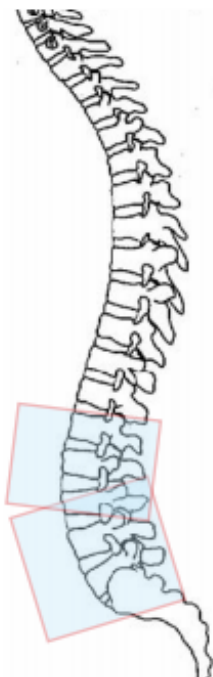


## MRI L-SPINE WITHOUT CONTRAST

|                    |   |
|--------------------|---|
| <b>Indications</b> | <b>Radiculopathy, degenerative disease, disc disease, fracture, osteoporosis</b>  |
| <b>Localizer</b>   | 3 plane scout   |
| <b>Note</b>        | Any patient that had prior lumbar surgery <b>MUST</b> be scanned without and with contrast. Contact the Radiologist if ordered without prior to scanning the patient. |
|                    | <b>Contact the Radiologist if the patient has multi-level spine studies ordered before performing any of the studies.</b>   |

| <b>PLANE</b> | <b>SEQUENCE</b> | <b>FAT SAT</b> | <b>SLT/SP</b> | <b>FOV</b> | <b>NOTES</b>   |
|--------------|-----------------|----------------|---------------|------------|--|
| Sagittal     | T2              |                | 4 / 1         | 28 cm      | Cover from T12 through S2  |
| Sagittal     | T1              |                | 4 / 1         | 28 cm      | Cover from T12 through S2  |
| Sagittal     | STIR            |                | 4 / 1         | 28 cm      | Cover from T12 through S2  |
| Axial        | T1              |                | 4 / 1         | 16 - 18 cm | Scan axials as 2 continuous blocks through L spine. 1. T12-L2/3, angle to L2. 2. L3-S1, angle to L4/5.   |
| Axial        | T2              |                | 4 / 1         | 16 - 18 cm | These may need to be scanned separately if you experience cross-talk/artifact. Do not prescribe axials in one single block without prior radiologist approval. |



- Abnormalities should be in one stack of axials.
- Do not place the end or beginning of the stack within the abnormality!

