

SABER X



Gerenciamento profissional Ltda.

TOMOGRAFIA COMPUTADORIZADA • RESSONÂNCIA MAGNÉTICA • HEMODINÂMICA
ARCO CIRÚRGICO • MAMOGRAFIA • RADIOLOGIA DIGITAL • DENSITOMETRIA ÓSSEA



Protocolos de Ressonância

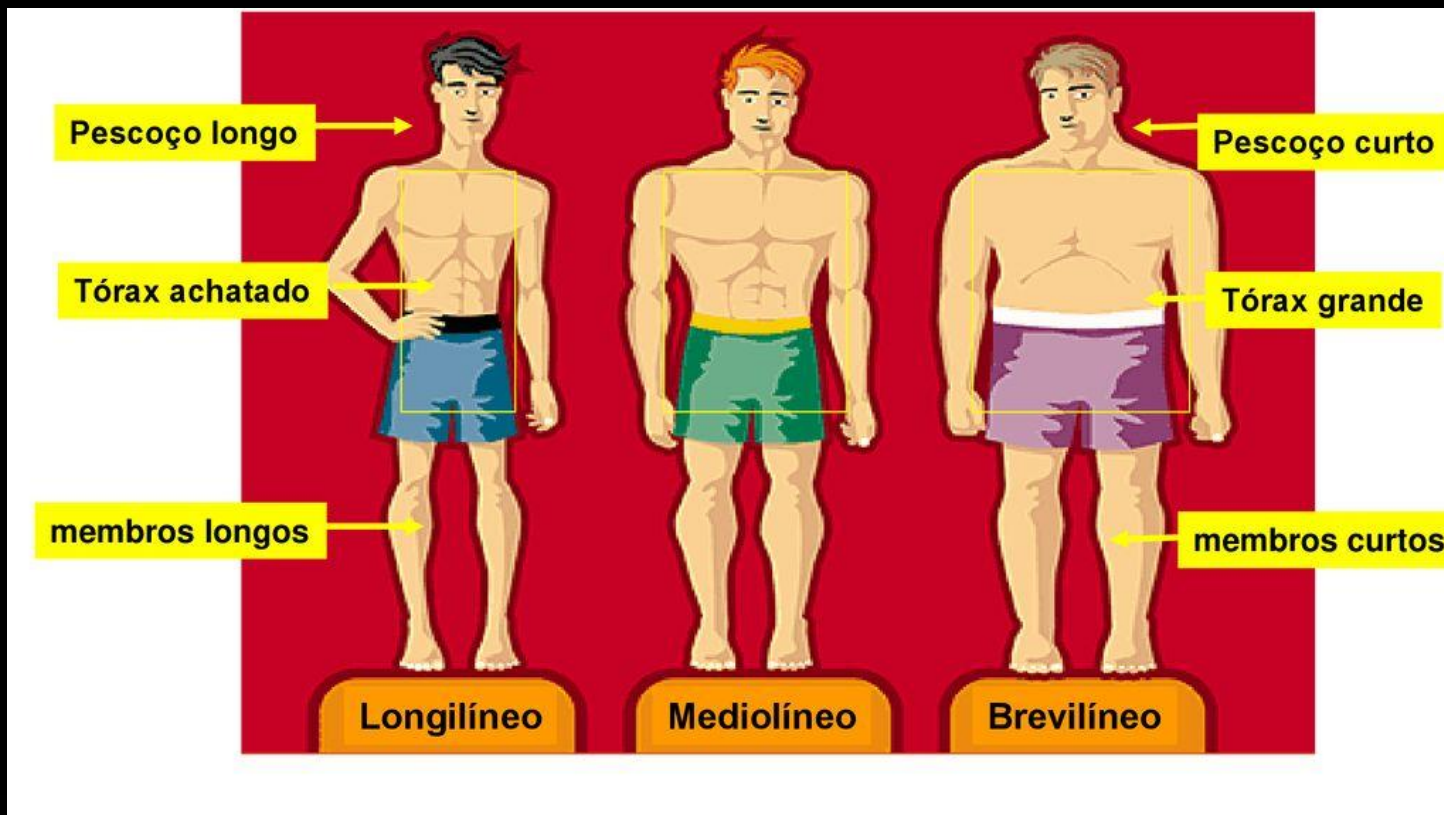


Rm Abdome



Gerenciamento profissional Ltda.





TIPOS DE TÓRAX



Chato



Tonel



Cifótico



Infundibiliforme



Cariniforme



TÓRAX BREVILÍNEO

Anterior



Posterior

Diâmetro antero-posterior

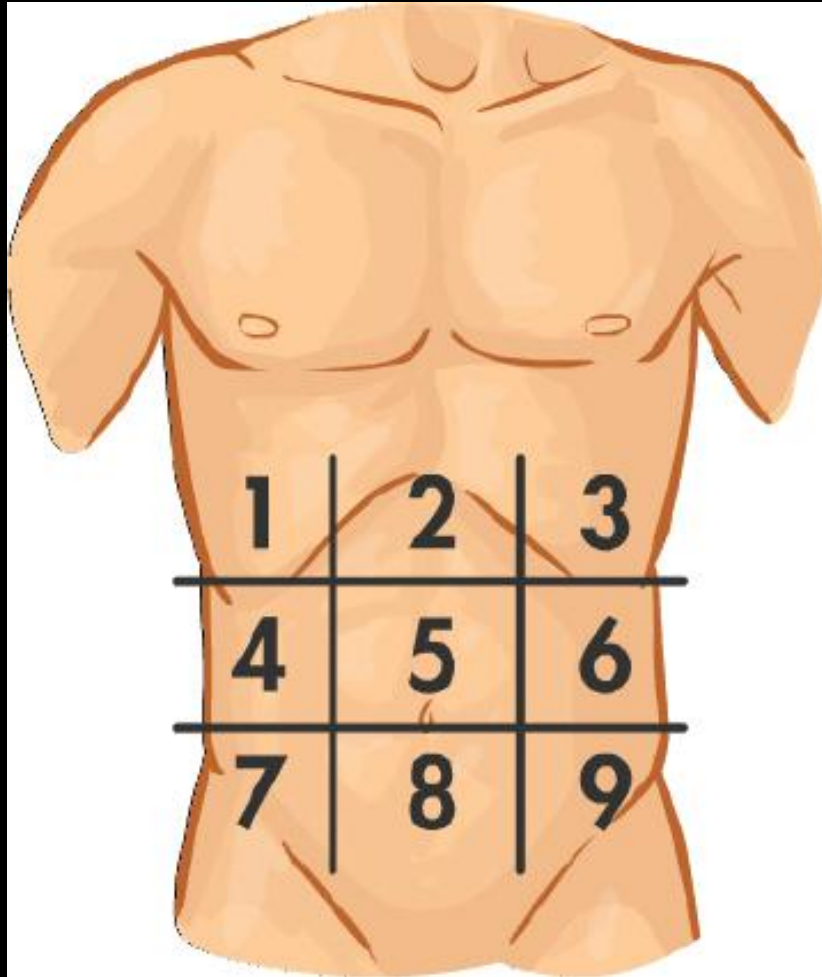


TÓRAX LONGILÍNEO



Diâmetro antero-posterior

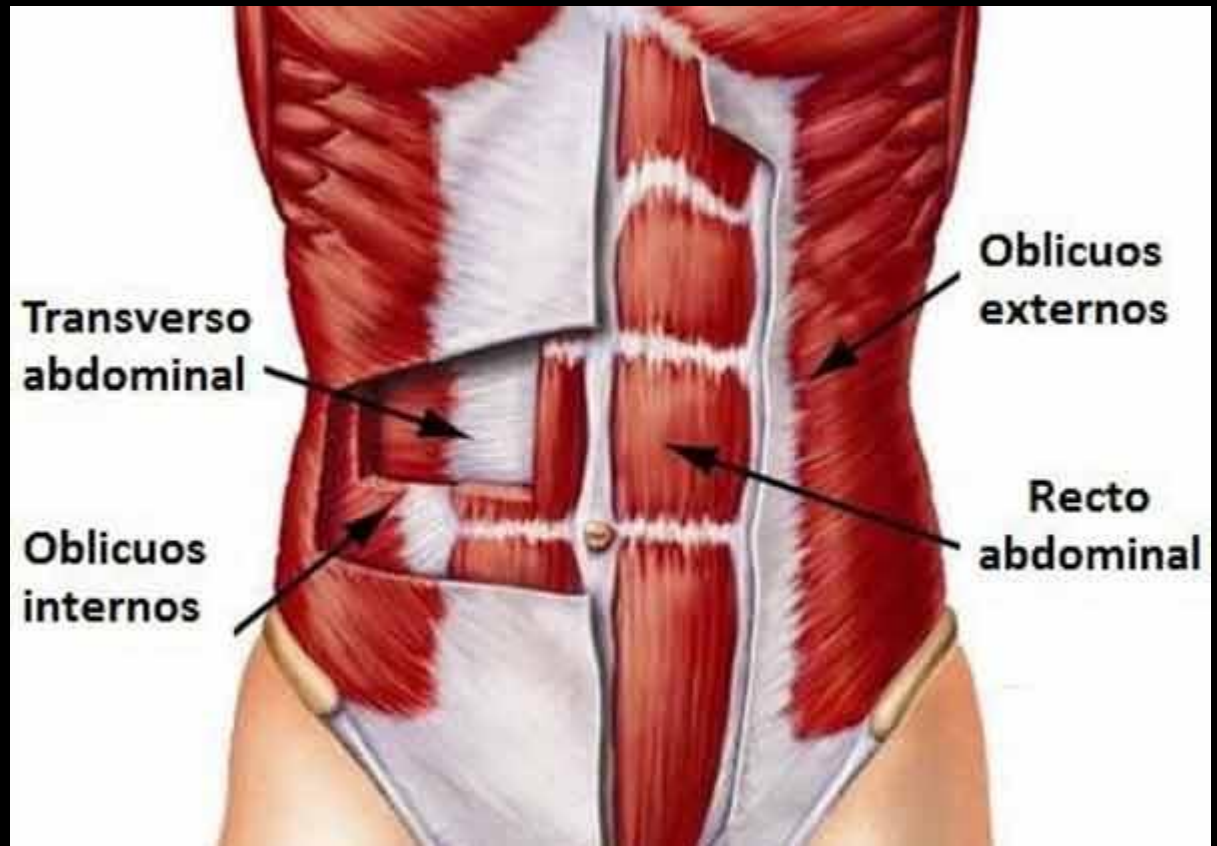




Regiões do abdome

1. Hipocôndrio direito
2. Epigástrico
3. Hipocôndrio esquerdo
4. Flanco direito
5. Mesogástrico
6. Flanco esquerdo
7. Fossa Ilíaca direita
8. Hipogástrico
9. Fossa Ilíaca esquerda





