Brachial Plexus (July 2, 2009)

Axial Scans: T1, STIR, T1 Fat Sat Post Contrast (if contrasting patient)

Average Scanning Parameters:
- 240 mm FOV
- 5 mm slice thickness
- 1 mm slice gap
- 24 slices

Scan from mid C3 to below the shoulder joint (affected side only)

Sagittal Scans: T1

Average Scanning Parameters:
- 240 mm FOV
- 5 mm slice thickness
- 1 mm slice gap
- 36 slices

Scan from the lateral side of the humerus through the spine (affected side only)

Coronal Scans: STIR

Average Scanning Parameters:
- 400 mm FOV
- 5 mm slice thickness
- No slice gap
- 24 slices

Include both sides. Scan from the posterior spine through the sternoclavicular joints.

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Perform these exams with contrast if there is a suspicion of a mass or tumor, infection, history of cancer, or history of radiation therapy to the area.

**Coronal Oblique Scans:** T1, STIR, *T1 Fat Sat Post Contrast (if contrasting patient)*

Average Scanning Parameters:

- 240 mm FOV
- 5 mm slice thickness
- 1 mm slice gap
- 22 slices

Scan the affected side only. Oblique the images toward the Axial plane by matching the angle of the lower half of the Cervical Spine. Then oblique the images toward the Sagittal plane to match the path of the brachial plexus. Use the Subclavian artery as a reference point, the brachial plexus should parallel it.