



Guidelines for MR Imaging of Sports Injuries

European Society of Skeletal Radiology
Sports Sub-committee

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Abbreviations and clarifications

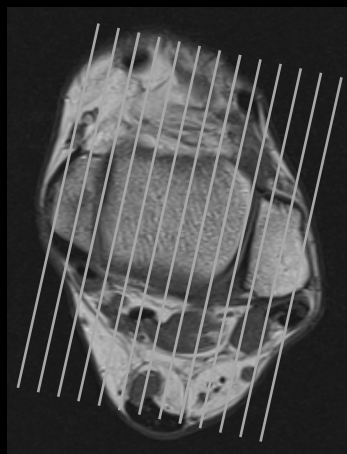


- Ax = axial
- Cor = coronal
- Sag = sagittal
- FOV = field of view
- PD = proton density
- TE = time to echo in milliseconds
- FS = fat suppressed
- Int = intermediate
- Int FS: this is a fat suppressed sequence with a long TR and a TE between that of a traditional PD (e.g. TE= 10-20) and a traditional T2 (e.g. TE=80-100). The advantage of this sequence is that the TE is short enough to maintain sufficient signal for visualisation of the anatomy (like a PD) yet long enough to be more fluid sensitive (like a T2)
- For STIR sequence, TI (inversion time) should be 140-150 at 1.5T

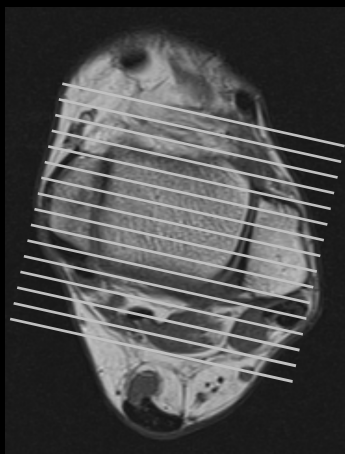
Ankle (Hindfoot)

- Patient feet first; dedicated coil
- Foot close to neutral position, avoid too much plantar or dorsi flexion
- Sagittals: 90° to intermalleolar axis - include surrounding skin of hindfoot
- Align coronals to intermalleolar axis
- Straight axials align 90° to tibia
- Oblique coronals at 45° (or approx 90° to posterior facet)

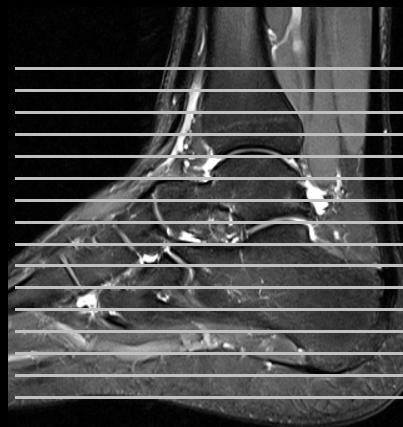
Sagittals



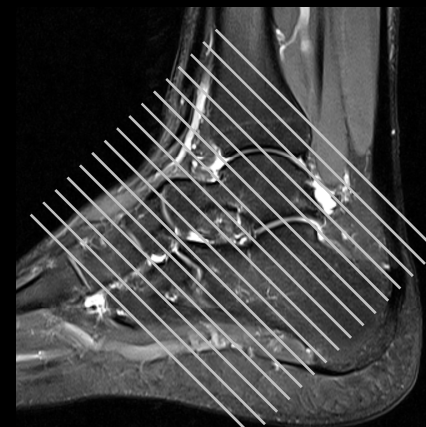
Coronals



Straight Axials



Oblique Coronals



Ankle (Hindfoot)



	FOV (max)	Slice (max)	TE	Matrix (min)
Sag STIR	18 cm	3 mm	30	320x288
Sag T1	18 cm	3 mm	Min	320x272
Cor Int FS	16 cm	3 mm	40-60	256x230
Cor T1	16 cm	3 mm	Min	256x230
Ax PD	16cm	3 mm	10-20	256x218
Ax Int FS	16 cm	3 mm	40-60	256x218

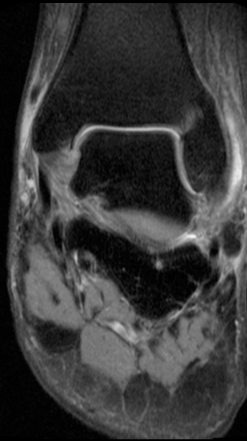
Ankle (Hindfoot)



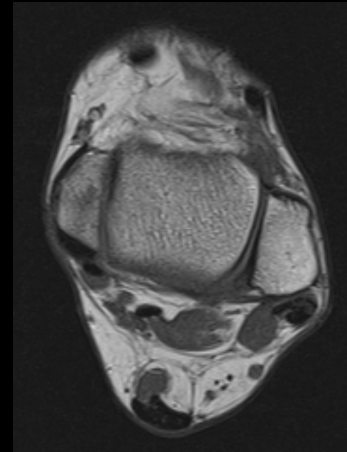
Sag STIR



Cor Int FS



Ax PD



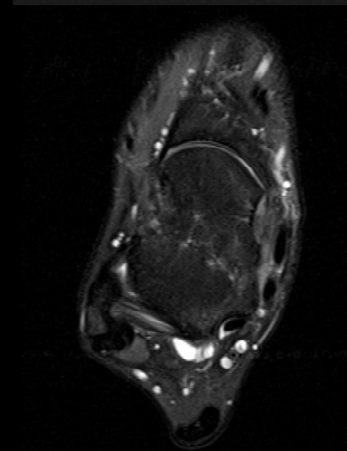
Cor Obl Int FS



Sag T1



Cor T1



Ax Int FS