

Anatomy: SI Joint, Sacrum, Coccyx  
 Sub-Anatomy: Pelvis 1.5T or 3T

- Exams  
 - Routine

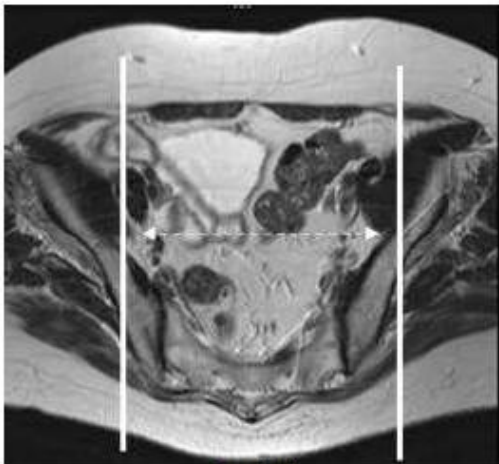
**ORDERABLE- Pelvis**

Coil: Spine coil: for large patient Torso 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>	<b>4x0.6x0.7</b>				0.4		4000	50-65								
2	<b>Ax T1</b>	<b>4x0.6x0.7</b>				0.4		600	6-9								
3	<b>Cor ObI T1</b>	<b>4x0.6x0.7</b>				0.4		600	6-9								
4	<b>Cor ObI STIR</b>	<b>4x0.6x0.7</b>				0.4		2000	25-35								
5	<b>Sagittal T2 Dixon</b>	<b>4x0.6x0.7</b>				0.4		4000	50-65								
<b>↓ OPTIONAL ↓</b>																	
	<b>Ax STIR</b>	<b>4x0.6x0.7</b>	Failed fat sat			0.4		2000	25-35								

**Instructions: FOV and Coverage-** On axials, cover from L4-5 to just below lesser trochanters and from skin to skin. On coronal oblique (shovel shot), cover the sacrum and coccyx from iliac bone to iliac bone just beyond SI joints. On sagittals, again cover the sacrum and coccyx from iliac bone to iliac bone just beyond SI joints, top to bottom coverage is from L4-5 to lesser trochs covering the entire coccyx..

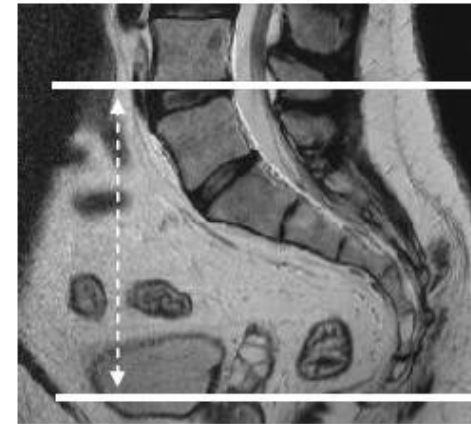
**Others-** Always put marker at the site of most pain, injury or swelling. If motion observed, stop the scan, instruct patient to lay still and repeat the sequence.



Sagittal



Coronal-Oblique



Axial