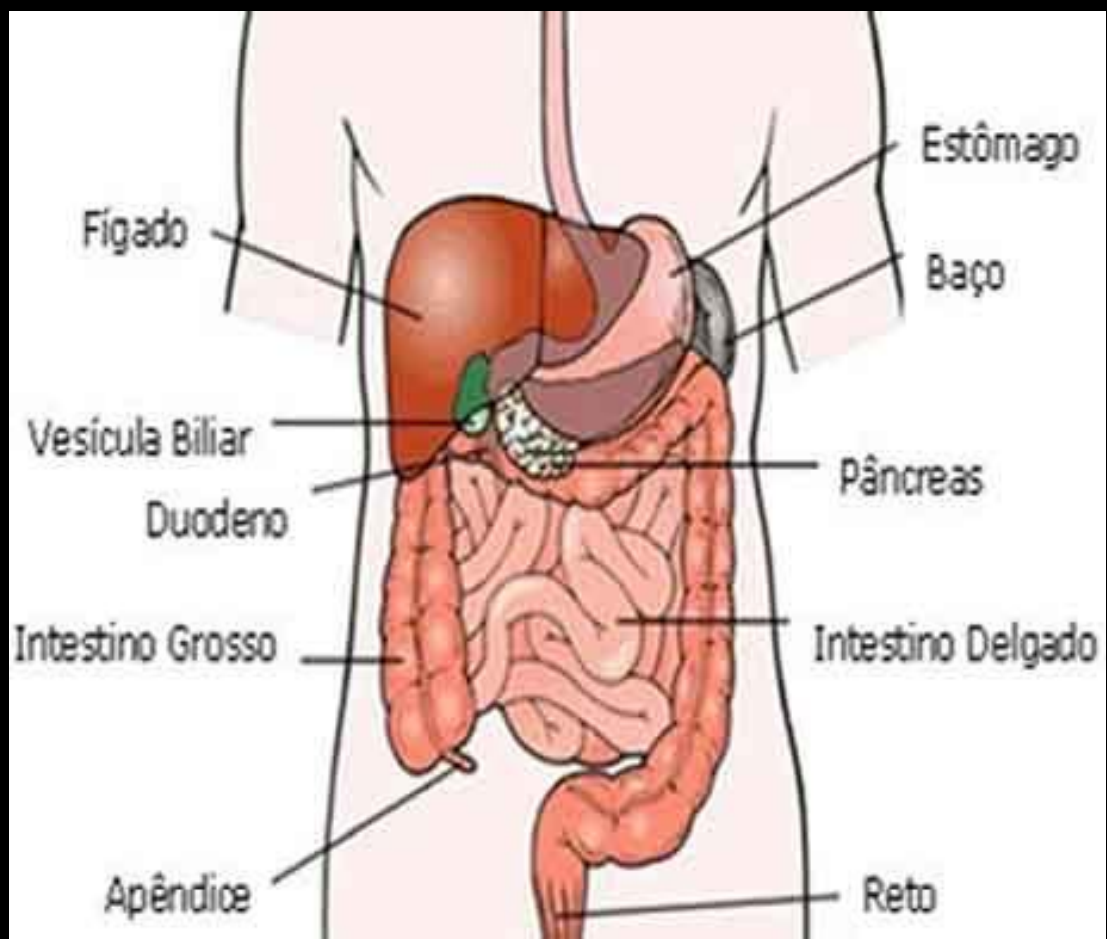
Transverso abdominal

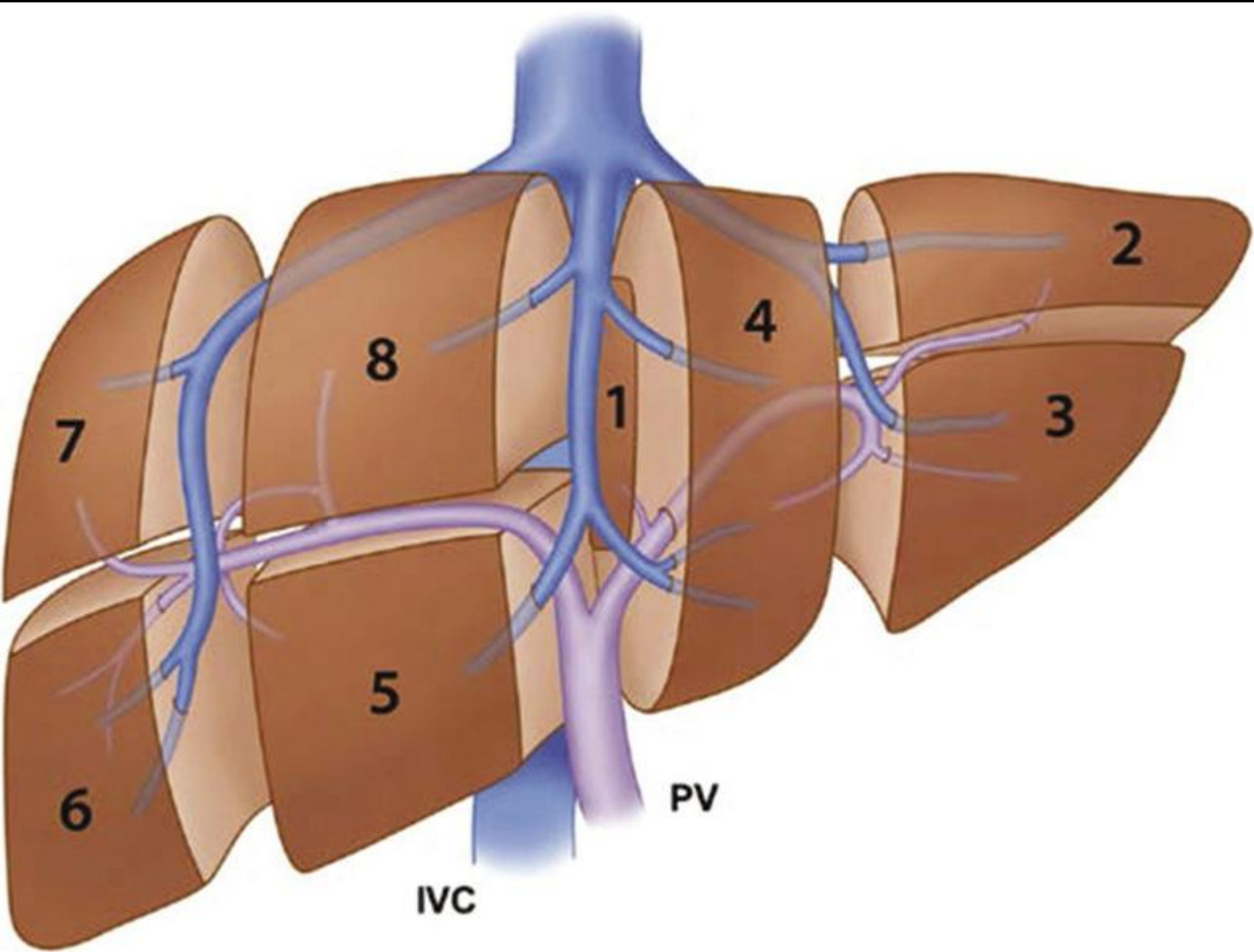
Oblicuos internos

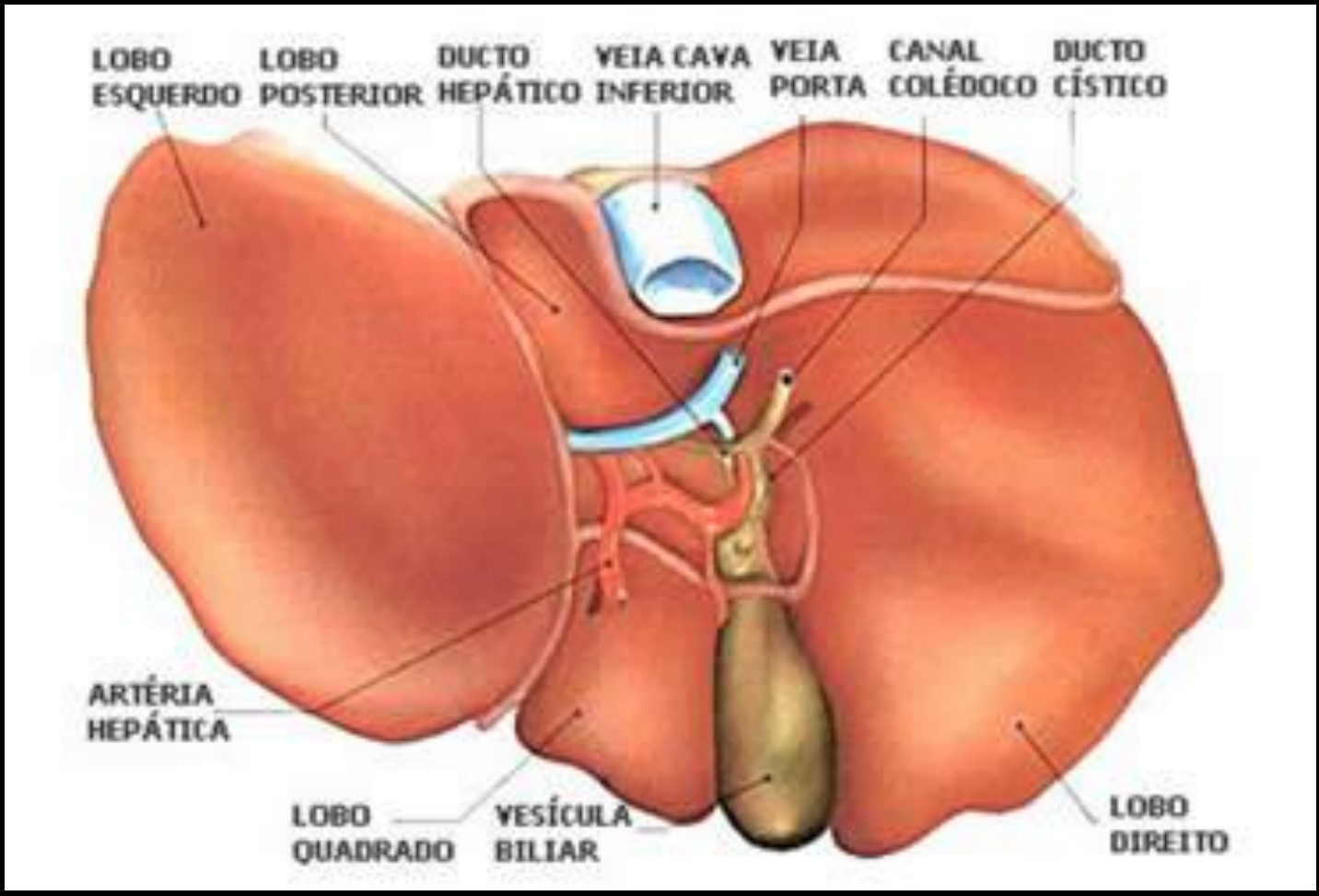
Oblicuos externos

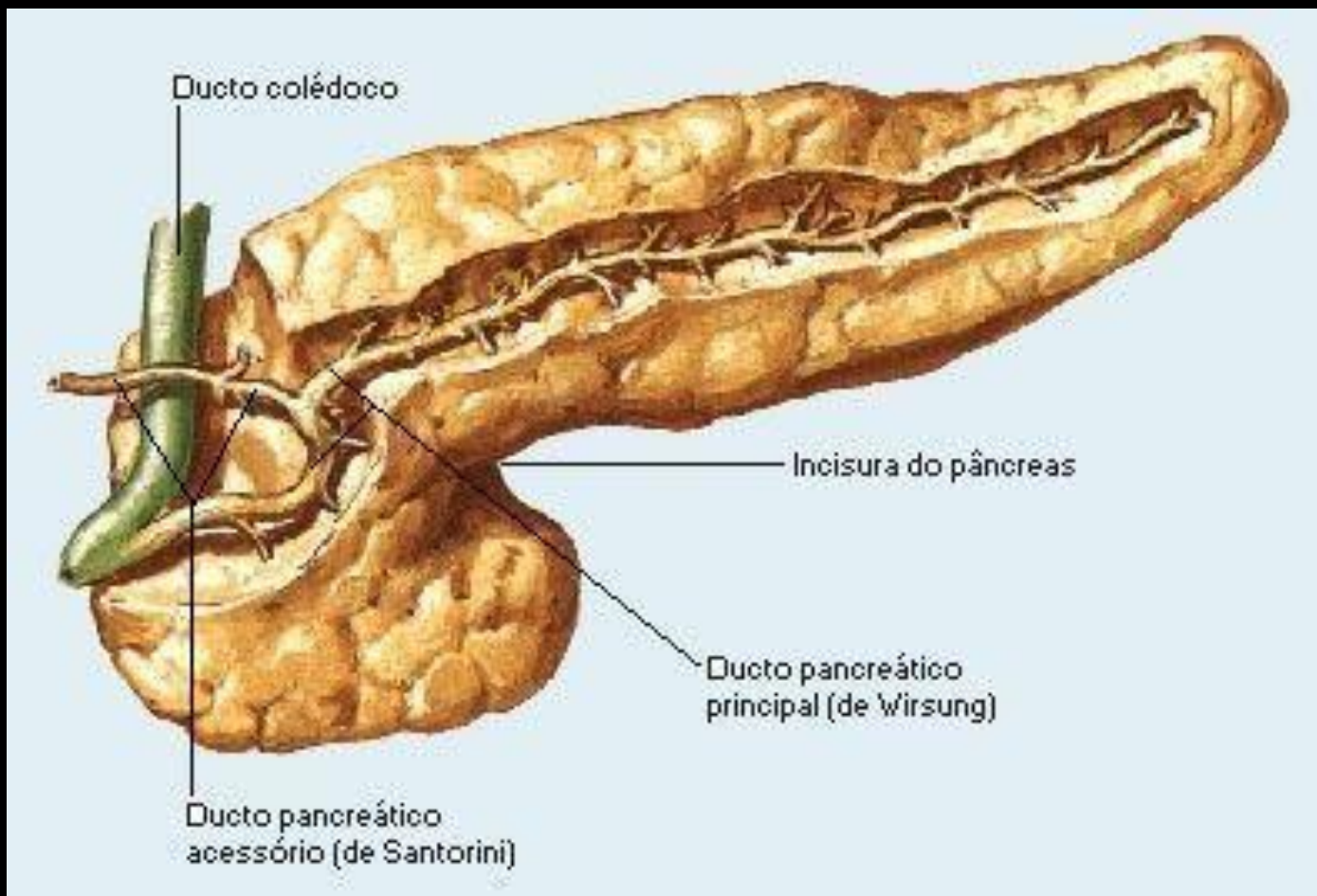
Recto abdominal

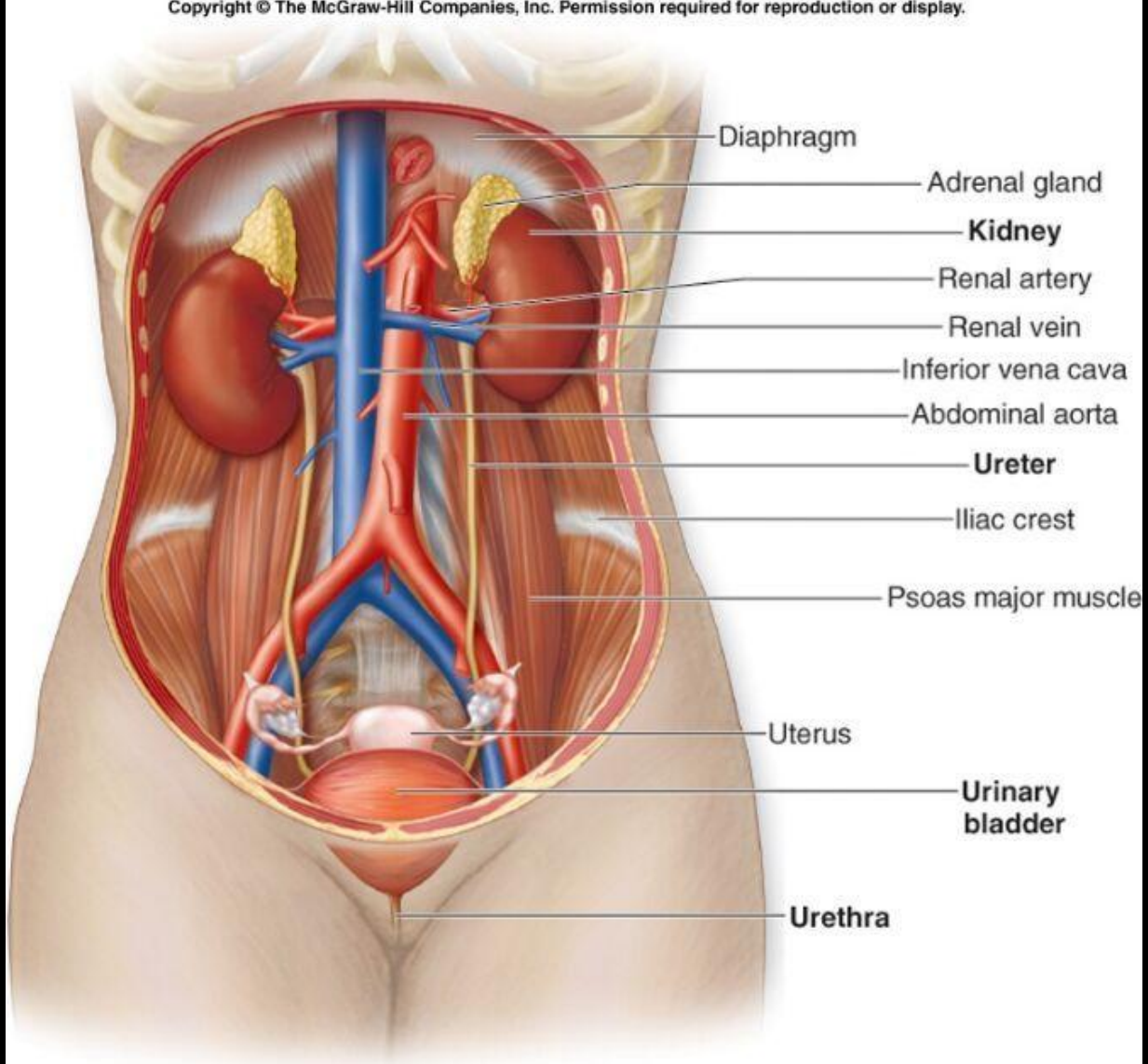


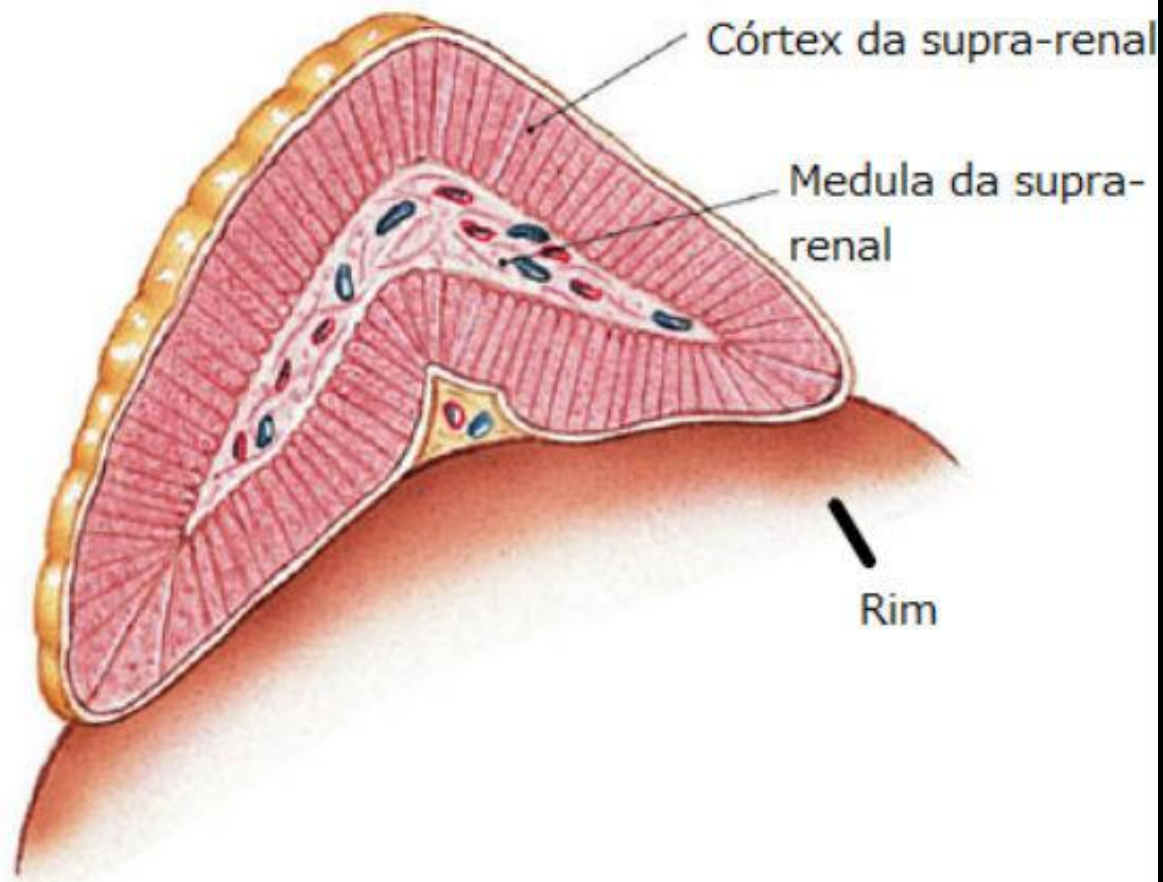


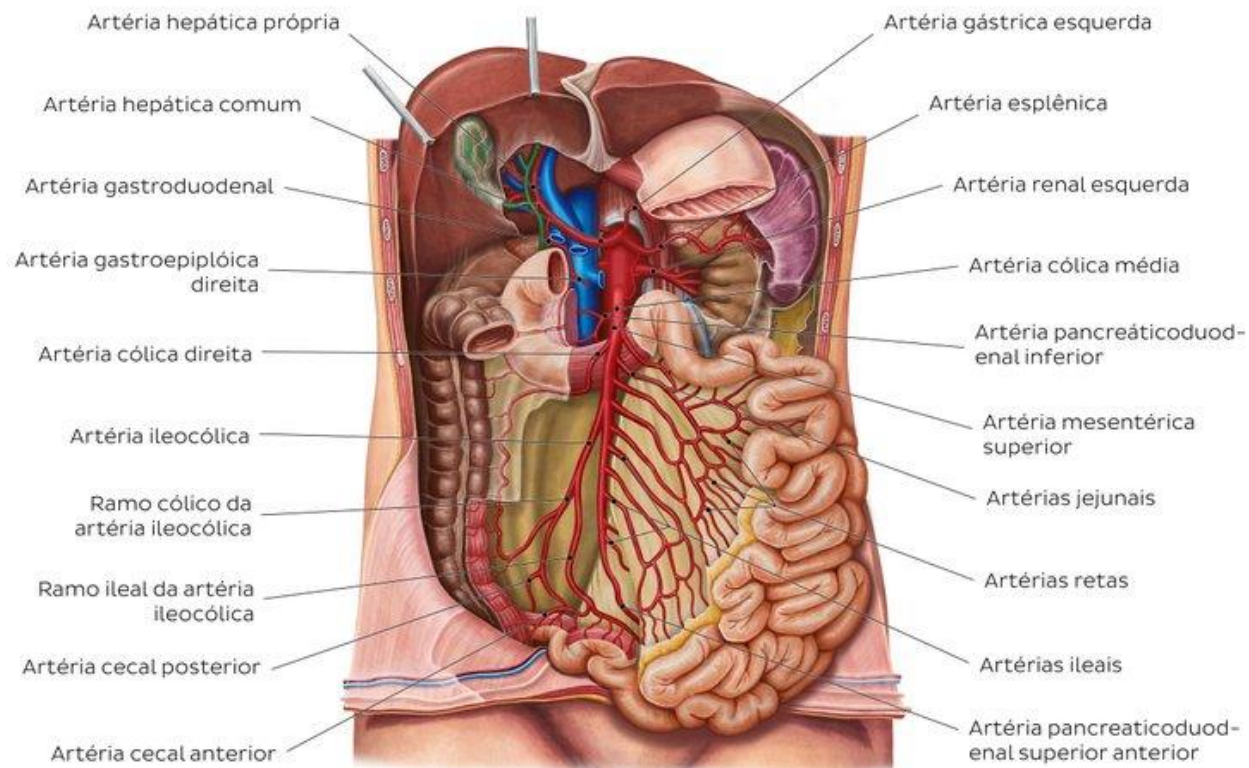










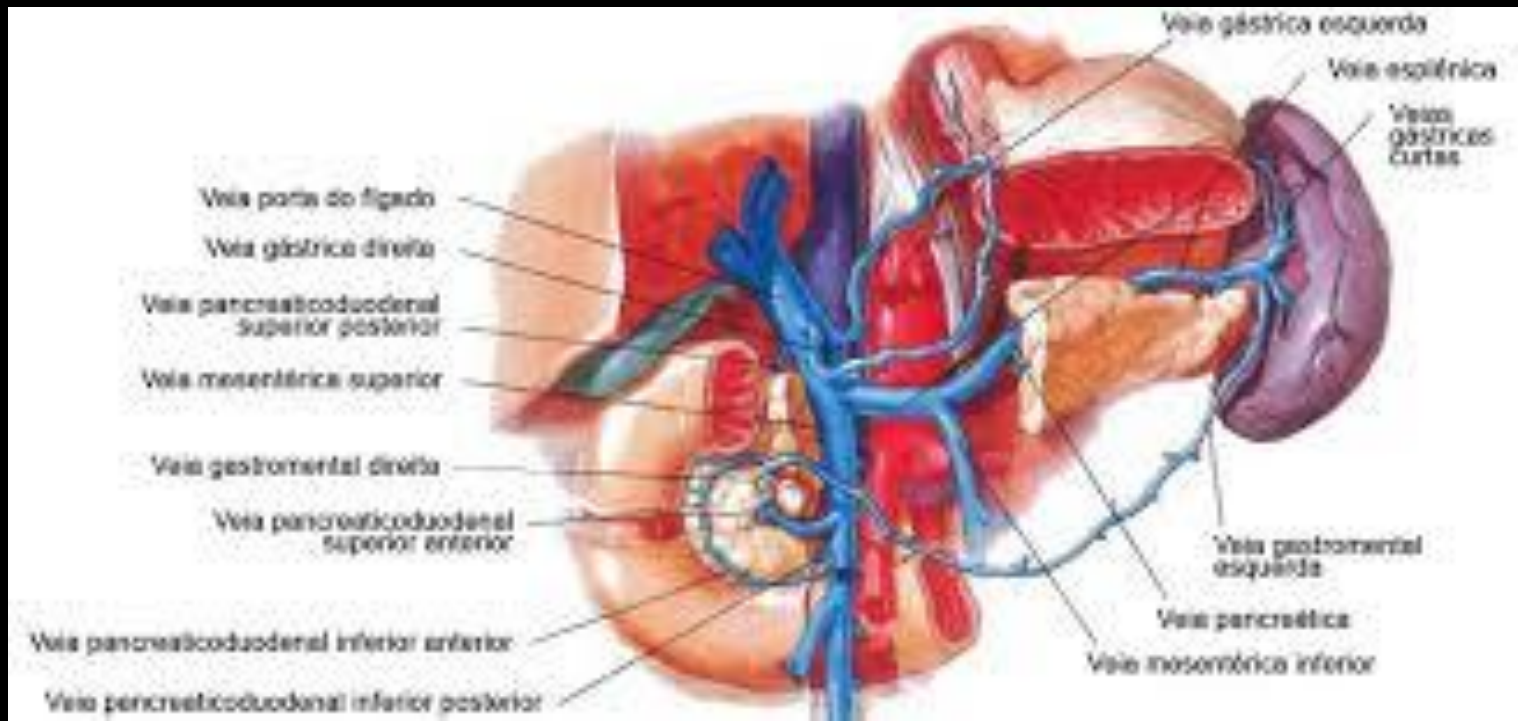


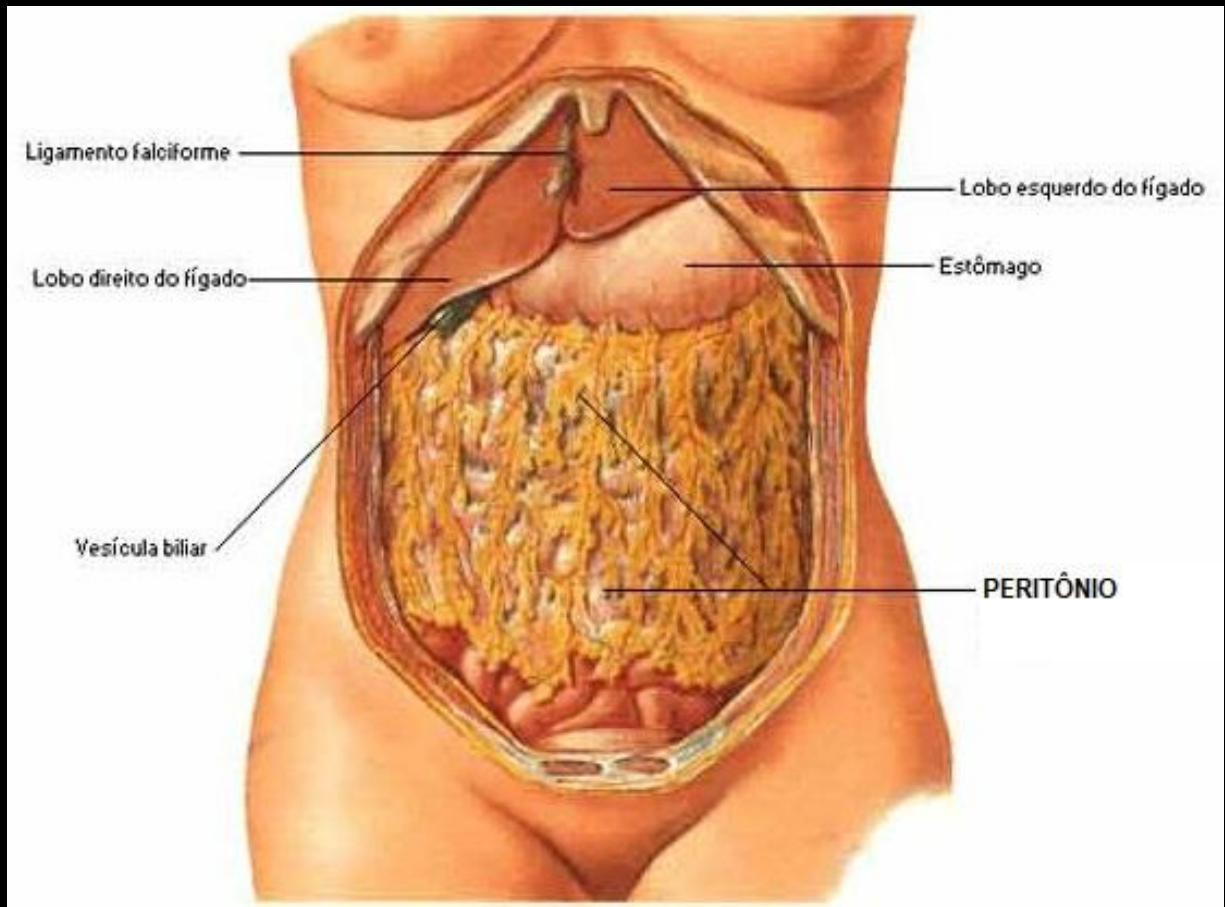
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● Ressonância Magnética de Abdômen Superior

Contraste: Sim

Indicações:

– Rotina

Sequências:

1. Ax T2 1º eco Trigger resp. – Fat Sat – 6mm de espessura
2. Axial T2 1º eco apnéia - opcional
3. Coronal 2D Fiesta
4. Axial In /Out Phase Dual
5. Axial Difusão / Mapa ADC
6. Axial Lava 3D apnéia - Pré-Contraste
7. Axial Lava 3D apnéia - Pós Contrastes - Fases: arterial / portal/ equilíbrio.
8. Coronal Lava 3D - Pós-Contraste - apnéia

Adicionar Sequências:

Lesões Adrenais: No Axial e Coronal In /Out Phase Dual - **Cortes Finos nas Adrenais**

Nota:

1. Buscopan simples 01 ampola (20mg) I.V. diluída em 10ml de água destilada estéril, 10 minutos antes do exame.



Ressonância Magnética de Abdome Superior - Rotina

INDICAÇÕES:

Abdome - rotina

CONTRASTE:

SIM

PROTOCOLO:

Abdome rotina

SEQUÊNCIA:

1. Localizador 3 planos (sem apnéia)
2. Localizador 3 planos (apnéia)
3. ASSET cal.
4. Ax T2 1º eco Trigger resp. – (FAT-SAT) – 6mm de espessura
5. Ax T2 2º eco - Trigger resp.
6. SS - FSE cor. loc. Apnéia
 - Ax T2 1º eco apnéia - opcional
 - Ax T2 2º eco apnéia - opcional
7. 2 D Fiesta ASSET - coronal
8. x 2D Fiesta Fat Sat - coronal
9. Axial in /out phase dual
10. Ax LAVA 3D apnéia pré-Gd
11. Ax Lava 3D apnéia Gd arterial / portal/ equilibrio.
12. Cor apnéia Gd. – LAVA - 3D
13. Ax - apnéia Gd – LAVA - 3D



3. Abdome superior rotina

Sequências necessárias	Sequência de pulso e contraste da imagem	Cobertura anatômica e planos de corte	Resolução espacial	Observações
Plano axial em fase / fora de fase, líquido escuro (T1)	Deve demonstrar adequado contraste hepatoesplênico. Deve demonstrar perda de sinal adequada na sequência fora de fase. Deve demonstrar boa definição dos órgãos.	Deve cobrir o fígado inteiro	Espessura de corte ≤ 7 mm Gap $\leq 1,5$ mm Pixel (fase) ≤ 2.0 mm	
Plano axial com TE longo de fluido brilhante (T2), sem supressão de gordura	Deve ter boa discriminação do fígado em relação à árvore biliar. Deve ter boa definição dos órgãos.	Deve incluir o fígado inteiro	Espessura de corte ≤ 7 mm Gap $\leq 1,5$ mm Pixel (fase) ≤ 2.0 mm	
Plano coronal com TE longo de fluido brilhante (T2), sem supressão de gordura	Deve ter boa discriminação do fígado em relação à árvore biliar. Deve ter boa definição dos órgãos.	Deve incluir o fígado inteiro	Espessura de corte ≤ 7 mm Gap $\leq 1,5$ mm Pixel (fase) ≤ 2.0 mm	



Plano axial 3D de fluido escuro (T1), com supressão de gordura	Deve ter boa definição dos órgãos. A saturação de gordura deve ser homogênea. Deve ter pelo menos quatro fases: 1. Pré-contraste 2. Parenquimatosa arterial 3. Venosa portal 4. Equilíbrio ou tardia	Deve cobrir o fígado inteiro	Espessura de corte ≤ 6 mm Gap 0.0 Pixel (fase) $\leq 2,0$ mm	
