/bottom coverage) anterior to posterior subq fat (front/back coverage), right to left subq fat (right/left coverage).

Full Pelvis FOV: Iliac crests to few slices below introitus/anus (top/bottom coverage), greater trochanter to greater trochanter (right/left coverage), anterior pelvic wall skin to posterior buttock skin (front/back coverage).

Go to MRIMaster.com for a guide of proper positioning.

Pulse Sequence	PACS Name	plane	fat sat	slice (mm)	gap (mm)	first slice	Field of View
T2 HASTE/SSFSE	T2 COR	cor	no	7	1.4	front	full abdomen
T2 HASTE/SSFSE	T2 AX	ax	no	7	1.4	top	
T2 HASTE/SSFSE	T2 FS AX	ax	yes	7	1.4	top	
T1 VIBE/LAVA	T1 FS AX	ax	yes	3.5	0.6	top	
In/Out Phase w/ DIXON	IN/OUT AX	ax	no	5	1	top	
Diffusion (b50, b800, ADC)	DIFFUSION AX	ax	yes	7	1.4	top	
T2 HASTE/SSFSE	T2 SAG	sag	no	5	1	right	full pelvis
T2 HASTE/SSFSE	T2 AX	ax	no	7	1.4	top	
T2 HASTE/SSFSE	T2 FS AX	ax	yes	7	1.4	top	
T1 VIBE/LAVA	T1 FS AX	ax	yes	3.5	0.6	top	
Diffusion (b50, b800, ADC)	DIFFUSION AX	ax	yes	7	2	top	