

Anatomy: Forefoot-Midfoot  
 Sub-Anatomy: Foot 3T

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

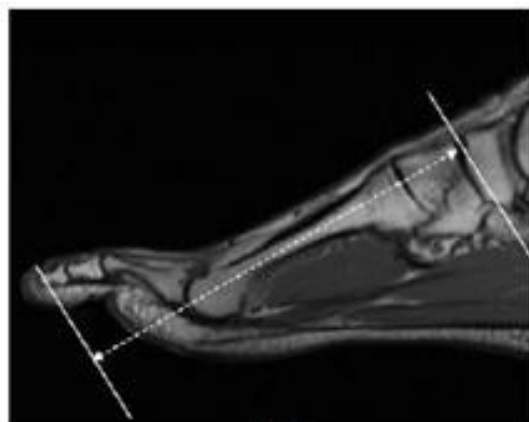
| SEQUENCE - BASICS   |                      |                      |                |       |           |          |                 |      |       |         |             |    |                  |              |                 |                    |  |
|---------------------|----------------------|----------------------|----------------|-------|-----------|----------|-----------------|------|-------|---------|-------------|----|------------------|--------------|-----------------|--------------------|--|
| PLANE               | SEQ                  | Slice thickness (mm) | Misc / Comment | M T X | % R F O V | Gap (mm) | Voxel size (mm) | TR   | TE    | F A/ TI | Nex Avg Acq | NS | ETL Turbo Factor | Phase Encode | Scan TIME (min) | Pixel Shift BW-kHz |  |
|                     | <b>3 plane scout</b> |                      | Only GRE       |       |           |          |                 |      |       |         |             |    |                  |              |                 |                    |  |
| 1                   | <b>Ax T2 SPAIR</b>   | 3-4x0.5x0.6          |                |       |           | 0.4      |                 | 4000 | 50-65 |         |             |    |                  |              |                 |                    |  |
| 2                   | <b>Ax T1</b>         | 3-4x0.5x0.6          |                |       |           | 0.4      |                 | 600  | 6-9   |         |             |    |                  |              |                 |                    |  |
| 3                   | <b>Cor STIR</b>      | 3-4x0.5x0.6          |                |       |           | 0.4      |                 | 3000 | 25-35 |         |             |    |                  |              |                 |                    |  |
| 4                   | <b>Sag PD FS</b>     | 3-4x0.5x0.6          |                |       |           | 0.4      |                 | 3000 | 35-40 |         |             |    |                  |              |                 |                    |  |
| 5                   | <b>Cor T1</b>        | 3-4x0.5x0.6          |                |       |           | 0.4      |                 | 600  | 6-9   |         |             |    |                  |              |                 |                    |  |
| 6                   | <b>Sag PD VISTA</b>  | 0.65 mm iso          |                |       |           | iso      |                 | 3000 | 40-45 |         |             |    |                  |              |                 |                    |  |
| <b>↓ OPTIONAL ↓</b> |                      |                      |                |       |           |          |                 |      |       |         |             |    |                  |              |                 |                    |  |
|                     | <b>Sag STIR</b>      | 3-4x0.5x0.6          | Failed fat sat |       |           | 0.4      |                 | 3000 | 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 5<sup>th</sup> MT fracture, use ankle protocol and extend the FOV to cover the pathology.

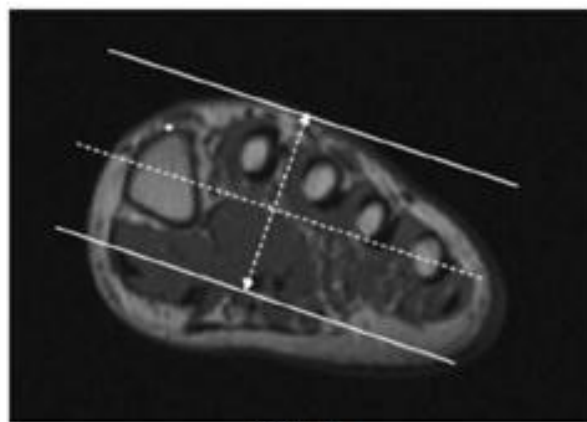
Recons: 0.65mm in coronal and axial planes

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

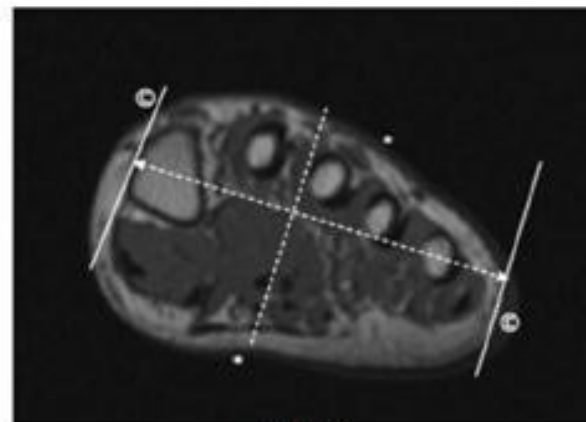
Others- Always put marker at the site of most pain, injury or swelling. If motion observed, stop the scan, instruct patient to lay still and repeat the sequence.



Axial



Coronal



Sagittal