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6. Abdome Superior

Sequências necessárias	Sequência de pulso e contraste da imagem	Cobertura anatômica e planos de corte	Resolução espacial	Observações
Plano axial DWI e MAPA DE ADC	Deve-se obter ao menos 1 B value alto, no plano axial, sendo o recomendado $B > 600$ s/mm ²	Deve incluir o fígado inteiro.	Espessura de corte ≤ 7 mm Gap ≤ 1 mm Pixel (fase) ≤ 2.0 mm	

19



- Checagem dos marcadores
- Pedido Médico
- Questionário direcionado
- Termo de segurança.



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Patient Registration

PATIENT	PROCEDURE
Last name <input type="text"/>	Accession No <input type="text"/>
First name <input type="text"/>	Request ID <input type="text"/>
Title <input type="text"/>	Requested procedure(s) <input type="text"/>
Patient ID <input type="text"/>	Study list <input type="text"/>
Date of Birth <input type="text"/> [dd-MMM-yy]	<input type="button" value="Delete"/>
Sex <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other	Study <input type="text"/>
Age <input type="text"/> Years <input type="text"/>	Study comment <input type="text"/>
Height <input type="text"/> [m]	Patient position <input type="text"/>
Weight <input type="text"/> [kg]	
Additional info <input type="text"/>	
<input type="button" value="Details ..."/>	
HOSPITAL	INSTITUTION
Referring physician <input type="text"/>	Institution name <input type="text"/> PROVISAO
Requesting physician <input type="text"/>	1. Performing physician <input type="text"/> PE ESQ
Admission ID <input type="text"/>	1. Operator <input type="text"/> DANLO
<input type="button" value="Preregister"/>	<input type="button" value="Help"/>
<input type="button" value="Exam"/>	
<input type="button" value="Search"/>	
<input type="button" value="Cancel"/>	



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FIG. 1: posicionamento do paciente na bobina de superfície





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Exam

Viewing

Filming

3D

Open Apply Cancel

Region: CORPO

Exams: ABDOME

- Programs:
- ROTINA
 - ROTINA APNEIA
 - OPCIONAIS
 - OPCIONAL CONTRASTE
 - ABDOME SUP USAR**
 - ABD TOTAL TESTE

1	localizer trocar bobina AP...	00:21
2	cor_t2_tse_3 apneias	00:55
3	axial_t2_tse_4 apneias	01:08
4	axial_stir_5_apneias	01:27
5	t1_f2d_in+out_tra	01:07
6	t1_vibe_axial_pre	00:19
7	t1_vibe_cor_PRE	00:19
8	CONTRASTE	

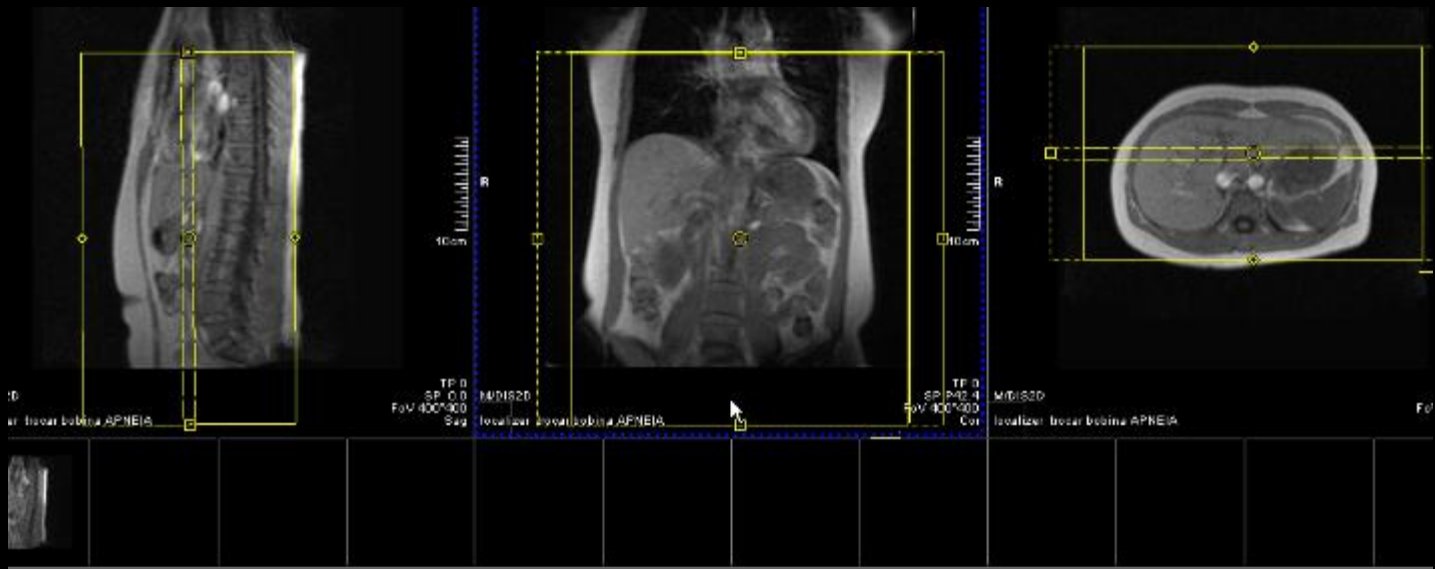


Σ 00:00
Stop Continue Skip

Program

Camtasia Recorder - Recor
Capture View Effects Tools Help





TA: 0:55 PM: REF PAT: Off Voxel size: 2.6x1.6x12.0 mm Rel. SNR: 1.00 : tseR

	Open	Apply	Cancel			
1	localizer trocar bobina APNEIA					
2	cor_t2_tse_3 apneias					
3	axial_t2_tse_4 apneias			01:08		
4	axial_str_5_apneias			01:27		
5	t1_t2d_m+out_tra			01:07		

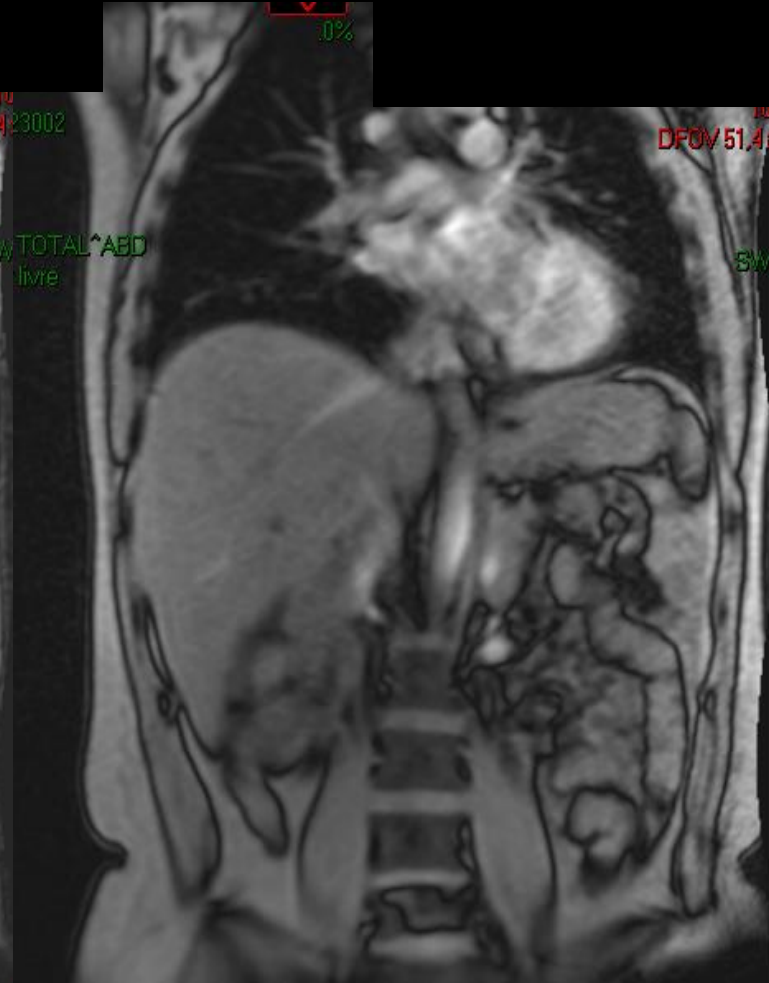
Slice group	1	FoV read	400 mm
Slices	18	FoV phase	90.6 %
Dist. factor	20 %	Slice thickness	12.0 mm
Position	L10.3 P21.7 F60	TR	893 ms
Orientation	C > T-0.0 > S-0	TE	100 ms
Phase enc. dir.	R >> L	Averages	1
Phase oversampling	20 %		

Coronal



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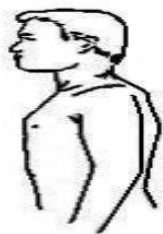
Apneia

Livre

Gerenciamento profissional Ltda.



