MRCP WITH IV CONTRAST (10-6-2015)

Coronal Scans: T2 HASTE / SSFSE

Average Scanning Parameters:
- 360 mm FOV
- 8 mm slice thickness
- 2 mm slice gap
- 22 slices

Axial Scans: T1 In Phase / Out of Phase, T2 HASTE/SSFSE, T2 Fat Sat

Average Scanning Parameters:
- 360 mm FOV
- 8 mm slice thickness
- 2 mm slice gap
- 24 slices

Haste IR / SSFSE Coronal Single Thick Slice Imaging
Average Scanning Parameters:
- 250 mm FOV
- 40-80 mm slice thickness
- No slice gap
- Scan 1 image per location with the angles similar to what is pictured.

Haste IR / SSFSE Coronal
Average Scanning Parameters:
- 280 mm FOV
- 4 mm slice thickness
- No gap
- Cover biliary system
Have the patient drink 12 ounces of Pineapple or Blueberry Juice 10-15 minutes prior to scan.

**Axial Scans:** T1 3D VIBE/LAVA Fat Sat Pre Contrast, Immediate Post Contrast, 2 minute delay, 5 minute delay

*Use Bolus Tracking – Have patient hold breath and start immediate post contrast scan when contrast reaches the liver

Average Scanning Parameters:
360 mm FOV
Slice thickness – thin as possible but staying within a single breath-hold

Subtract the pre contrast T1 FS 3D Axial from each post contrast T1 FS 3D Axial sequence. Send the resulting 3 sequences to synapse.

**Haste IR / SSFSE Axial**
Average Scanning Parameters:
280 mm FOV
4 mm slice thickness
No gap
Cover biliary system through kidneys

**T2 3D Coronal Respiratory Triggered**
Average Scanning Parameters:
380 mm FOV
1.5 mm slice thickness
1 slab / 40 slices

This is a respiratory triggered scan. Do a localizer with the patient breathing to allow for accurate scan placement. On Siemens machines, place the navigator box at the dome of the liver with half of the box inside the liver. Center the navigator on a sagittal image at the same time to make sure that it really is at the dome of the liver. During this sequence you may need to ask the patient to alter their breathing (slower or faster, deeper or shallower)