BODY MRI PROTOCOL REFERENCE

MR RECTUM

Patient prep · Sequences · Initial Staging and Re-Staging

IMAGEN

1 Patient prep and planning

PATIENT PREP: MICROENEMA Initial Staging: Optional. Re-Staging: Recommended.	**LARGE FoV PELVIC SURVEY** T2 sagittal and axial, 4-6mm slices, no gap. Required for Initial Staging and Re-Staging. Used to plan small FoV obliquities.
SMALL FoV T2 ANGLES Initial Staging: angles based on radiologist input. Re-Staging: default to same angles as Initial Staging.	**SMALL FoV DWI/ADC ANGLE** Same angle as small FoV, high res T2 axial oblique.

2 Sequence specifications (2026 ESGAR Consensus)

SEQUENCE	SPECIFICATION	INITIAL STAGING	RE-STAGING
Large FoV pelvic survey	T2 sagittal and axial, 4-6mm slices, no gap.	Required	Required
Small FoV, high-res T2	Axial oblique, coronal oblique, and sagittal; ≤3mm slices, no gap, in-plane res <1x1mm.	Required	Required
Small FoV DWI/ADC	Axial oblique (b-value 50 & ≥800), 3-4mm slices, no gap.	Required	Required
LARGE FoV WHOLE PELVIS DWI/ADC	**Axial (b-value 50 & ≥800), 4-6mm slices, no gap.**	**Optional**	**Optional**
LARGE FoV WHOLE PELVIS T1 FS PRE	**Axial, 3-4mm slices.**	**Not required**	**Optional. Agreed with Optum to be routinely performed on Re-Staging.**
LARGE FoV WHOLE PELVIS T1 FS POST	**Axial, sagittal, and coronal, 3-4mm slices.**	**Not required**	**Optional. Agreed with Optum to be routinely performed on Re-Staging.**