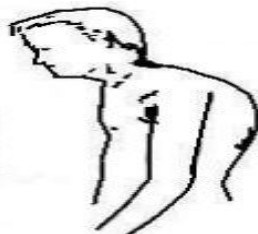
TIPOS DE TÓRAX



Chato



Tonel



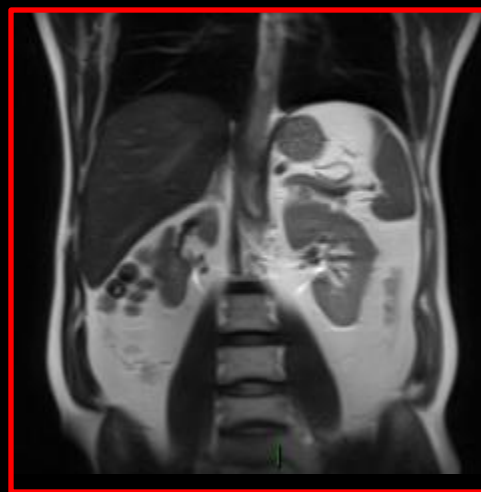
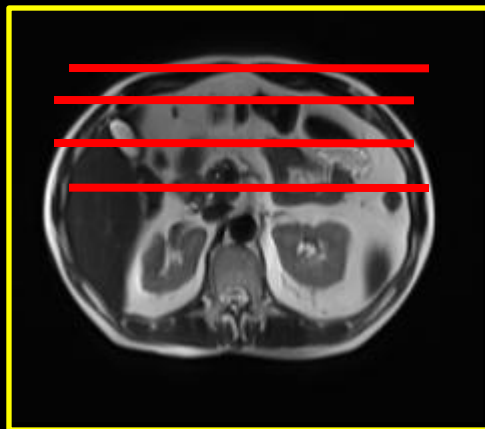
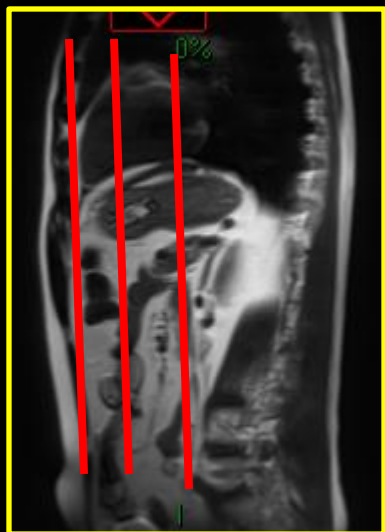
Cifótico



Infundibiliforme



Carini forme



Coronal



TA: 1:08 PM: FIX PAT: Off Voxel size:

Sequence Name	Icon	Time
1 localizer trocar bobina APNEIA		
2 cor_t2_tse_3_apneias		
3 axial_t2_tse_4_apneias		
4 axial_str_5_apneias		01:27
5 t1_fi2d_in+out_tra		01:07
6 t1_vibe_axial_pre		00:19
7 t1_vibe_cor_PRE		00:19

Parameter Configuration:

- Slice group: 1
- Slices: 20
- Dist. factor: 00%
- Position: R3.9 F13.3 F32.
- Orientation: Transversal
- Phase enc. dir.: A >> P
- Phase oversampling: 15%

ProgStep: 2

CINTIA TESTE

IMA: 12

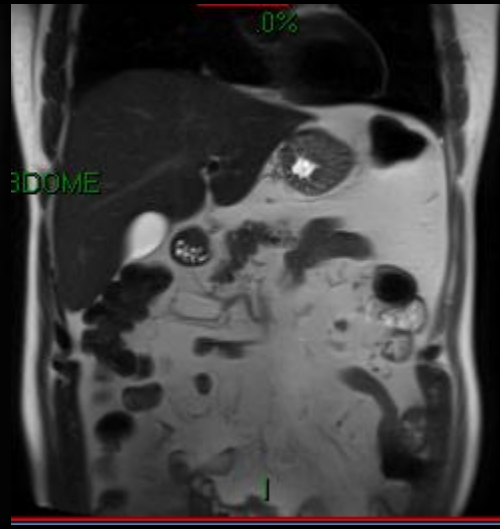
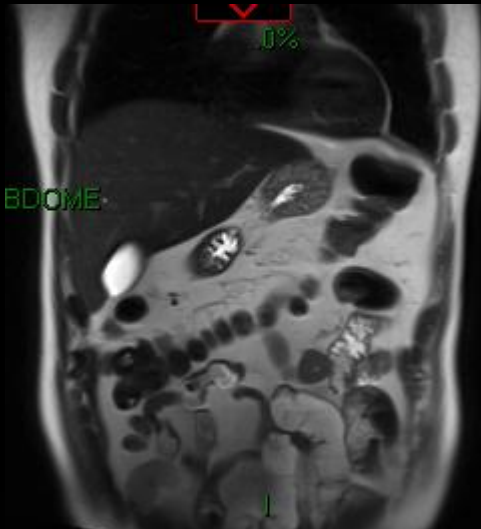
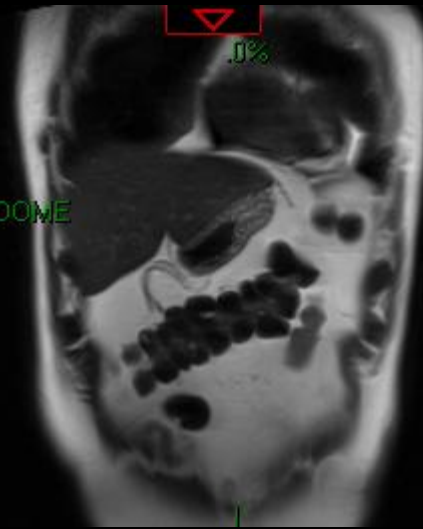
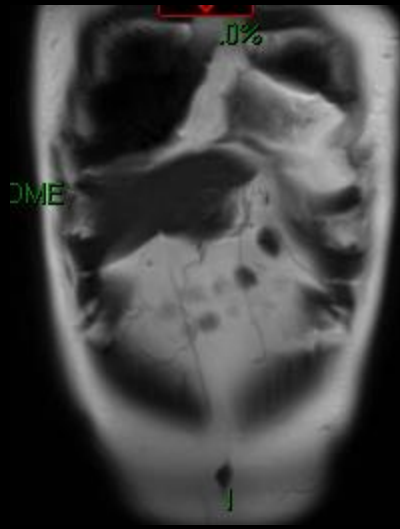
Filter: Distortion Corr. (2D)

Coronal T2



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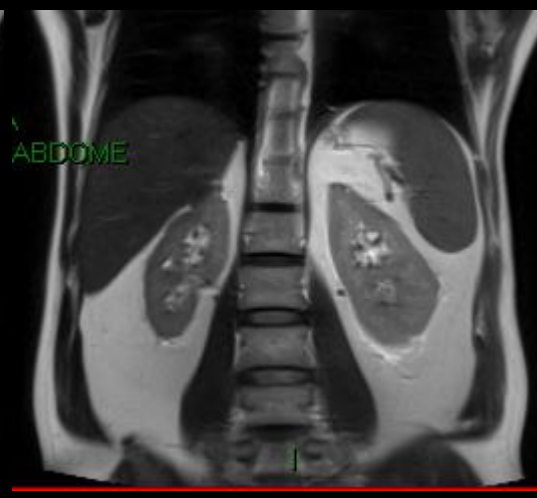
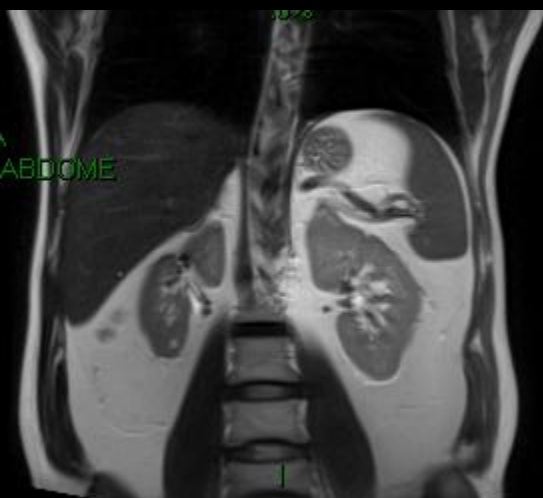
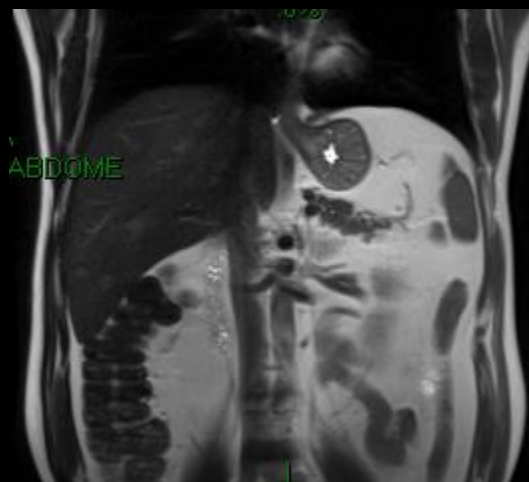
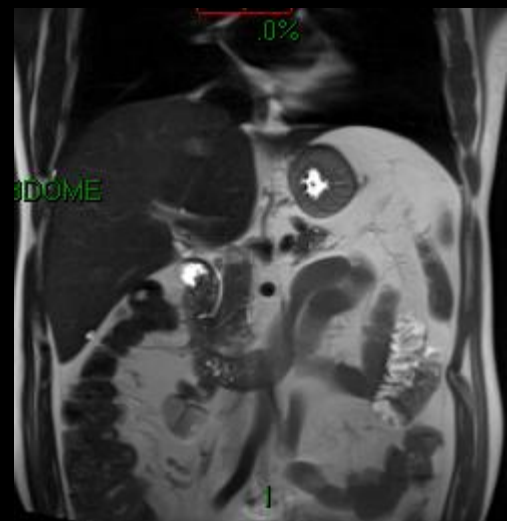


SABER X

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Coronal T2

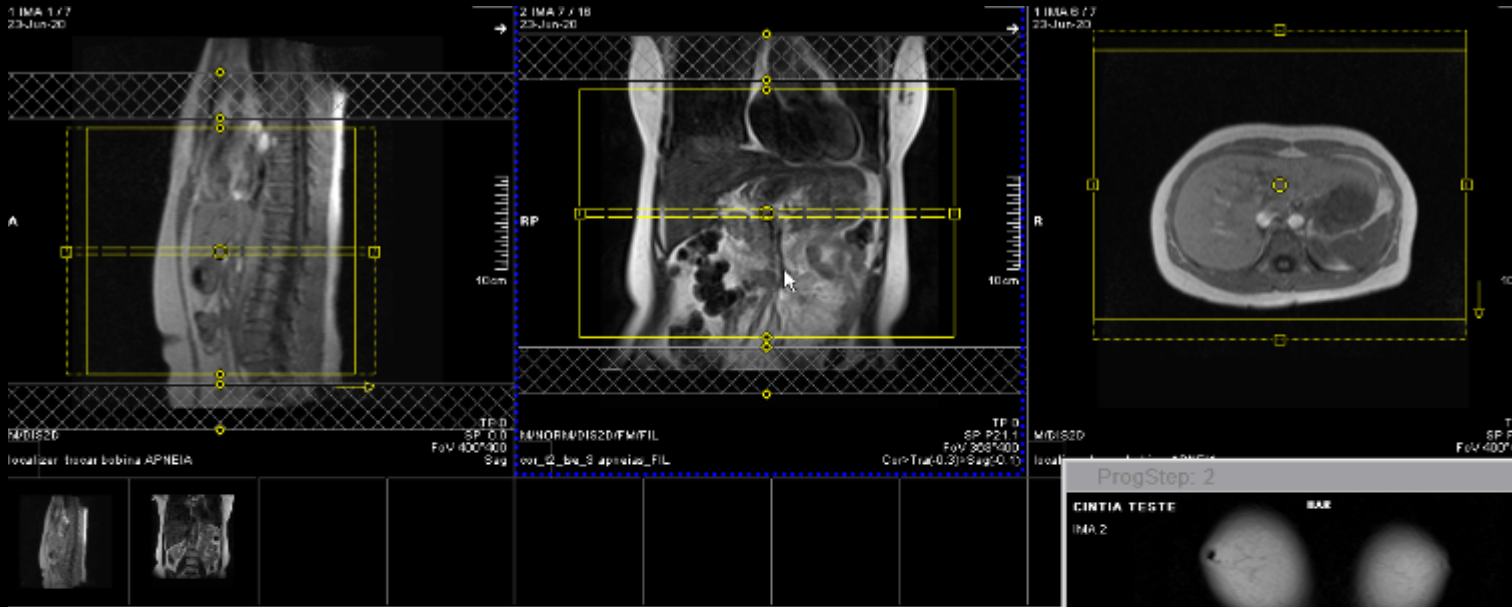




Gerenciamento profissional Ltda.

Coronal T2



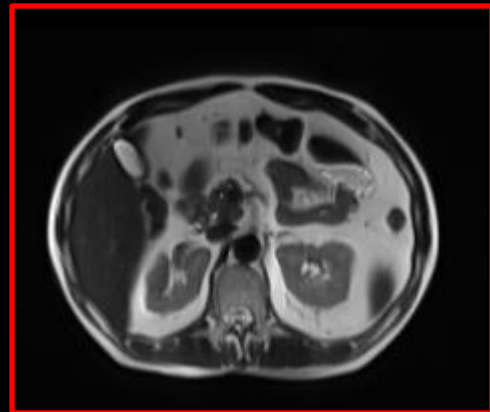
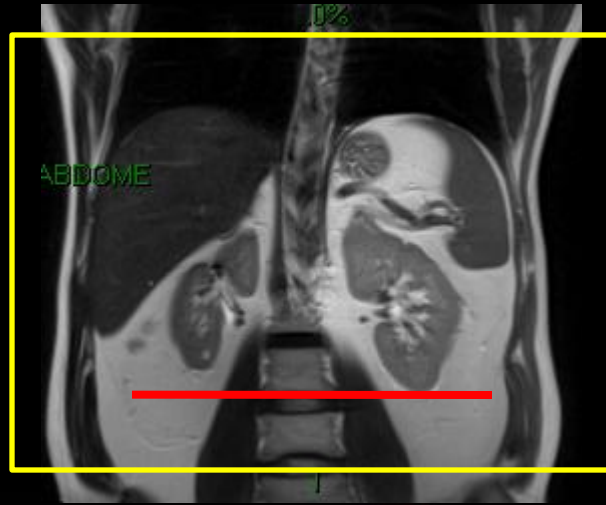
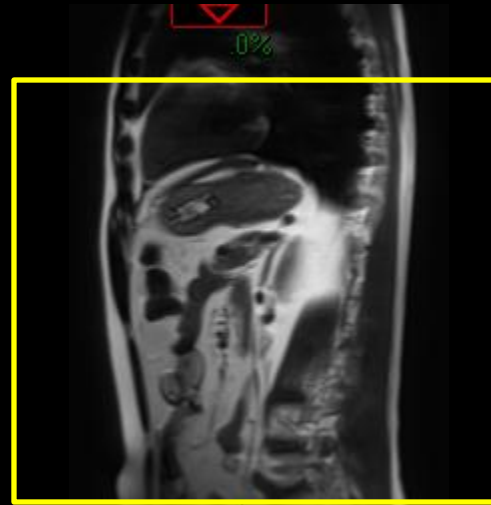
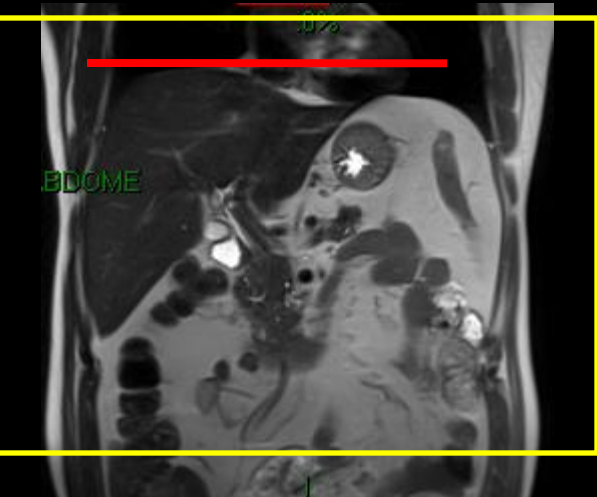


