MRI Protocols: Abdominal/Pelvic Malignancies

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Disclosures

• none
Abdominal Mass Protocol

- 3T (+/- 1.5T)
- Cor T1
- Cor FSE-T2/fs (navigator)
- Ax FSE-T2/fs (navigator)
- Gad (Gadavist™)
- Ax VIBE/fs
- Cor VIBE/fs
  - Sedated pts: Radial VIBE
  - Dynamic post-Gd
Abdominal Mass Protocol

- 3T (+/- 1.5T)
- Cor T1
- Cor FSE-T2/fs (navigator)
- Ax FSE-T2/fs (navigator)
- Gad (Gadavist™)
- Ax, Cor VIBE/fs
  - Sedated pts: Radial VIBE
  - Dynamic post-Gd: Breath hold
Abdominal Mass Protocol: Post-Contrast Considerations

• Liver Mass Protocol
  – Same as Abd/mass except EOVIST™
  – Includes DWI of abdomen
  – T2 and DWI during 20 min hepatocyte phase
  – Dynamic: 3X, needs breath-hold

• Post-Gd
  – High NEX T1/fs vs radial VIBE
• DWI: Abdomen or Abdomen/Pelvis
  – Initial exam, lesion detection
  – f/u to assess response; lesion characterization
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  – Initial exam, lesion detection
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Abdominal Mass Protocol: Other Considerations

• Turbo STIR vs FSE-T2/fs

• Sagittal or Sag/Oblique
  – (NBL, Wilms, Pelvic RMS)

• In/Out of phase
  – renal masses, some liver

• HASTE vs FSE-T2/fs in chest (Irregular RR)

• T1/fs vs VIBE: pelvis
Abdominal Mass Protocol: Other Considerations

- Turbo STIR vs FSE-T2/fs
- Sagittal or Sag/Oblique (NBL, Wilms, Pelvic RMS)
- In/Out of phase (renal masses, some liver lesions)
- HASTE vs FSE-T2/fs in chest (Irregular RR)
- PD w/o fs (pelvic floor lesions)