University Health™	**POLICY #: Rad Proc 14. 15. 12**
SUBJECT: APPENDIX	**Effective: 10/1/2013** **Revised: 2/2015: 10/2017**
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ORIENTATION: FEET FIRST/SUPINE COIL: HD BODYFULL

PLANE	3 Plan Loc SSFSE BH	Calibraion scan BH	COR SSFSE	Ax SSF SE	COR 2D FIESTA ASSET FS	Ax T1 LAVA BH	Ax T2 FS PELVIS	OP AX T2 FRFS RTr	OP Ax T2 FRFSE R Tr FatSAT
SEQ	Spin Echo	Gradient Echo	Spin Echo	Spin Echo	Fiest	LAVA	FRFSE-XL	FRFSE-XL	FRFSE-XL
MODE	2D	2D	2D	2D	2D	3D	2D	2D	2D
IMAGING OPTIONS	Seq/Fast/ SS	Fast/ Calib	Fast/S S	Fast/S S	Seq/Fast/Asset	Fast/ZIP51 2/Asset/	FC/NPW/EDR/TRF/F ast/zip512/fr	TRF/Fast/RT/ FR	TRF/Fast/RT/FR
TE	80		80	80	Min Full		100	90	90
TR	Minimum		Minim um	Mini mum			3384		
FLIP ANGLE					75	12			
ETL							22	13	13
BW	62.5		83.33	83.33	100	62.5	27.78	50	50
FOV	40	48	40	40	40	40	34	40	40
SLICE THICKNESS	8	15	8	8	8	3	4	8	8
SLICE SPACING	5	0	2	2	2		1	2	2
Frequency	320		384	384	224	320	320	320	320
Phase	190		224	224	320	192	256	224	224
NEX				1	1		4	4	4
PHASE FOV	1		1	1	1	0.9	0.9	1	1

FREQ DIR	Unswap	A/P	S/I	S/I	S/I	R/L	A/P	Unswap	Unswap
FLOW COMP DIR							Slice		
SHIM	Auto	Auto	Auto	Auto	Auto	Auto	Auto	Auto	Auto
PHASE CORRECT	Off	Off	Off	ON	ON	Off	Off	ON	ON

NOTES: In the pregnant patient, the appendix may be displaced by the uterus. Acquire the cor ssfse and ax ssfse and call the Radiologist. The Radiologist will determine the remaining sequences that will be acquired. The Radiologist must give directions regarding the angle of the slices for the obl frfse and fspgr (to make sure that we are imaging in the correct area and at the correct angle). The slices will be obliqued or angled to the appendix.

OP AX FRFSE Rtr and OP AX FRFSE FS Rtr may be utilized if the pt is unable to breathe hold for the exam.