8 TA: 1:08 PM: FIX PAT: Off Voxel size:

- | Icon | Sequence Name | Time |
|------|--------------------------------|-------|
| 🔍 | localizer trocar bobina APNEIA | |
| 🔍 | cor_t2_tse_3 apneias | |
| 🔍 | axial_t2_tse_4 apneias | |
| 🔍 | axial_str_5 apneias | 01:27 |
| 🔍 | t1_f12d_in+out_tra | 01:07 |
| 🔍 | t1_vibe_axial_pre | 00:19 |
| 🔍 | t1_vibe_cor_PRE | 00:19 |

Slice group: 1
 Slices: 20
 Dist. factor: 80 %
 Position: R3.9 F13.3 F32.
 Orientation: Transversal
 Phase enc. dir.: A >> P
 Phase oversampling: 15 %





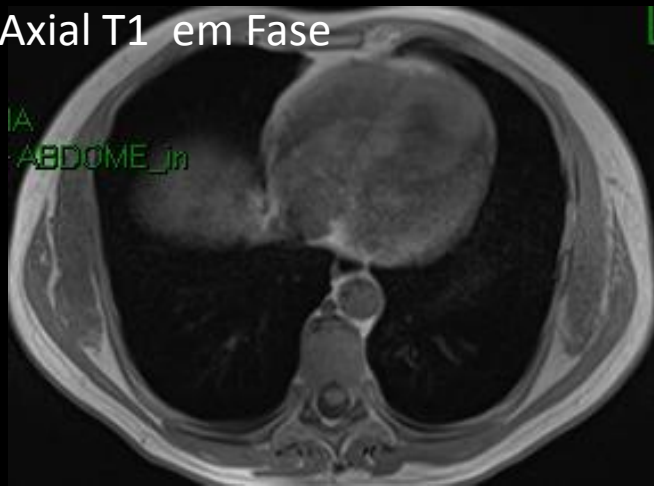
Axial



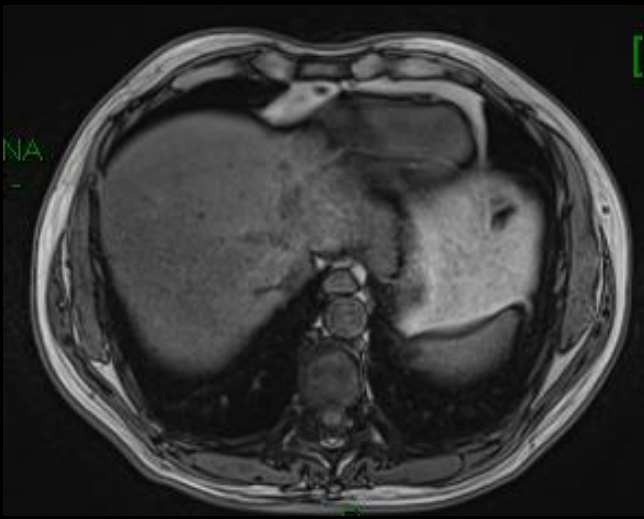
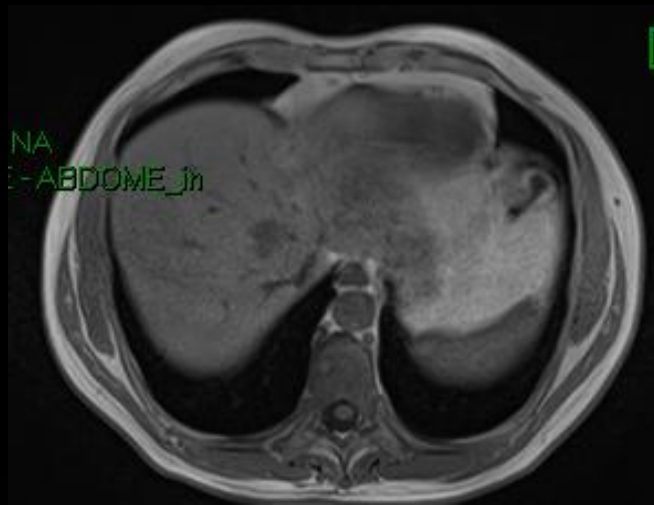
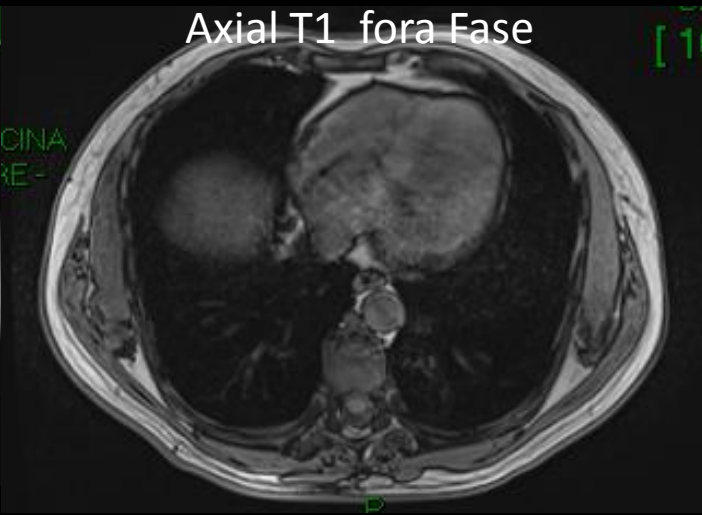
Gerenciamento profissional Ltda.



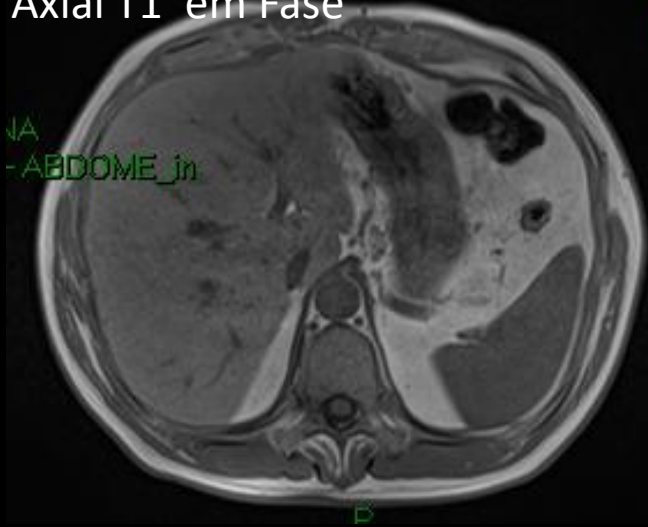
Axial T1 em Fase



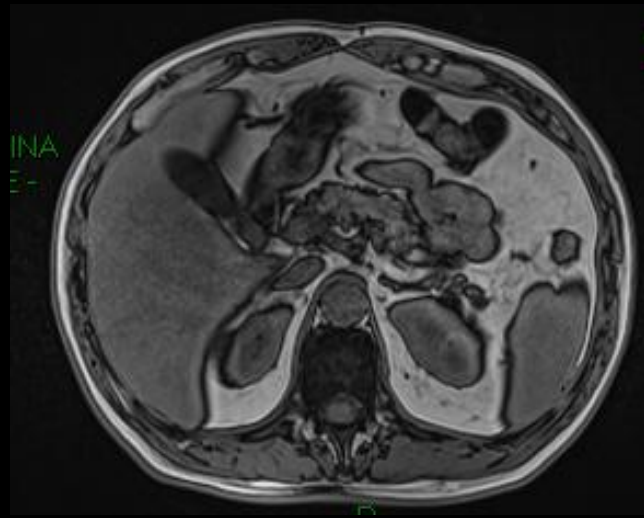
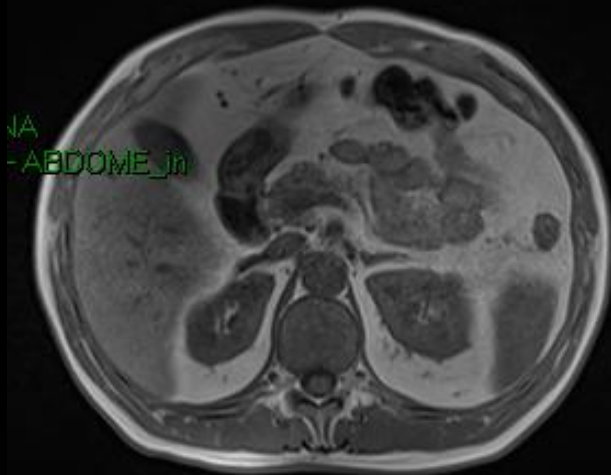
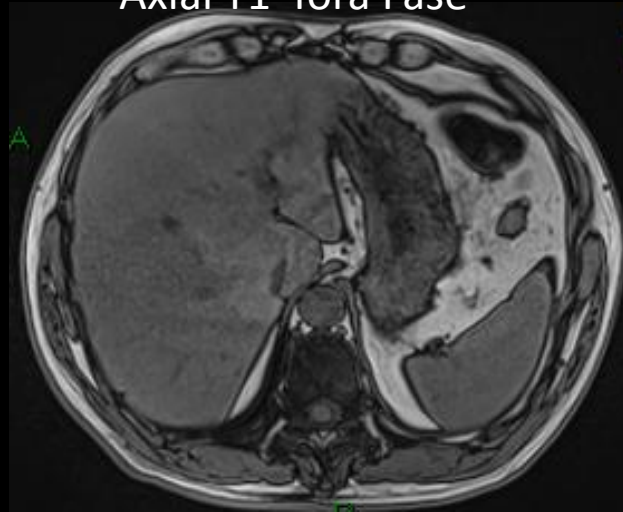
Axial T1 fora Fase



Axial T1 em Fase



Axial T1 fora Fase



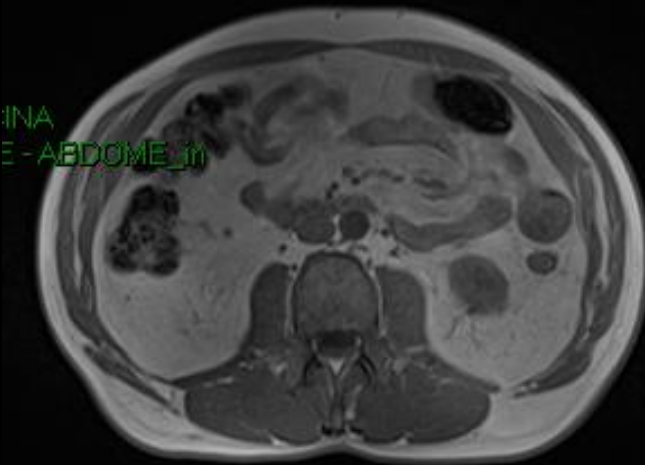
Axial T1 em Fase



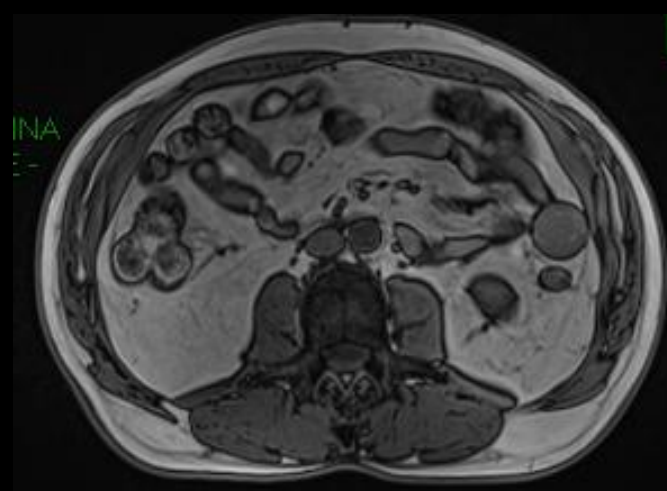
Axial T1 fora Fase



INA
E - ABDOME_in



INA
E -



A esteatose hepática refere-se a um aumento da gordura intracelular no fígado. É amplamente caracterizada por radiologistas e ultrassonografistas como 'infiltração gordurosa', mas a gordura está nos hepatócitos e não na matriz extracelular. Por motivos de imagem, pode ser amplamente dividido em dois grupos.

[esteatose hepática focal](#) (gordura hepática focal)

[esteatose hepática difusa](#) (gordura hepática difusa)

[esteatose hepática nodular multifocal](#) (raramente)

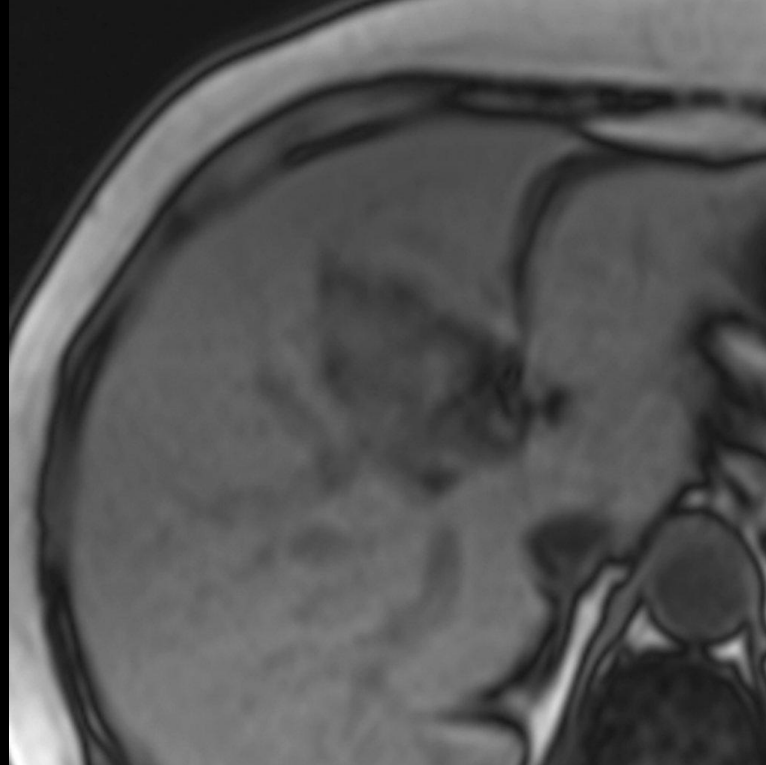
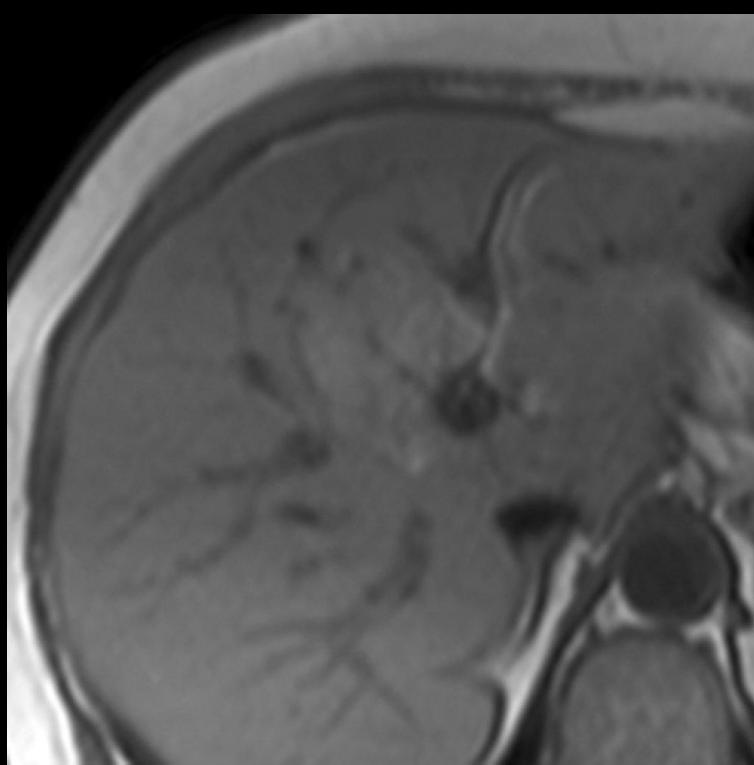
A esteatose hepática é decorrente do acúmulo anormal de lipídios, principalmente triglicerídeos dentro dos hepatócitos ^{3,4}. Eles são encontrados em vesículas grandes e pequenas. Macroscopicamente, o fígado está aumentado, amarelo e oleoso. A esteatose pode causar fibrose e [cirrose](#).

SABER



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A esteatose hepática focal , também conhecida como **infiltração gordurosa focal** , representa pequenas áreas de [esteatose hepática](#) .

