

CERVICAL SPINE			
Exam	Axial	Sagittal	Coronal
Routine	- T2 - T2* MERGE	- T2 FSE - T1 - STIR	
Trauma or vertebral height loss: Routine plus →	- T2* traditional GRE (spinal cord hematoma detection)		- T2 fat sat FSE - T1 FSE
Flexion/extension: Routine plus →		- T2 FSE flexion (labeled) - T2 FSE extension (labeled)	
Routine with contrast (tumor/mets/infection/MS/post-op)	- T2* MERGE - T2 FSE - T1 post	- T1 - T2 FSE - T1 post fat sat	

Note: If spinal hardware use metal suppression technique (IDEAL) if available

THORACIC SPINE			
Exam	Axial	Sagittal	Coronal
Routine	- T1 - T2 FSE	- T2 cervical spine localizer - T1 - T2 FSE - STIR	
Routine with contrast (tumor/mets/infection/MS /post-op)	- T1 pre - T2 FSE - T1 post	- T2 cervical spine localizer - T1 pre - T2 FSE - STIR - T1 post fat sat	
Vascular Malformation		- T1 whole spine - T2 whole spine (use to define tricks slab, usually cover T6-L2 discuss with radiologist)	- TRICKS (fov 34 craniocaudal, 3.2 mm thick, 1.6 mm gap, 256 x 128 matrix, TR 3.14 ms, TE 0.8 ms) - T1 for masking - T1 post with masking (3 mL/sec minimal delay)

Note: If spinal hardware use metal suppression technique (IDEAL) if available

LUMBAR SPINE			
Exam	Axial	Sagittal	Coronal
Routine	- T1 - T2 FSE	- T1 - T2 FSE - STIR	
Routine with contrast (tumor/mets/infection/MS /post-op)	- T1 pre - T2 FSE - T1 post	- T1 pre - T2 FSE - STIR - T1 post fat sat (if spinal hardware no fat sat)	

Note: If spinal hardware use metal suppression technique (IDEAL) if available

PEDIATRIC SPINE PROTOCOLS			
Exam	Axial	Sagittal	Coronal
Tethered cord or sinus tract	- T1 lumbar spine through coccyx - T2 FSE lumbar spine through coccyx	- T1 whole spine through coccyx - T2 FSE whole spine through coccyx	
Scoliosis entire spine		Entire spine in 2 or 3 stations to cover from posterior fossa to S2: - T2 FSE - T1 FSE Call rad to check if additional imaging required	

Note: If spinal hardware use metal suppression technique (IDEAL) if available