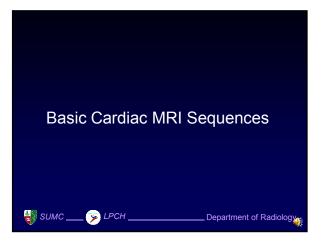


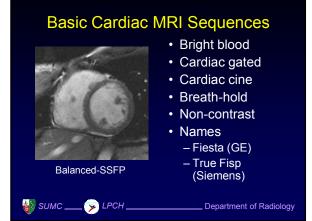
Objectives

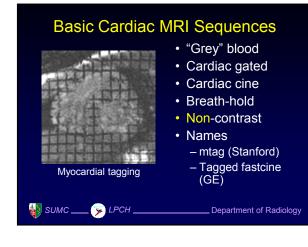
- To know the basic types of clinically used cardiac MRI sequences
- To understand how cardiac MRI records the moving heart
- To understand trade-off in noise and performance
- To learn how to set up standard cardiac planes and a cardiac function protocol

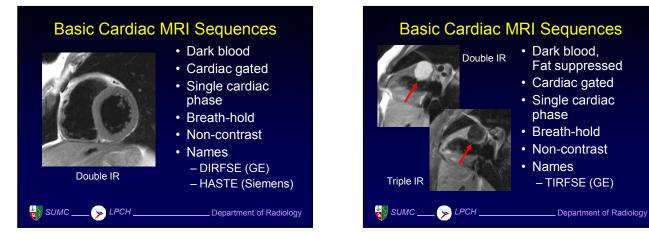
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🍯 SUMC ____ 🦻 LPCH ___
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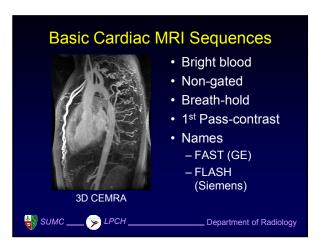
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___ Department of Radiology
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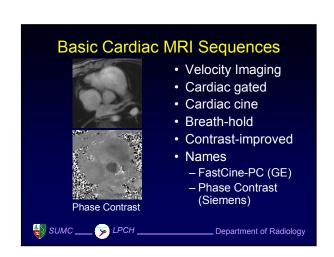


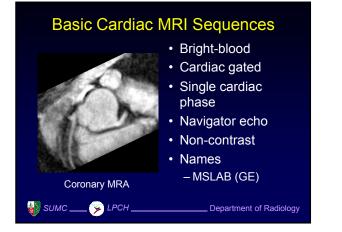








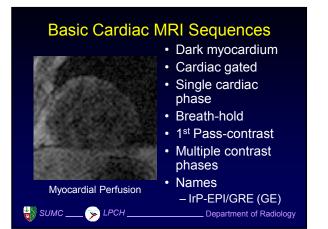




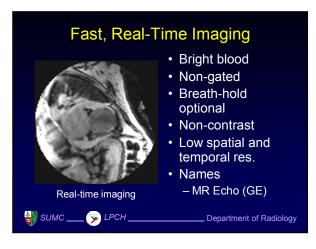
Basic Cardiac MRI Sequences



- Dark myocardium
- Cardiac gated
- Single cardiac
- Breath-hold
- Post-contrast
- TFLASH (Siemens)
 - Department of Radiology





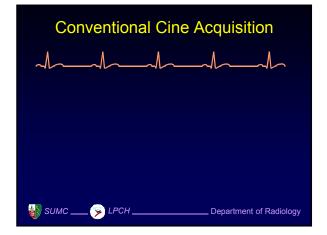


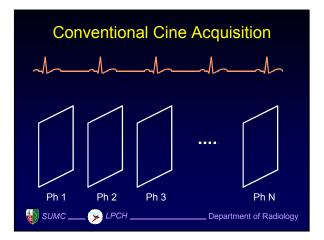
Gated cine

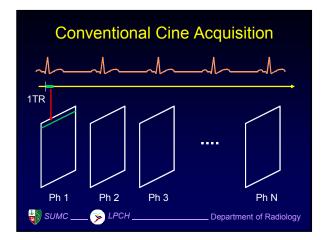
- Almost all cardiac sequences assume periodic, repeating cardiac motion
- Each RR-interval records part of the kspace information
- To build up multiple frames of k-space information requires multiple heart beats
- The method of dividing up the k-space is called segmented k-space.