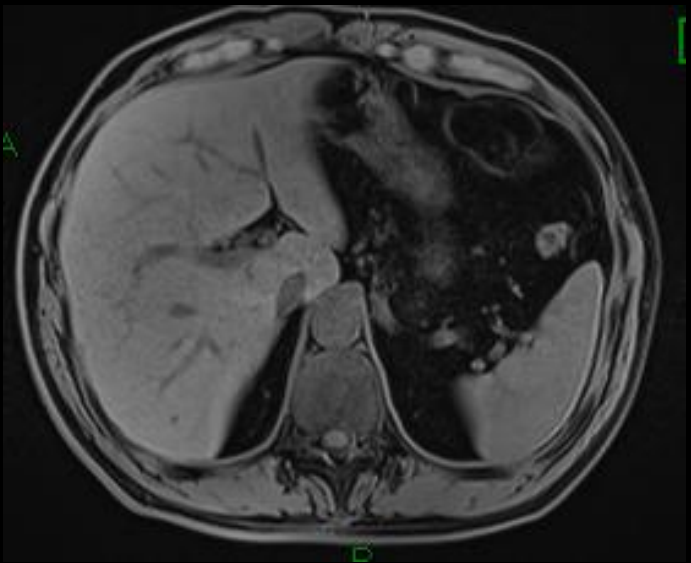
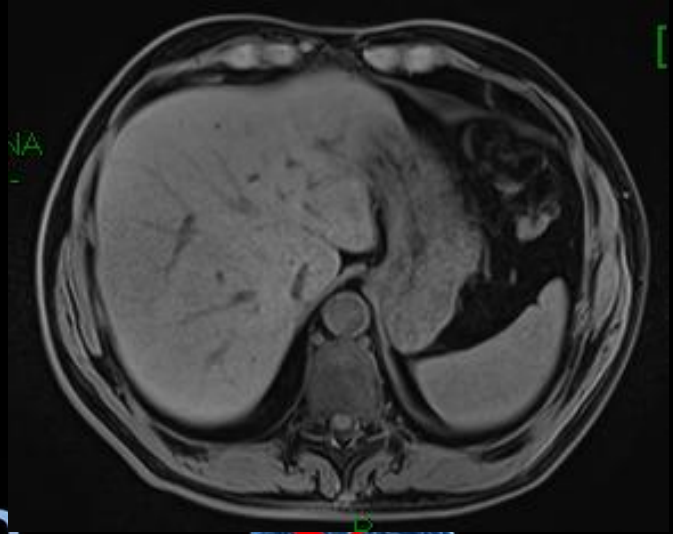
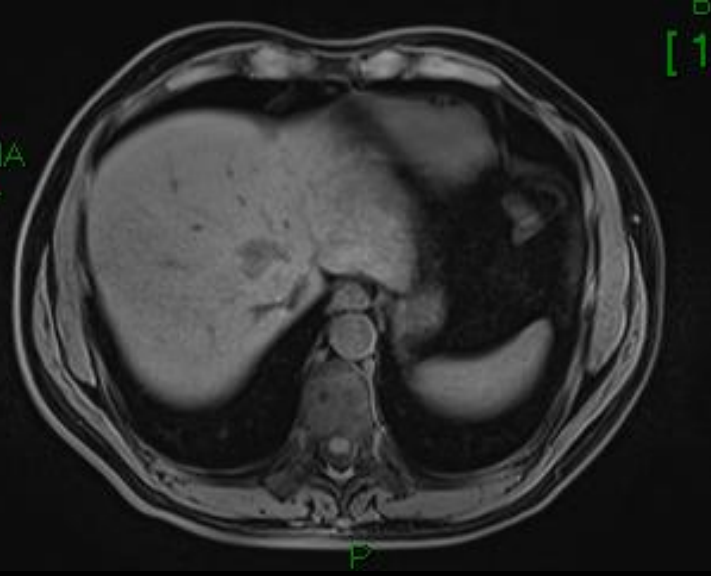
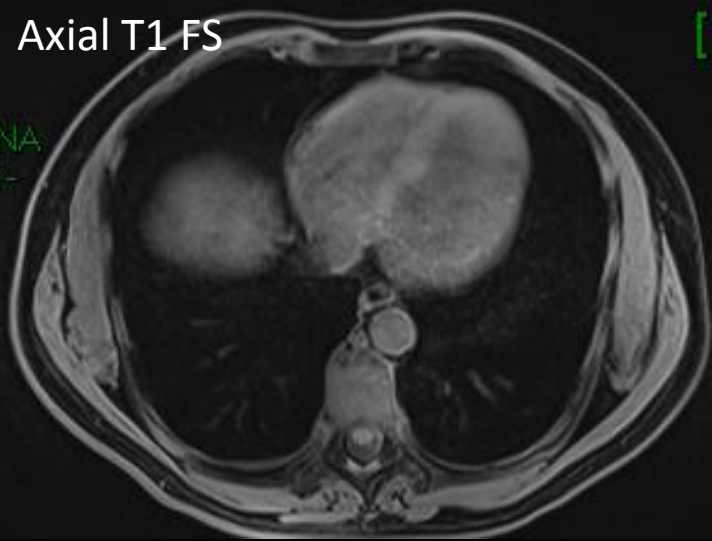




A esteatose hepática difusa , também conhecida como **fígado gorduroso** , é um achado de imagem comum e pode levar a dificuldades na avaliação da aparência do fígado, especialmente quando associada à [preservação focal de gordura](#)



Axial T1 FS

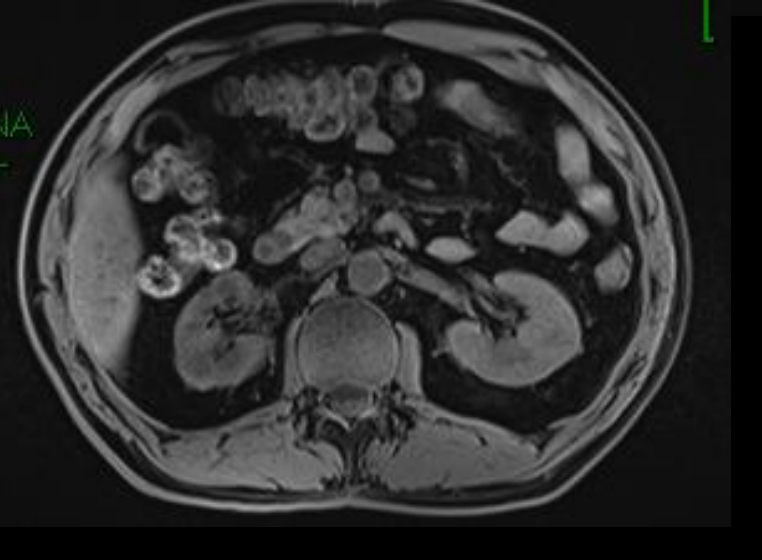
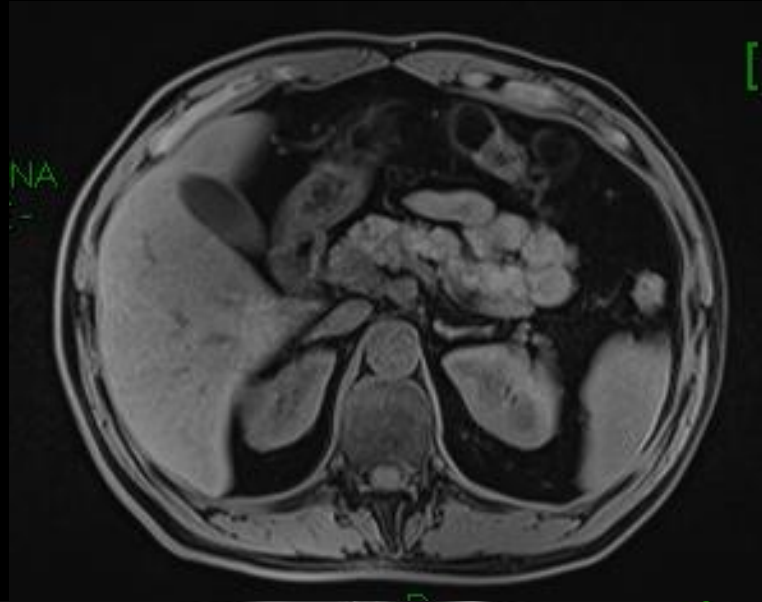


SABER X

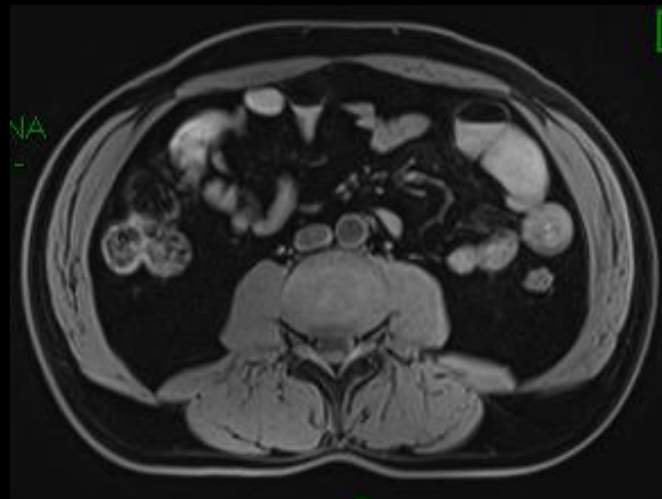
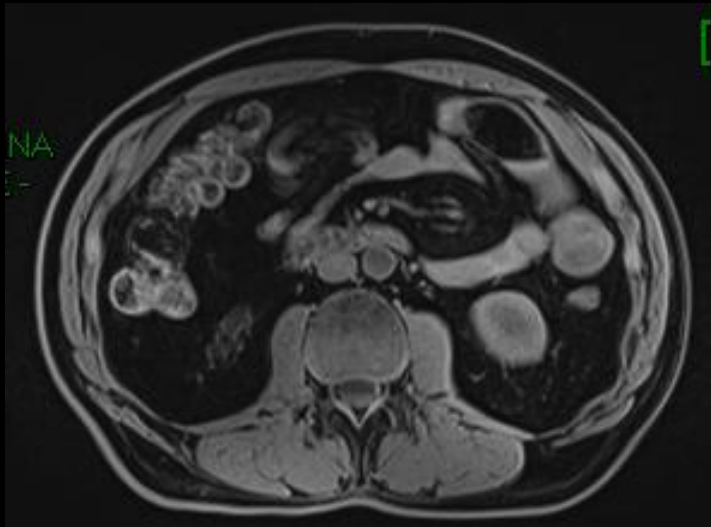
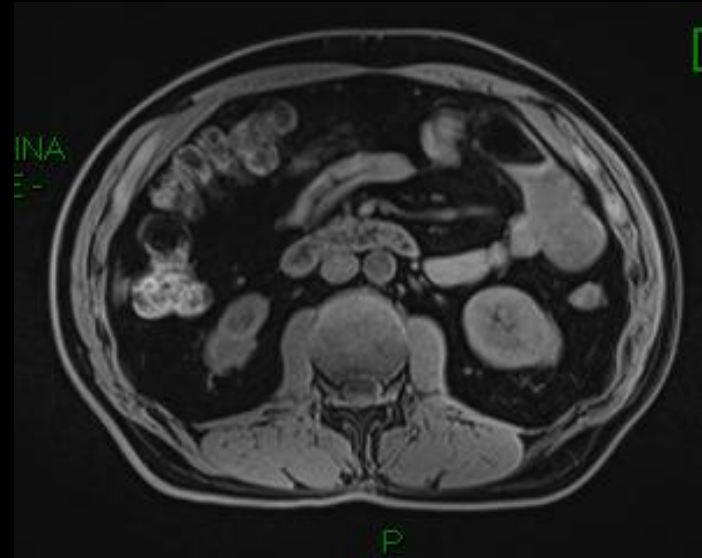
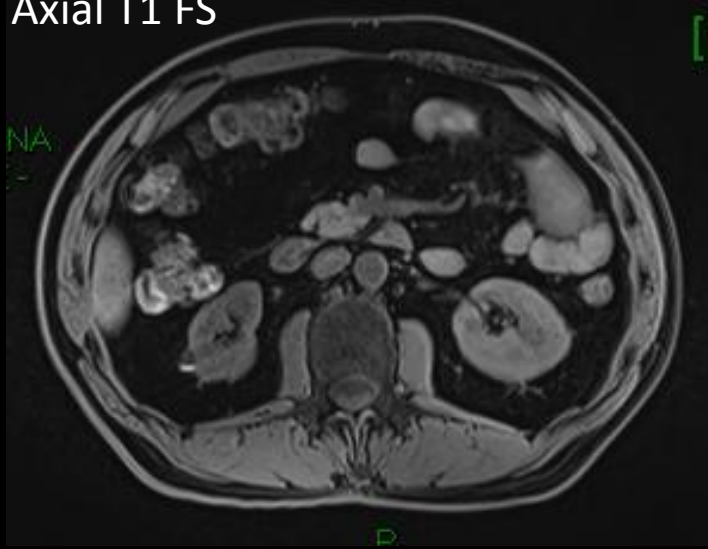
Gerenciamento profissional Ltda.



Axial T1 FS



Axial T1 FS

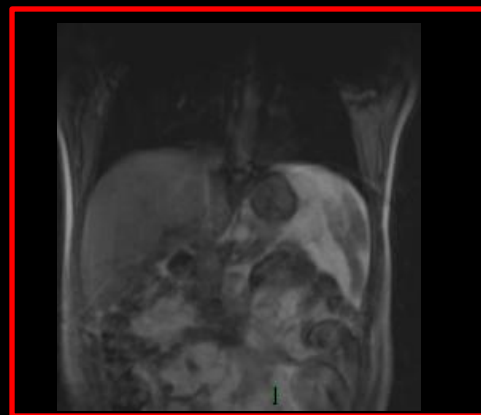
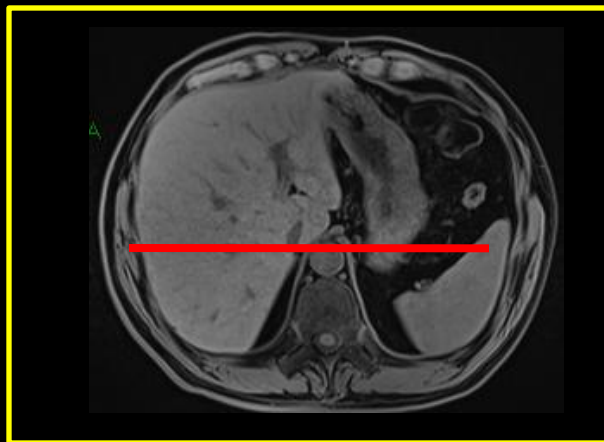
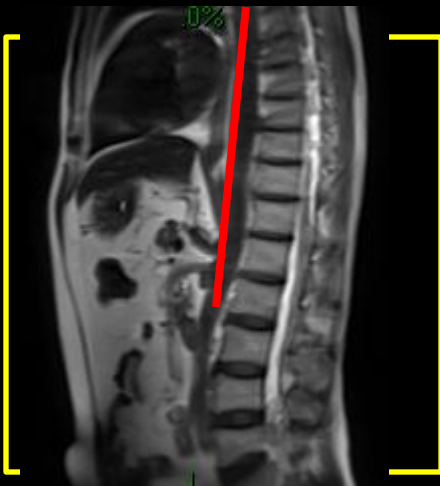


SABER X

Gerenciamento profissional Ltda.



Preparo do contraste



Gerenciamento profissional Ltda.



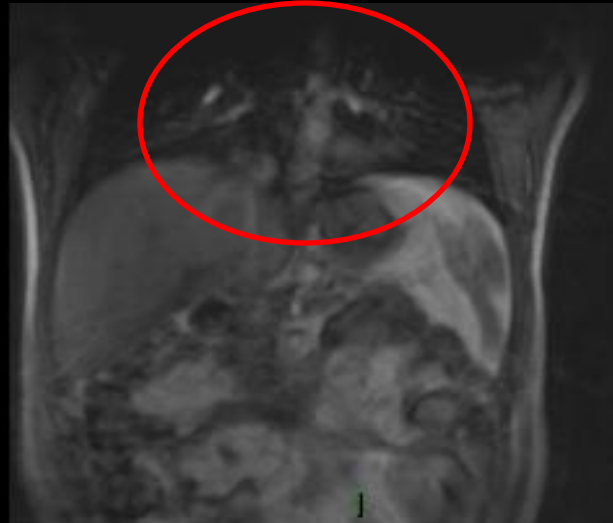
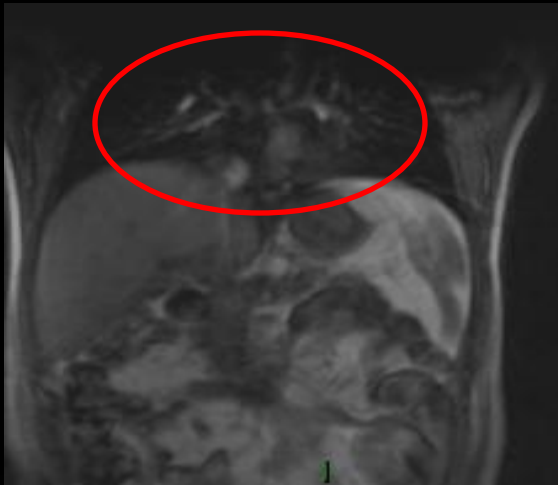
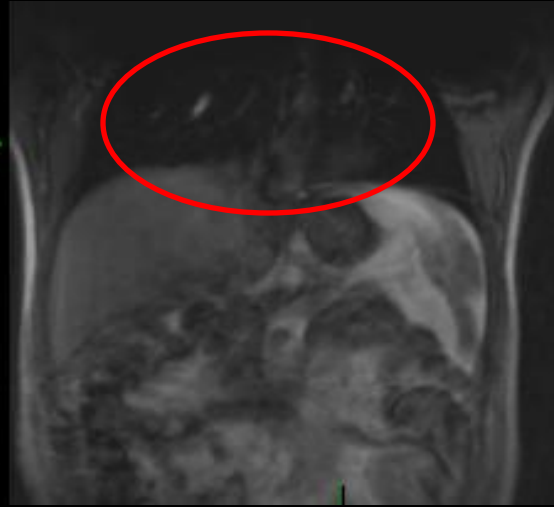
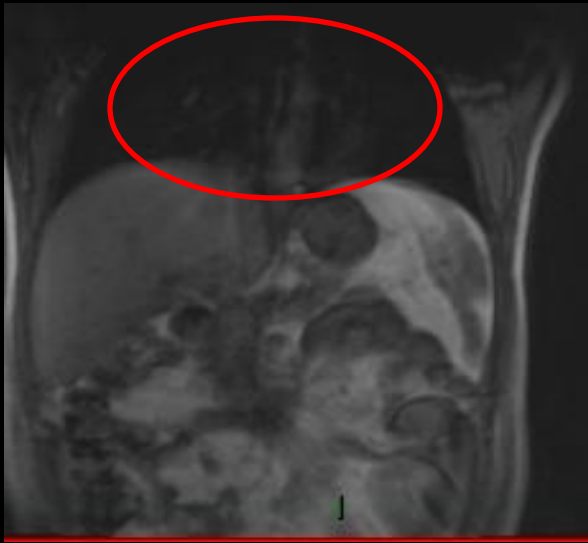
Preparo do contraste

Manual / Bomba Injetora ?

Quanto ?

