Using initial Axial Localizer, create a 2 Chamber Localizer. Approximately 5 slices.

Using the 2 Chamber Localizer image, create a 4 Chamber Localizer. Approximately 5 slices. Right-Click on the 2 Chamber localizer image and select “perpendicular”.

Using the initial straight Sagittal and Coronal Localizer, do a T1 Axial series. This should have a “black blood” appearance.

Use a 28cm FOV, 4mm slice thickness, and a 2mm gap. Cover from below the heart to above the pulmonary arteries. The scanner acquires 1 slice per breathhold.

Using the initial straight Sagittal and Coronal Localizer, do a T2 Axial CINE series. This should have a “bright blood” appearance.

Use a 28cm FOV, 4mm slice thickness, and a 2mm gap. Cover from below the heart to above the pulmonary arteries. The scanner acquires 2 to 3 slices per breathhold. Acquire a minimum of 16 phases.
Using a “black blood” T1 Axial image and a 4 Chamber Localizer image do a T2 CINE 2 Chamber series. Approximately 3 slices.

Use a 38cm FOV, 4mm slice thickness, and a 2mm gap. The scanner can acquire 3 slices per breathhold. Acquire a minimum of 16 phases. When prescribing this series, right-click the T1 Axial image and select “perpendicular”.

Using a 2 Chamber CINE image and a 4 Chamber localizer image, do a T2 CINE Short Axis series. Approximately 16 slices.

Use a 38cm FOV, 4mm slice thickness, and a 2mm gap. The scanner can acquire 3 slices per breathhold. Acquire a minimum of 16 phases. When prescribing this series, right-click the 2 Chamber CINE image and select “perpendicular”.

Using a T2 CINE Short Axis image and a 2 Chamber CINE image, do a T2 CINE 4 Chamber series. Approximately 3 slices.

Use a 38cm FOV, 4mm slice thickness, and a 2mm gap. The scanner can acquire 3 slices per breathhold. Acquire a minimum of 16 phases. When prescribing this series, right-click the Short Axis CINE image and select “perpendicular”.

Using a T2 CINE Short Axis “snowman” image, do a LVOT (left ventricular outflow tract) series. Approximately 3 slices.

Use a 38cm FOV, 4mm slice thickness, and a 2mm gap. The scanner can acquire 3 slices per breathhold. Acquire a minimum of 16 phases. When prescribing this series, right-click the Short Axis CINE image and select “perpendicular”.
When the diagnosis is pulmonary hypertension, do a T1 Black Blood Coronal series instead of a T1 Black Blood Axial series. Also do a T2 CINE Coronal series instead of the T2 CINE Axial series. Check with the Radiologist to see if a Pulmonary Angiogram is needed.

When the diagnosis is pericarditis, use the ARVD protocol and add a Grid-Tagging sequence also.

For any other diagnosis, check with a Radiologist.