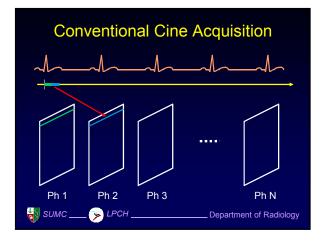
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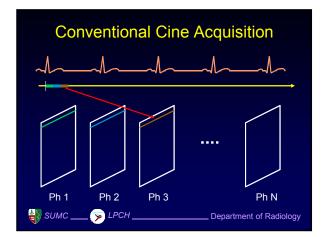
🐇 sumc ____ 🦻 LPCH ___

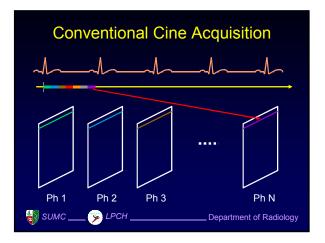


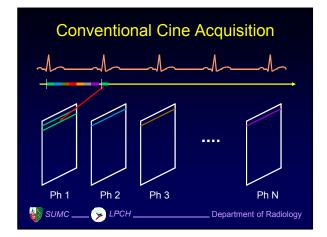


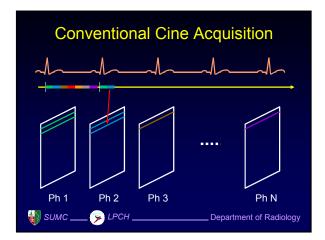


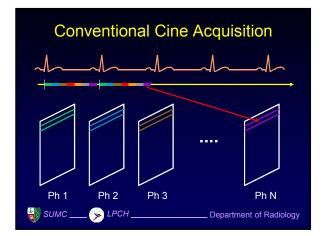


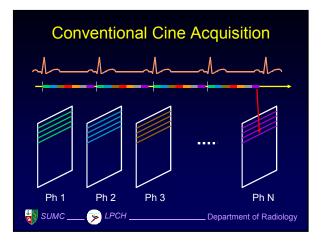












Questions How long does this scan take? Phase encodes x RR-interval

- At 60 bpm, 192 lines, how long?
 3 minutes 12 seconds
- What is the temporal resolution?
 TR
- In real terms?
 - ~ 5 ms

🍯 SUMC ____ 🦻 LPCH _

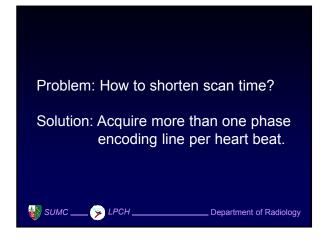
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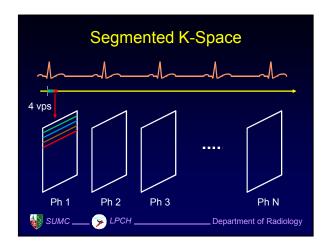
Conventional Cardiac cine

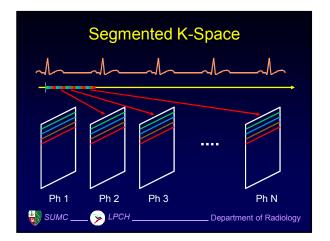


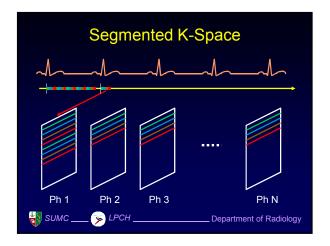
- Best possible temporal res.
- Long scan time
- Respiratory
 - motion
- Means of control – Resp. comp.
 - Resp. comp. – Resp. gating
 - Breath-hold

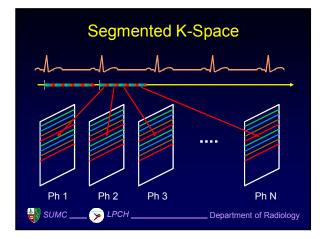
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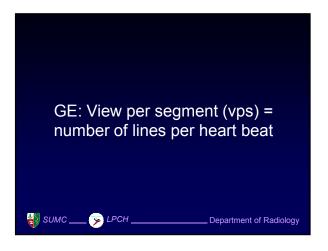




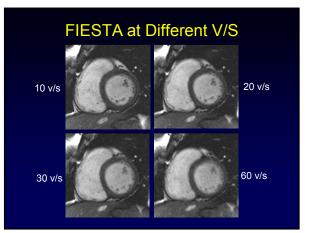




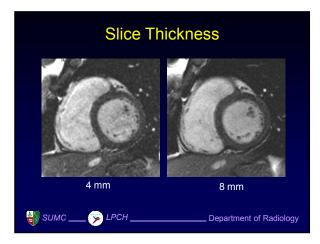


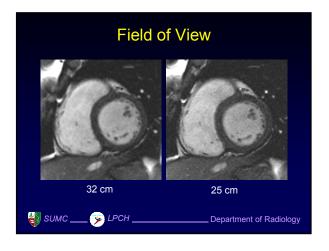


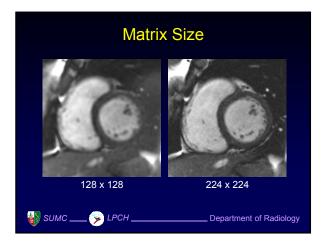
Questions • How long does this scan take? • Phase encodes x RR-interval / view per segment • At 60 bpm, 192 lines, 8 vps, how long? • 24 seconds • What is the temporal resolution? • TR x view per segment • In real terms? • 40 ms for 8 v/s and TR=5 ms