0x2 Kg - 75kg x 0,2 = 15ml

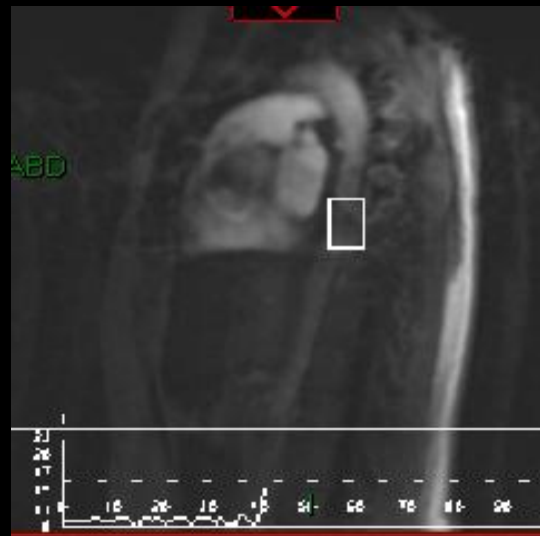
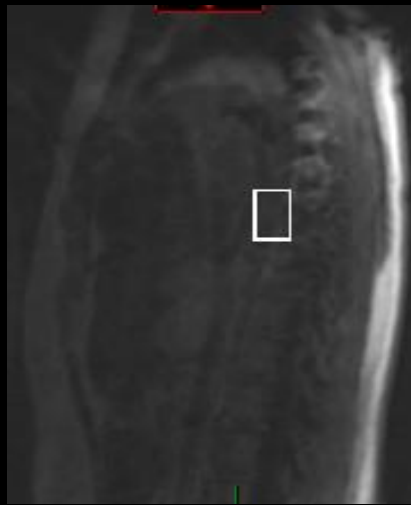




SABER  X

Gerenciamento profissional Ltda.



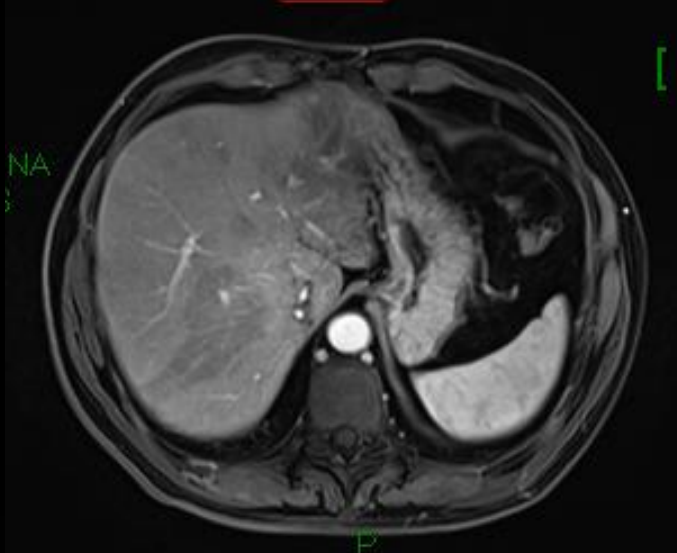
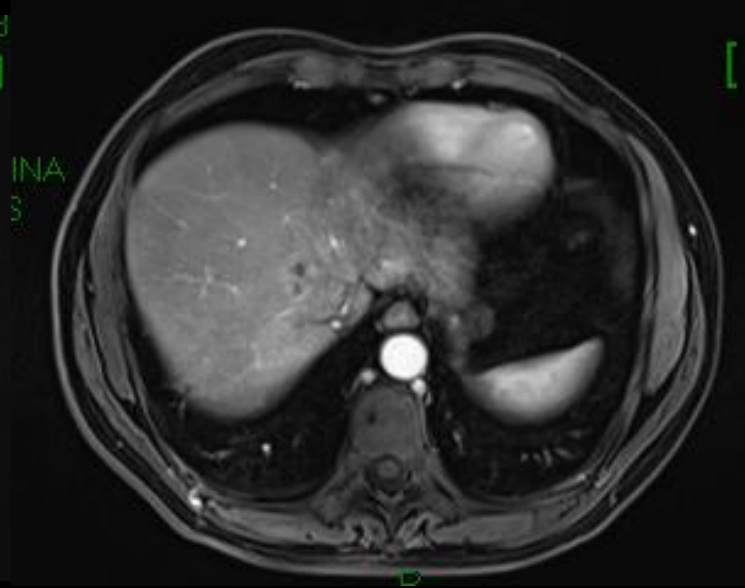
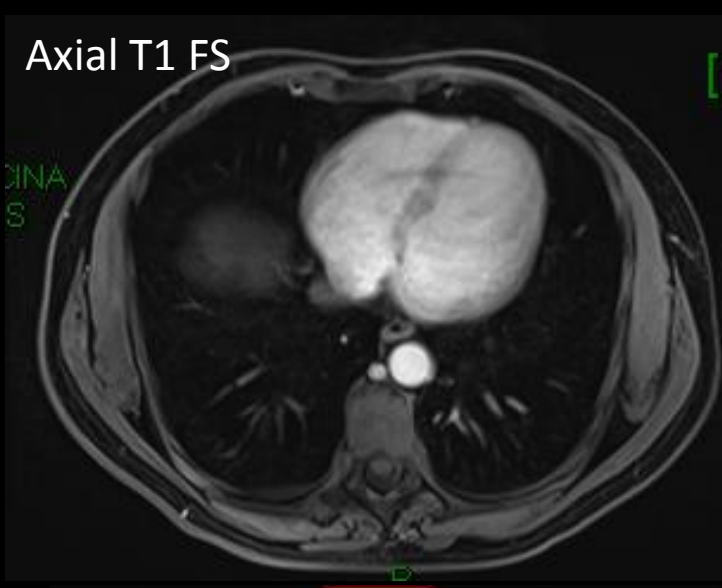


SABER X

Gerenciamento profissional Ltda.



Axial T1 FS



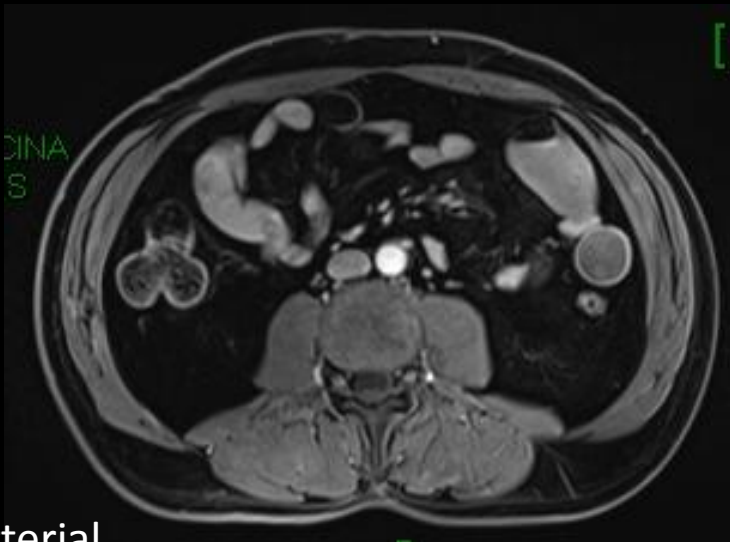
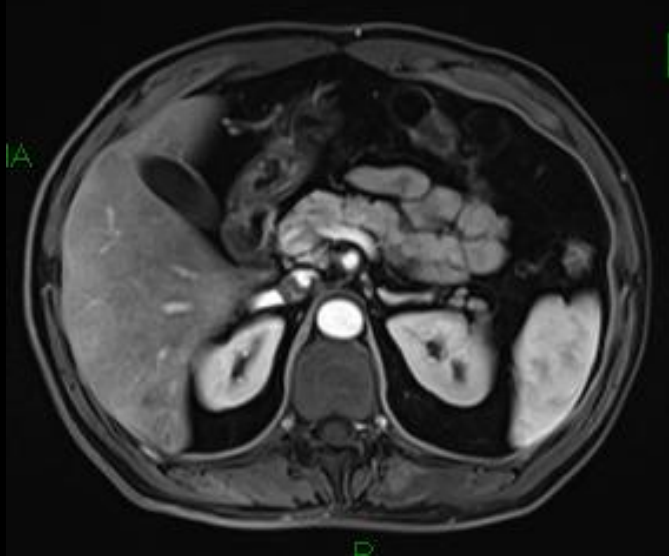
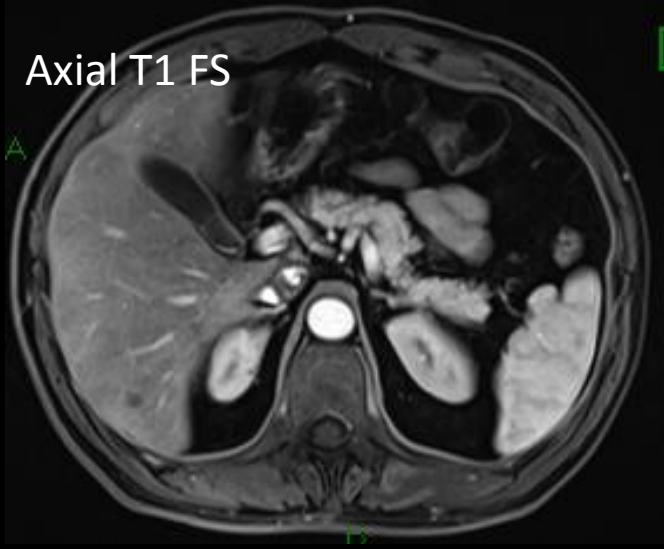
Fase Arterial

SABER X

Gerenciamento profissional Ltda.



Axial T1 FS



Fase Arterial

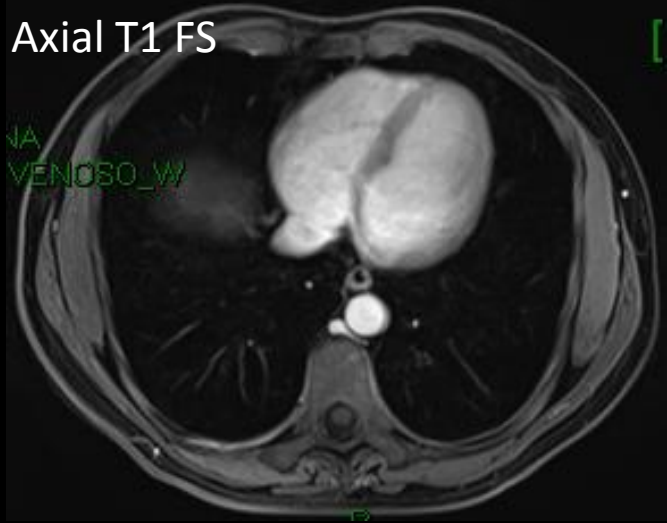
SABER X

Gerenciamento profissional Ltda.

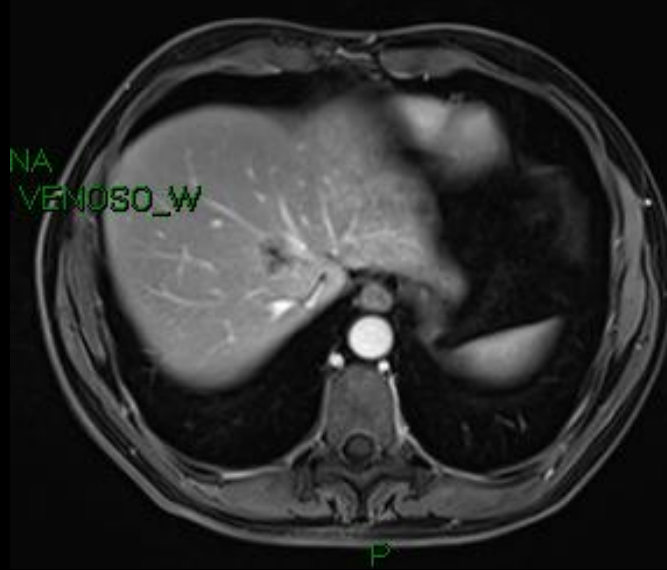


Axial T1 FS

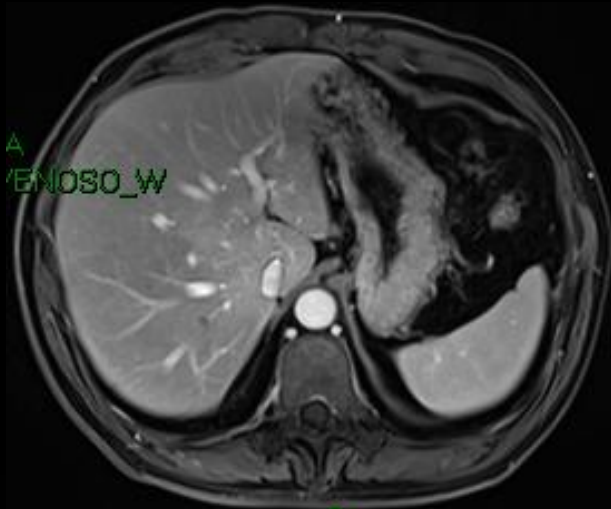
NA
VENOSO_W



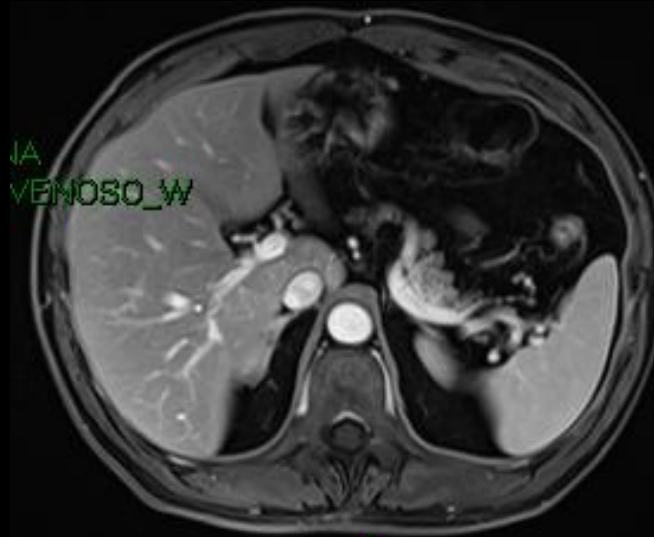
NA
VENOSO_W



A
VENOSO_W



JA
VENOSO_W



Fase venosa

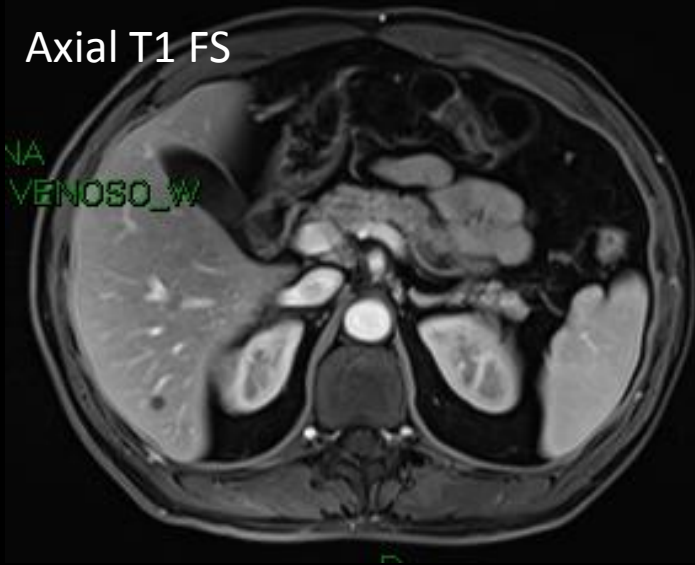
SABER X

Gerenciamento profissional Ltda.



Axial T1 FS

INA
VENOSO_W



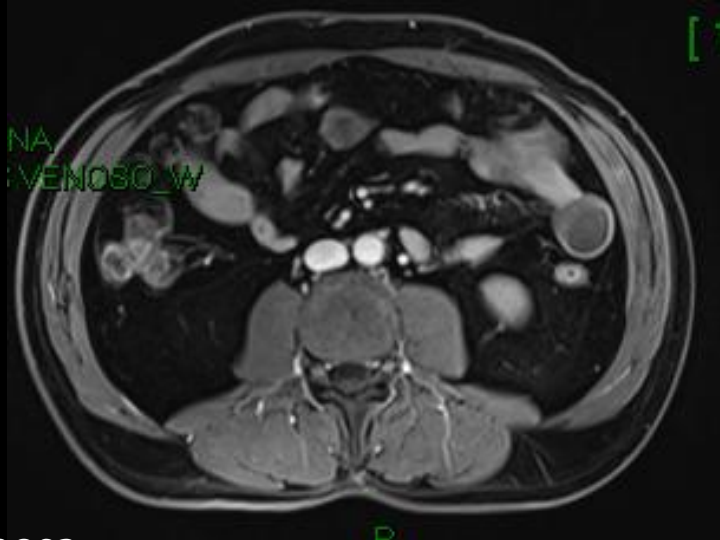
INA
VENOSO_W



INA
VENOSO_W



INA
VENOSO_W



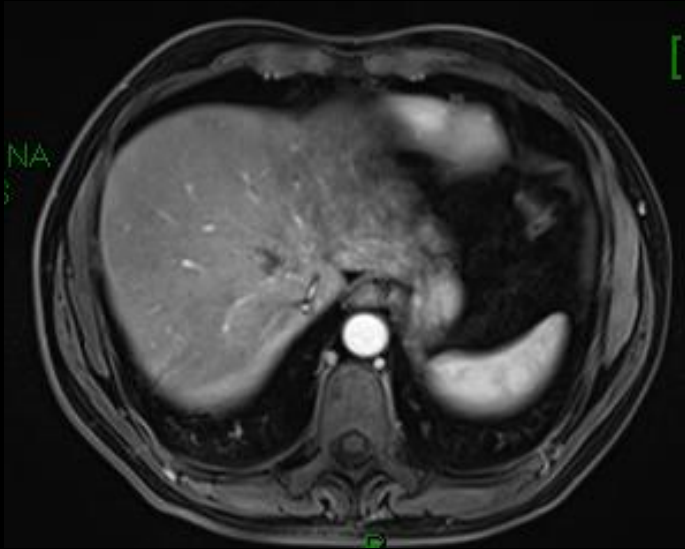
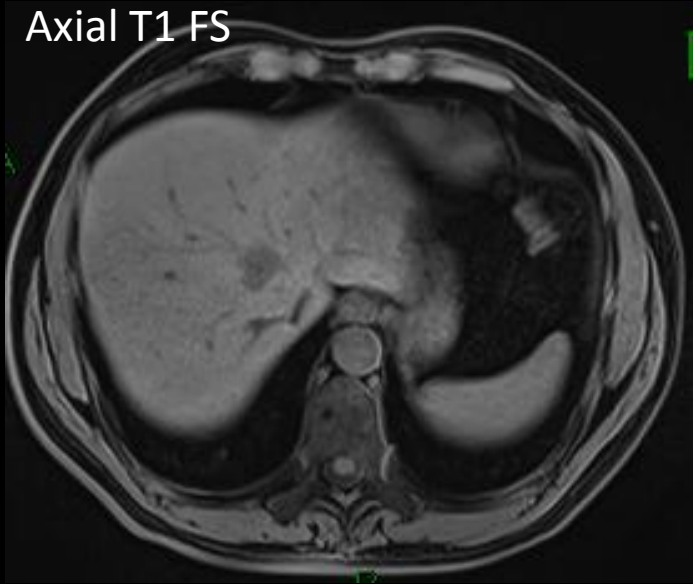
SABER 

Fase venosa

Gerenciamento profissional Ltda.



