NOTE:

- Explain every step of the exam to the patient before beginning; cooperation is a key factor for this exam.
- We should not be sedating patients who are undergoing this exam as they will not be able to complete the required functions of the procedure while under sedation.
- Position the patient with their knees bent as much as the space within the magnet bore allows.

VERY IMPORTANT: All patients should have 240 cc KY jelly in the rectum. Place chucks/towels under the patient. Use a 60cc catheter tip syringe connected to 4-6 inch clear tube connected to enema tip to place KY jelly in the rectum.

T2 Coronal Localizer – Confirm presence of KY Jelly in Rectum

Average Scanning Parameters:

280 mm FOV
6 x 0 mm slice thickness
16 Slices

T2 Sagittal Localizer – Confirm presence of KY Jelly in Rectum

Average Scanning Parameters:

280 mm FOV
6 x 0 mm slice thickness
16 Slices

T2 Axial

Average Scanning Parameters:

280 mm FOV
5 x 1 mm slice thickness
36 Slices
T2 Sagittal

Average Scanning Parameters:

240 mm FOV
5 x 1 mm slice thickness
20 slices

Phase Direction should be Head to Foot / S to I.

T2 TruFisp Sagittal

Average Scanning Parameters:

200 mm FOV
10 mm slice thickness (1 slice @ 1sec. scan time)

Center at level of pubic symphysis. Obtain sequence with patient in resting state. Verify image and ensure optimal view of rectal canal before proceeding to next sequence.

T2 TruFisp Sagittal (run 3 times)

Average Scanning Parameters:

200 mm FOV
10 mm slice thickness (1 slice @ 1sec. scan time)

Center at level of pubic symphysis. Obtain sequence with patient in a state of maximal constriction of the anal sphincter. Repeat this sequence patient resting between each sequence.

T2 TruFisp Sagittal (run 3 times)

Average Scanning Parameters:

200 mm FOV
10 mm slice thickness (1 slice @ 1sec. scan time)

Center at the level of the pubic symphysis. Obtain sequence with patient bearing down and straining as hard as possible without defecating. Repeat this sequence during maximal strain with patient resting between each sequence.
Instructions for the next sequence: Likely the patient will already have the urge to defecate due to the presence of the KY jelly in the rectum. Do not tell the patient to strain in order to defecate, just simply to defecate out the jelly. After the series is done & the patient was not able to defecate, repeat again with a minimum of 3 attempts. Confirm with patient if defecation occurred & if straining to defecate was done. In theory, a normal patient should not need to strain to defecate out the jelly, rather the patient should be able to just relax & defecate. Be sure to document in Tech Notes if the patient strained to defecate.

**T2 TruFisp Sagittal (Repeat x3, minimum)**

**Average Scanning Parameters:**

- 200 mm FOV
- 10 mm slice thickness
- 25 slice dynamic (1sec per slice)

Center at the level of the pubic symphysis. Instruct patient to relax for the first 5 slices, defecate over the next 15 slices & relax for the remaining 5 slices.

**T2 TruFisp Coronal**

**Average Scanning Parameters:**

- 240 mm FOV
- 10 mm slice thickness
- 25 slices – Dynamic

Position the slice through the rectum and anus. Instruct patient to relax for the first 5 slices, strain with maximal effort & defecate over the next 15 slices & relax for the remaining 5 slices. Patient may only have minimal amount of KY left, instruct to strain & defecate remaining KY.