

**ORDERABLE-
SHOULDER**

Anatomy: **UPPER EXTREMITY**
 Sub-Anatomy: **Rheumatology Shoulder- 3T Ortho**

- Exams
 - Routine

Coil: **Shoulder (avg pt) / mFlex coil (large pt)**

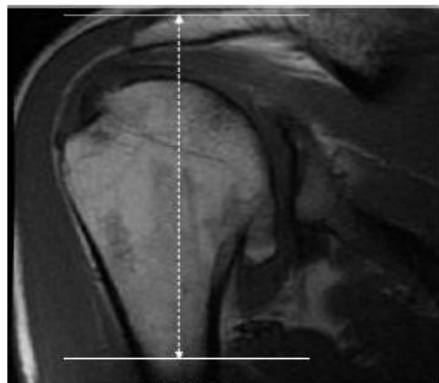
SEQUENCE - BASICS				VARIABLE PARAMETERS														
PLANE	SEQ	Slice Thickness (mm)	Misc / Comment	MTX	gap	% RFO V	Slices	Voxel size (mm)	TR	TE					ETL Turbo Factor	Phase Encode	Scan TIME (min)	Pixel Shift BW-kHz
	ROUTINE																	
	3 plane scout		Only use GRE															
COR	PD	3.5			10%			0.5x0.6	3000	40-45								
COR	PD FS	3.5			10%			0.5x0.6	3000	35-40								
SAG	PD mDIXON	3.5			10%			0.5x0.6	3000	35-40								
AX	PD FS	3.5			10%			0.5x0.6	3000	35-40								
SAG	3D PD SPAIR	3-4			10%			0.65X0.65	3000	55								
AX	DWI	4/0	7b values															
SAG	mDIXON pre	3D		iso				1x1x1										
COR	4D TRAKS		25 dynamics															
SAG	mDIXON post	3D		iso				1x1x1										
↓ OPTIONAL ↓																		
SAG	STIR	3-4	Failed fat sat		10%			0.5x0.6	3000									

Instructions: FOV and Coverage- On axials, cover from humeral meta-diaphyseal junction to the skin surface. On coronals, cover deltoid to deltoid- oblique, parallel to scapula. On sagittals, cover from skin to chest wall- oblique- perpendicular to scapula. Put some towel/cloth over the shoulder to avoid coil shine through near skin surface.

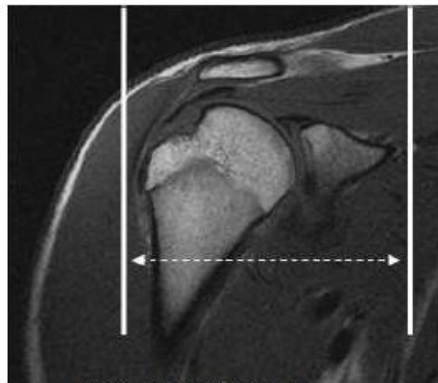
Large subject: Increase voxel- to 0.75 mm, use mFlex coil, if problem with SNR or wrap, etc- call OPB/PMH for remote monitoring help.

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.

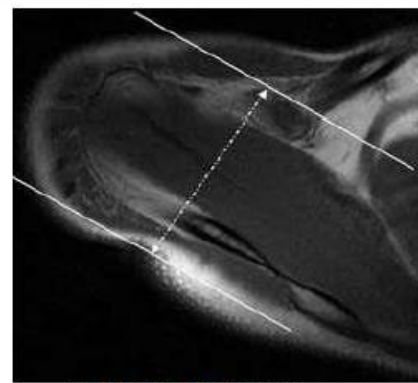
4D TRAKS use weight based dose and start injection and scan at the same time. Make sure there is 25 dynamic scans. 2cc/sec



AXIAL Coverage



SAGITTAL OBLIQUE Coverage



CORONAL OBLIQUE Coverage