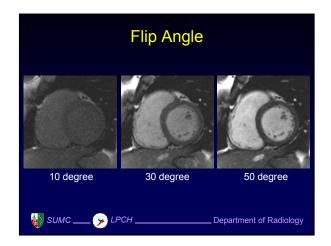


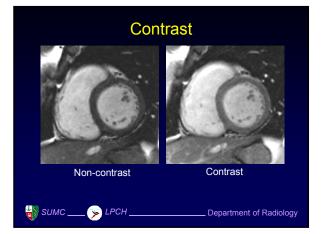


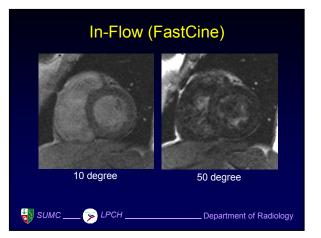


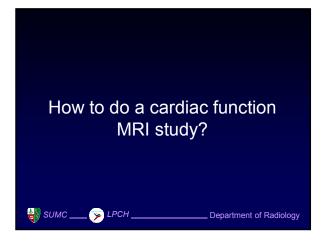












Optimal MRI Protocol

- Every image taken must serve a diagnostic goal.
- The number of sequences and breath-holds should be minimized.
- Fast sequences and parallel imaging should be used whenever possible, but ...
- Sequences should be grouped according to contrast usage.

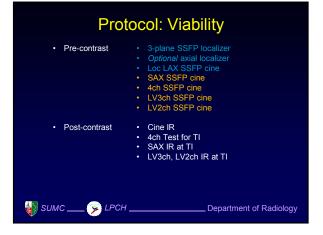
SUMC ____ > LPCH _____ Department of Radiology

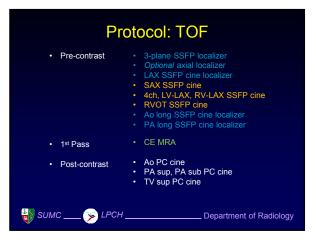
• Oblique planes should be prescribed in the least number of intermediate steps.

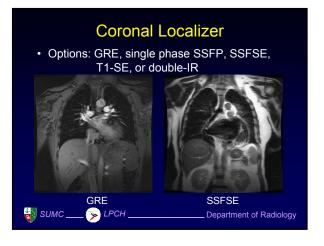
Protocol: Cardiac Function

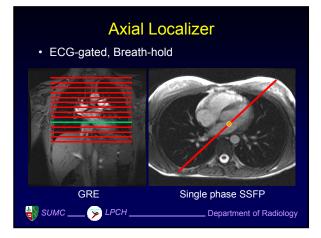
- Pre-contrast
- Optional axial localizer LAX SSFP cine localizer
- SAX SSFP cine
- 4ch SSFP cine LV3ch SSFP cine LV2ch SSFP cine RV3ch SSFP cine RV2ch SSFP cine
- RVOT SSFP cine

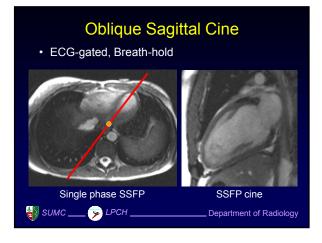
- Ao PC cine PA PC cine TV PC cine MV PC cine

