

Pregnant –Abdomen/Pelvis for Placenta Accreta

MR Abd + Pel Without

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Contact: (866) 761-4200, Option 1

NOTE: Call radiologist before starting patient

Indications: This is for use with **PREGNANT** patients in the 2nd and 3rd trimesters to evaluate for placenta accreta spectrum disorder

Oral contrast: None.

Bladder: Should be moderately filled.

Coil: Phase array body coil.

Scanner: 1.5T

Coverage: Uterus

Intravenous contrast: None.

****IV contrast contraindicated in pregnancy*****

Sequences:

1. **3 plane localizer with breath hold**
2. **Coronal T2 Ultra fast SE (HASTE, SSFSE, FASE)**
 - a. FOV: To include entire uterus (320-400 mm)
 - b. Parameters
 - i. Slice thickness 4mm, no gap
3. **Axial T2 Ultra fast SE (HASTE, SSFSE, FASE)**
 - a. FOV: To include entire uterus (320-400 mm)
 - i. Will likely need more than 1 stack
 - b. Parameters
 - i. Slice thickness 4mm, 1 mm gap
4. **Sagittal T2 Ultra fast SE (HASTE, SSFSE, FASE)**
 - a. FOV: To include entire uterus (320-400 mm)

- b. Parameters
 - i. Slice thickness 4mm, no gap

5. Axial T1 TSE with fat saturation

- a. FOV: to include entire uterus (320-400 mm)
 - i. Will likely need more than 1 stack
- b. Parameters
 - i. Slice thickness 4 mm, no gap

6. Axial DWI

- a. FOV: to include entire uterus (320-400 mm)
- b. Free breathing
- c. Parameters
 - i. Slice thickness 5mm, no gap

7. Sagittal DWI

- a. FOV: To include entire uterus (320-400 mm)
- b. Free breathing
- c. Parameters
 - i. Slice thickness 5mm, no gap

****CHECK IMAGES WITH BODY RAD as additional acquisition(s) orthogonal to the placenta will likely be necessary****

Additional that might be asked for:

8. Oblique Axial Ultra fast SE (HASTE, SSFSE, FASE)

- a. Orthogonal to the placenta (discuss with radiologist)

9. TRUE FISP/FIESTA SSFP Sagittal and/or Oblique Axial to the placenta

- a. To include the bladder and lower half of the uterus