Reviewed: Jan 2022 Updated: Sept 2020



MRI FOOT (WHOLE) WITHOUT & WITH CONTRAST

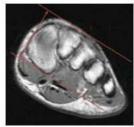
Indications	General pain, mid-foot pain
Scan Range	Variable according to area of interest/ body part.
FOV	Fits to patient/ body part.
Position	Supine. Place in foot coil so metatarsals near center.
Localizer	3 plane scout localizer
NOTES	REMOVE SOCKS or STOCKINGS if any
	Increase FOV if needed for patient size / pathology

All MSK extremity should have a pre con T1 axial FS and post con T1 axial FS. A second plane post is a MUST, preferably to the plane of the lesion. If the tech is unsure or cannot ask a rad for help, do 3 planes post (axial, sag, cor) T1 FS post con.

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PLANE	SEQUENCE	FAT SAT	MODE	SLT/SP	FOV	NOTES
Sagittal	T1				small FOV	
Axial	T1				small FOV	
Coronal	T2	Υ			small FOV	
Sagittal	STIR				small FOV	
Axial	PD	Υ			small FOV	
Coronal	T1	Υ			small FOV	
Coronal + C	T1	Υ			small FOV	
Sagittal + C	T1	Υ			small FOV	

POSITIONING AND PLANES





Prescribe AXIALS off sagittal and coronal scout

Example resulting image

AXIALS - LONG AXIS

- Use Sag LOC and angle parallel to the shaft of either the 2nd or 3rd metatarsals and at least cover the soft issues superior and inferior to the MTP joints
- Cover all of the toes and as far proximal as the field of view allows. THIS SHOULD BE TO THE TARSAL BONES
- · Angle parallel to the TOP LINE of the 2nd and 3rd metatarsal necks

POSITIONING AND PLANES



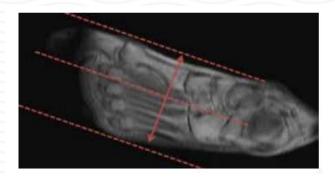
Prescribe CORONAL off axial plane



Example resulting image

CORONAL - SHORT AXIS

- Perpendicular to Axial long axis
- · Angled parallel to 2nd MTP joint or perpendicular to 2nd metatarsal shaft
- Cover at least to the talonavicular joint



Prescribe SAGITTAL off axial plane



Example resulting image

SAGITTAL

- Perpendicular to AXIAL and CORONAL
- Parallel to 2nd metatarsal shaft on Axial sequence
- · Cover from tips of the toes (if requested) as far proximal as the FOV allows
- Cover from medial margin of 1st MTP joint as far lateral as the slices go (tcover all of the MTP joints)