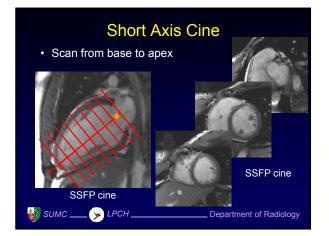


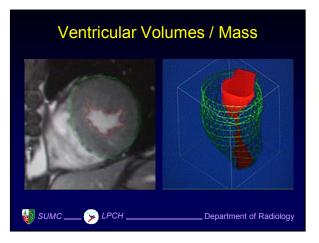


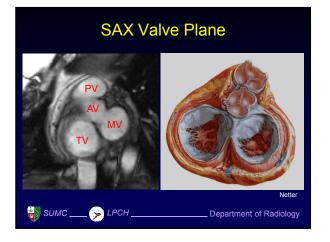


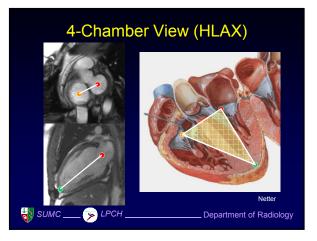


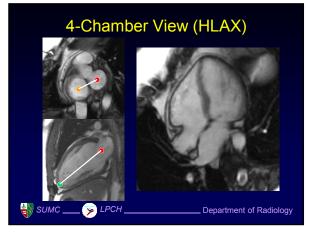


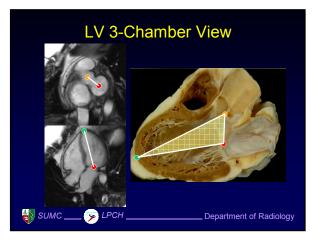


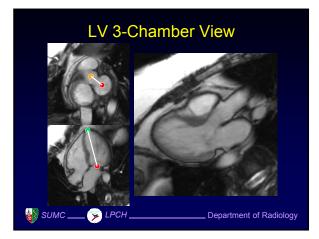


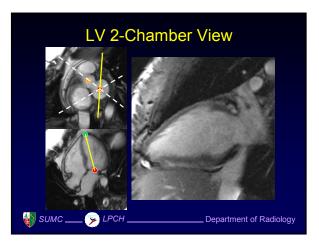


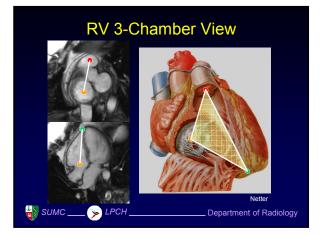


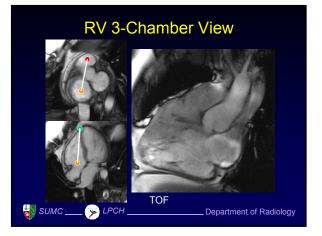


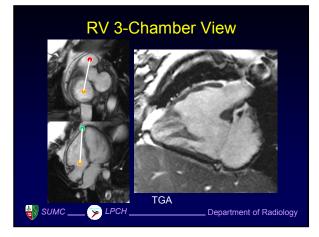


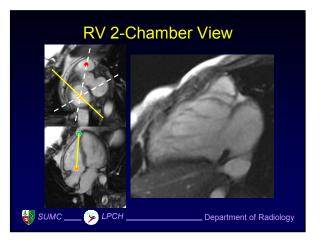


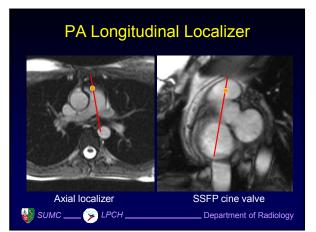


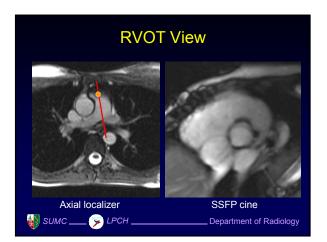


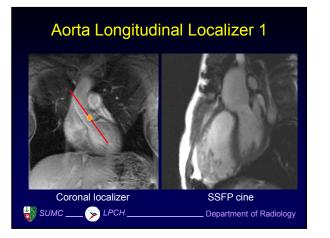


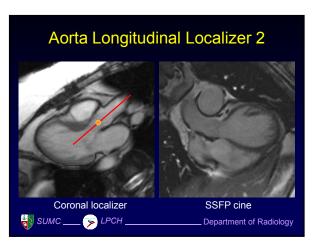


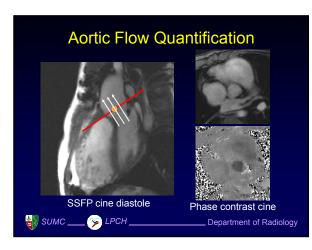


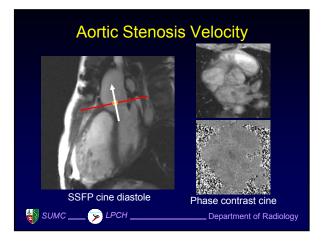


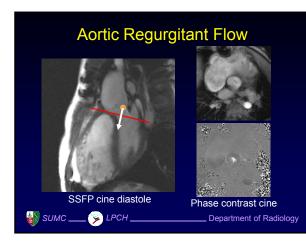


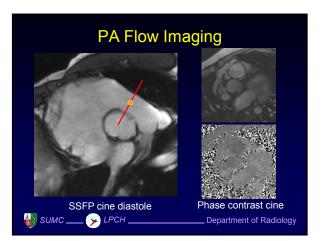












Cardiac Output / Shunt Ratio

