

Anatomy: **LOWER EXTREMITY**
 Sub-Anatomy: **HIP - 3T MR arthrogram**

- Exams **ORDERABLE- HIP – Unilateral**
 - Routine Coil: **HIP (Torso coil)**

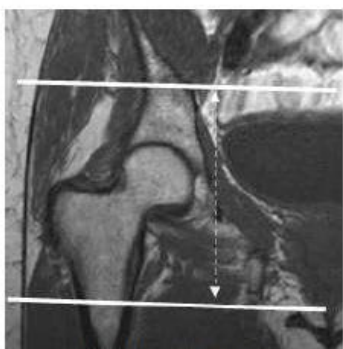
SEQUENCE - BASICS				VARIABLE PARAMETERS													
PLANE	SEQ	Slice thickness (mm)	Misc / Comment	M T X	Gap	% RFOV	Slice s	Voxel size (mm)	TR	TE	F A/ TI	Nex Avg Acq	NS	ETL Turbo Factor	Phase Encode	Scan TIME (min)	Pixel Shift BW-kHz
	ROUTINE																
	3 plane scout		Only use GRE														
1	Cor fsPD	3-4			10%			0.5x0.6	3000	35-40							
2	Cor 2D fs T1W	3-4			10%			0.5x0.6	600	6-9							
3	Sag 2D fs T1W	3-4			10%			0.5x0.6	600	6-9							
4	Ax 2D fsT1w	3-4			10%			0.5x0.6	600	6-9							
5	Sag 3D PD TSE	3D						0.7 iso									
6	Obi Ax PD	3-4			10%			0.5x0.6	3000	40-45							
7	Ax T1 VIBE no FS	3D															

Instructions: FOV and Coverage- On axials, cover above the acetabulum to femoral metadiaphyseal junction. On coronals, just anterior to femoral vessels to behind the ischial spine/tuberosity. On sagittals, cover from medial to acetabulum to slightly lateral to greater trochanter.

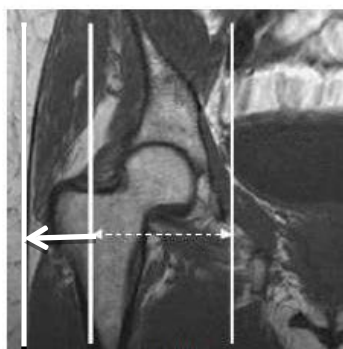
Large subject: Use torso coil, incr voxel for 3D to 0.75, if problem with SNR or wrap, etc- call OPB/PMH for remote monitoring help.

Reconstruction for 3D- 0.7 mm in coronal and axial planes.

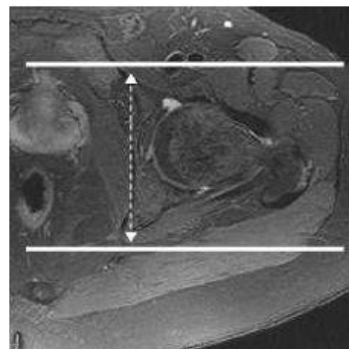
Others- Always put marker at the site of most pain, injury or swelling. If motion observed, stop the scan, instruct patient to lay still and repeat the sequence.



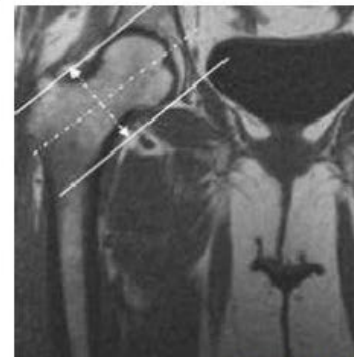
Axial Image Coverage



Sagittal



Coronal



Oblique Axial