

MRI Pregnant Patient

Updated 06/06/26

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This protocol must be approved by a Radiologist.

IV contrast is not given unless a Radiologist approves regardless of how it is ordered.

Charge as MR abdomen w/o or MR pelvis w/o depending on where the maximal pain is located.

Place skin marker at site of maximal pain. Center CC FOV at site of maximal pain.

There is a separate protocol for evaluating placental issues in pregnant patients.

Go to MRIMaster.com for a guide of proper positioning.

Pulse Sequence	PACS Name	plane	fat sat	slice (mm)	gap (mm)	first slice
T2 HASTE/SSFSE	T2 COR	cor	no	5	1	front
T2 HASTE/SSFSE	T2 FS COR	cor	yes	5	1	front
T2 HASTE/SSFSE	T2 AX	ax	no	5	1	top
T2 HASTE/SSFSE	T2 FS AX	ax	yes	5	1	top
T2 HASTE/SSFSE	T2 SAG	sag	no	5	1	left
True FISP	TRUE FISP AX	ax	no	5	1	top
In/Out Phase w/ DIXON	IN/OUT AX	ax	no	5	1	top
T1 VIBE/LAVA	T1 FS AX	ax	yes	3.5	0.6	top
Diffusion (b50, b800, ADC)	DIFFUSION AX	ax	yes	7	1.4	top