

Endometriosis MRI Protocol

- MRI Pelvis with and without IV Contrast
- Administer:
 - 3 x 12cc syringes of vaginal contrast
 - 1 x 60cc syringe of rectal contrast if rectal involvement is suspected
 - Weight based Gadavist

Body Phased Array Sequence	Plane	Comment
TrueFISP Scout	3 planes	
T2 TSE	Sag	<ul style="list-style-type: none"> • Non-breath hold. • Small Field of View • Cover femoral head to femoral head right to left and all female pelvis anatomy. • Add anterior saturation band. • Use 4-6mm slices
T2 TSE	Straight Ax	<ul style="list-style-type: none"> • Axial Straight • Cover female pelvis
Diffusion Weighted Imaging	Ax	<ul style="list-style-type: none"> • Diffusion B = 0, 50, 100, 400, 800 • Cover female anatomy or suspicious pathology
T2 TSE	Oblique coronal	<ul style="list-style-type: none"> • Coronal oriented parallel to uterus • Non-breath hold 2-3 acquisitions • Small FOV
T1 in/out Dixon	Ax	<ul style="list-style-type: none"> • Small FOV • Cover female organs only
VIBE pre	Sag	<ul style="list-style-type: none"> • Small slab/FOV • 2mm slice thickness
VIBE pre large	Ax	<ul style="list-style-type: none"> • Aortic bifurcation to symphysis pubis
VIBE Post	Sag	<ul style="list-style-type: none"> • Small slab/FOV • 2mm slice thickness
VIBE Post Large	Ax	<ul style="list-style-type: none"> • Aortic bifurcation to symphysis pubis