

PAEDIATRIC PROTOCOLS NEW ABDOMINAL MASS

CLINICAL INDICATIONS	Investigation of a new abdominal mass- ? Wilm's/Neuroblastoma etc (not Liver)	
PATIENT PREPARATION	MRI safety checklist completed and checked If scanned under GA, must be prepped as per Anaesthetic Department protocols. Non GA, NBM 4 hours prior, changed into gown/pyjamas. IV Line inserted Earplugs/headphones are essential. Emergency buzzer is essential if non GA.	
PATIENT SET-UP	POSITION	Supine, Head first
PATIENT SET-UP	COIL/S	Spinal Mat and Body Matrix Spinal Matt and 32Ch Spinal Matt/Flex Coil/s for smaller children
IMAGING PROTOCOL	SEQUENCES	RANGE AND ORIENTATION
IMAGING PROTOCOL	Select protocol suitable to patient age and size as set out on scanner	
IMAGING PROTOCOL	3 Plane Localiser	
IMAGING PROTOCOL	t2_blade_fs_cor_p2_trig	Anterior to posterior to cover entire abdominal cavity, ensuring all of the liver and lower chest is included to past the iliac crests In Smaller children, the FOV should cover entire abdomen/pelvis
IMAGING PROTOCOL	t2_blade_fs_tra_p2_trig	Axial from lower chest to iliac crests ensuring whole ROI is covered. Respiratory triggered acquisition
IMAGING PROTOCOL	t1_vibe_opp-in_tra_p2_bh	to cover range as per t2_blade_fs_tra
IMAGING PROTOCOL	epd2_diff_b50_400_100_free breathing	to cover ROI
IMAGING PROTOCOL	t2_fs_blade_tra_Whole Pelvis	Axial from the iliac crests to the lesser trochanter of the pelvis
IMAGING PROTOCOL	t1_vibe_fs_tra_pre	to cover range as per t2_blade_fs_tra
IMAGING PROTOCOL	t1_vibe_fs_cor_pre	to cover range as per t2_blade_fs_cor_trig
IMAGING PROTOCOL	Contrast	
IMAGING PROTOCOL	t1_vibe_fs_tra_post_11_40_120	As per Pre scan

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	t1_vibe_fs_cor_post_3mins	As per Pre scan
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CONTRAST MEDIA	Type	Dotarem
	Volume	0.2ml/kg on 3T
	Administration	Power Injector IV
	Test Bolus	N/A
	Flow Rate	1.5mls per sec neonates/under 5 yo 2mls per sec older children
	Timing	11 secs for arterial in younger Paeds 15-20 secs arterial for older (teenagers')
	Delayed Imaging	1 hour if non GA may be required

OPTIONAL SEQUENCES	t1_fl2d_tra_p2_mbh through ROI t1_vibe_fs_tra_post_5mins or 8mins t2_fs_cor_Whole Pelvis Coronal STIR Whole Body (Bone Mets ?Neuroblastoma) t2_fs_blade_tra through ROI after Coronal STIR
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POST PROCESSING	N/A
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SPECIAL CONSIDERATIONS	Younger children not being scanned under general anaesthetic may require a parent or guardian in the room. All accompanying people must complete a separate safety questionnaire and go through all safety checks as per the patient. Small children may require to be scanned under General Anaesthetic
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