Axial T1 FS

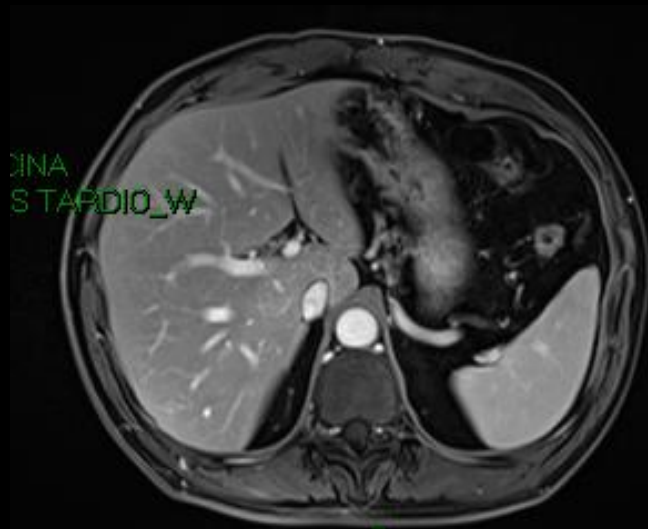
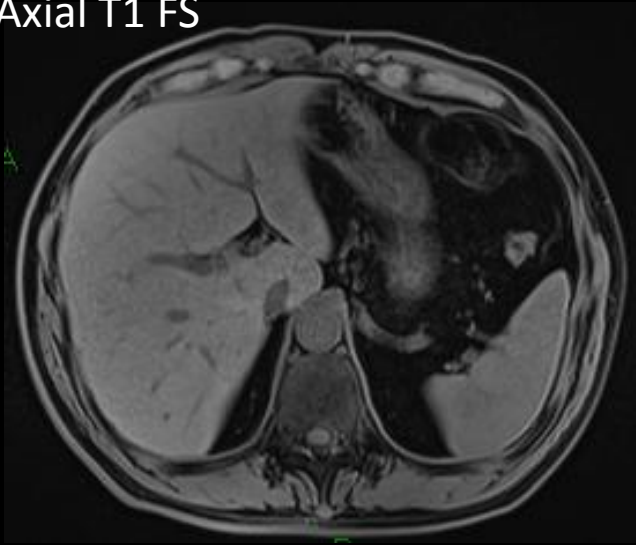


SABER X

Gerenciamento profissional Ltda.



Axial T1 FS

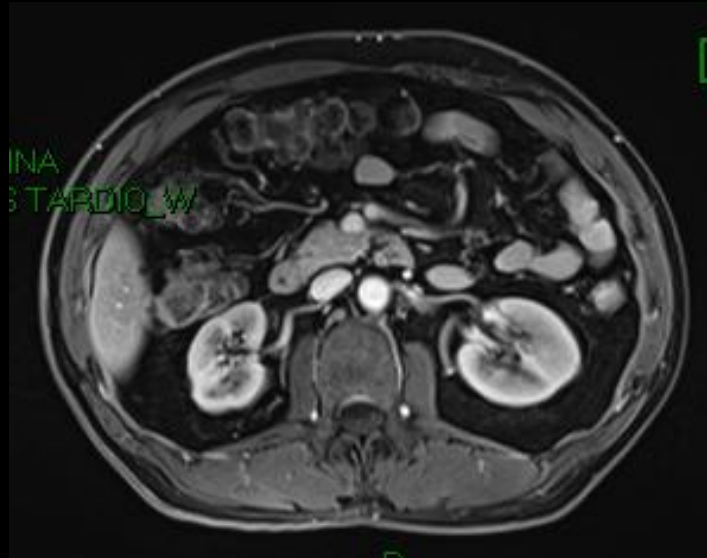
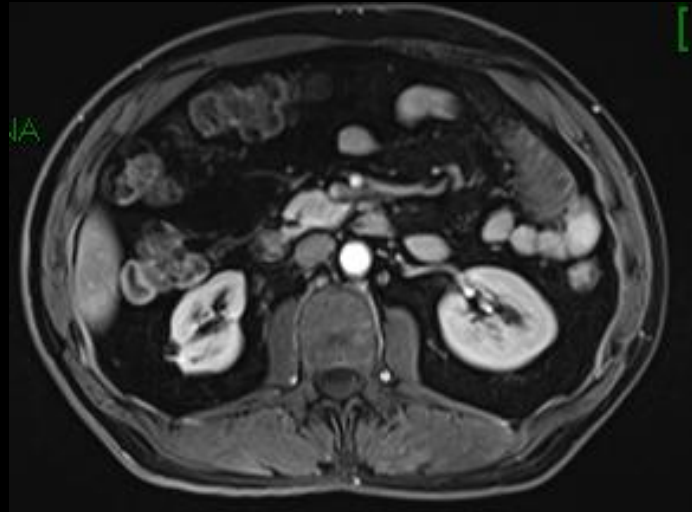
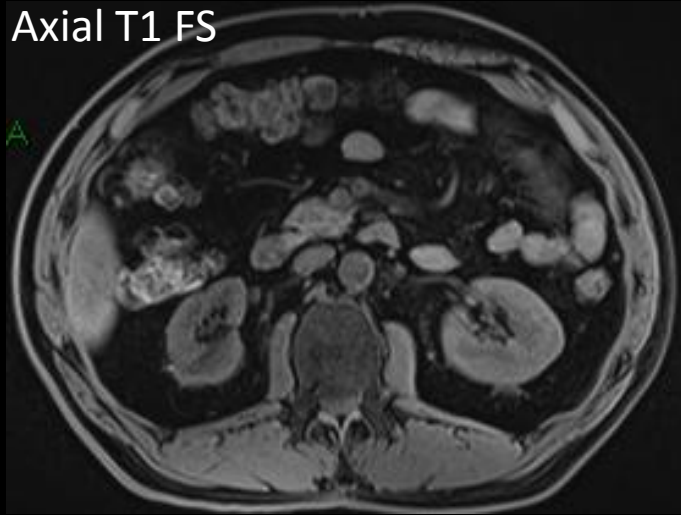


SABER X

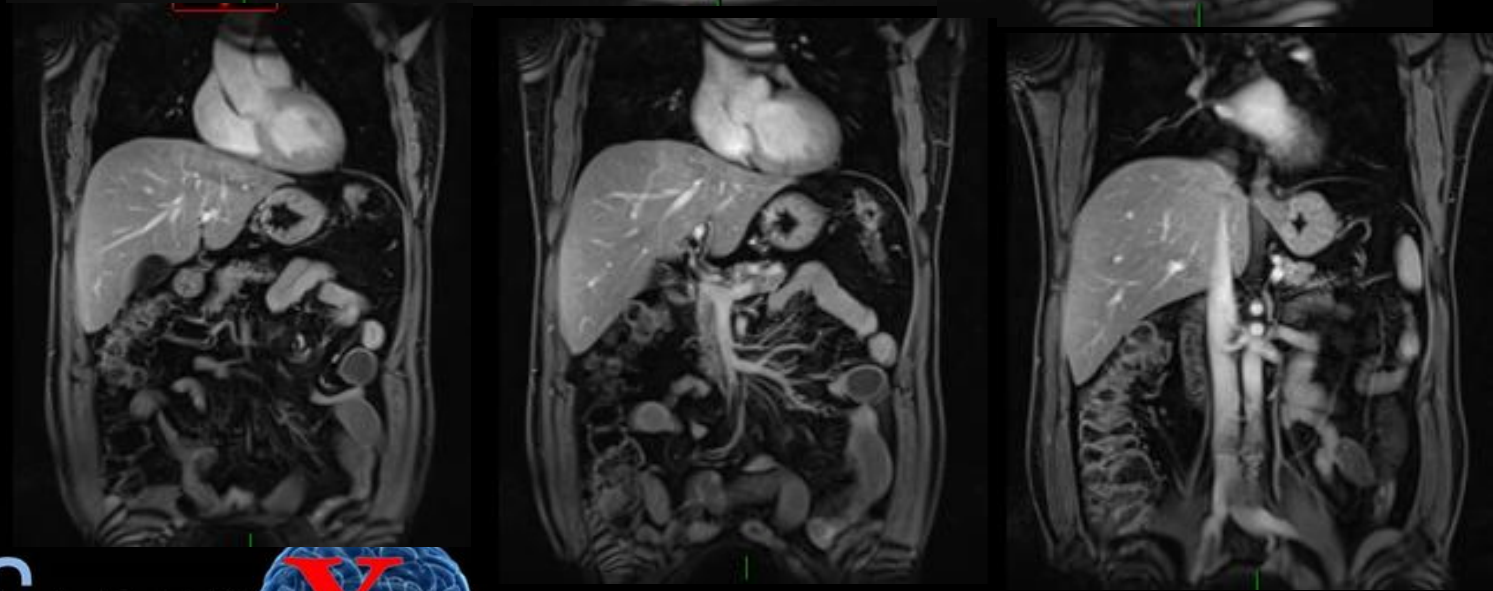
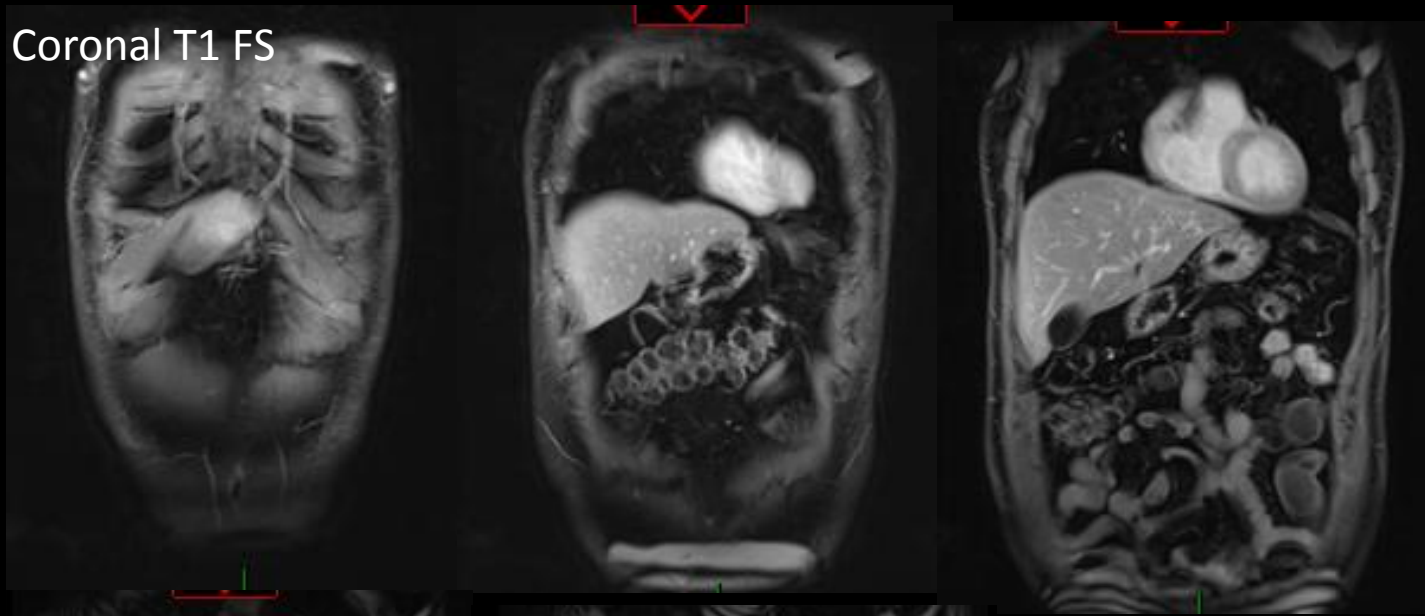
Gerenciamento profissional Ltda.



Axial T1 FS



Coronal T1 FS

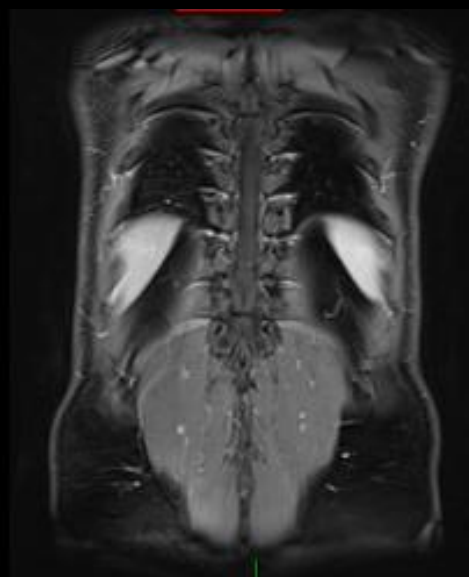
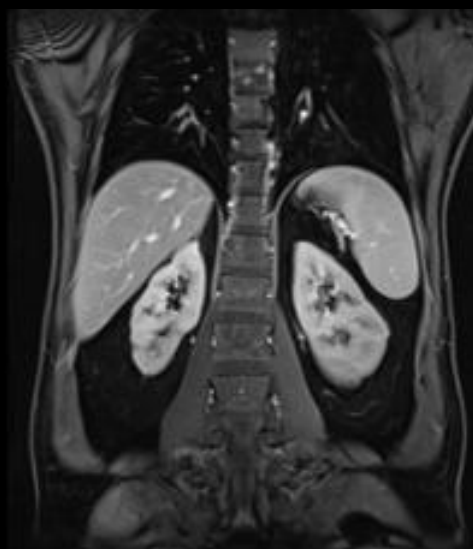


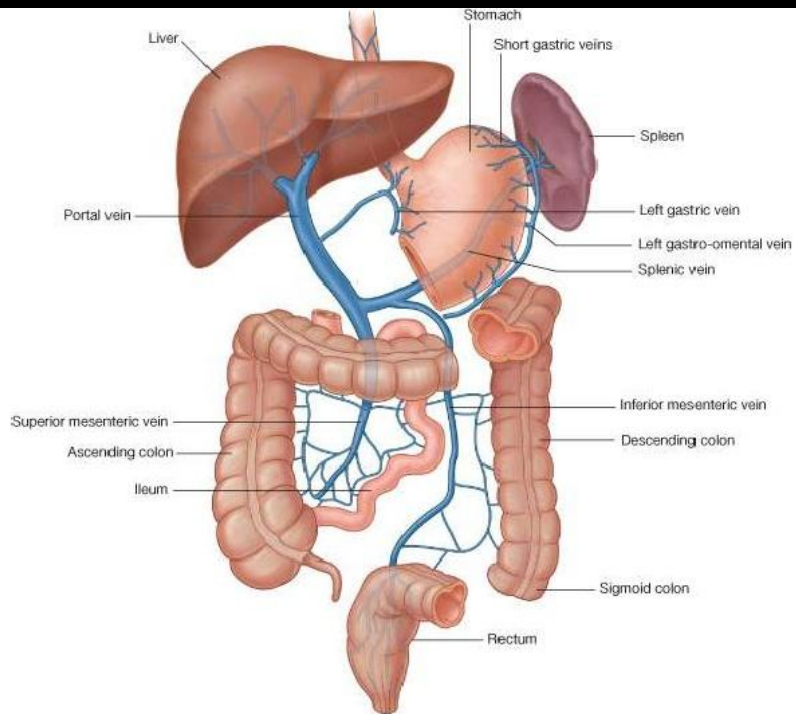
SABER X

Gerenciamento profissional Ltda.

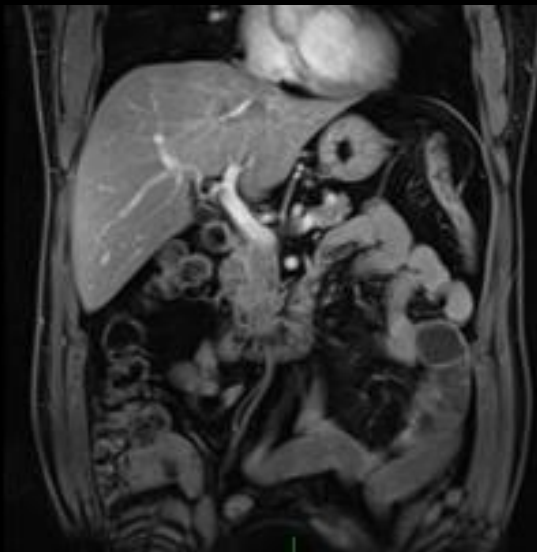
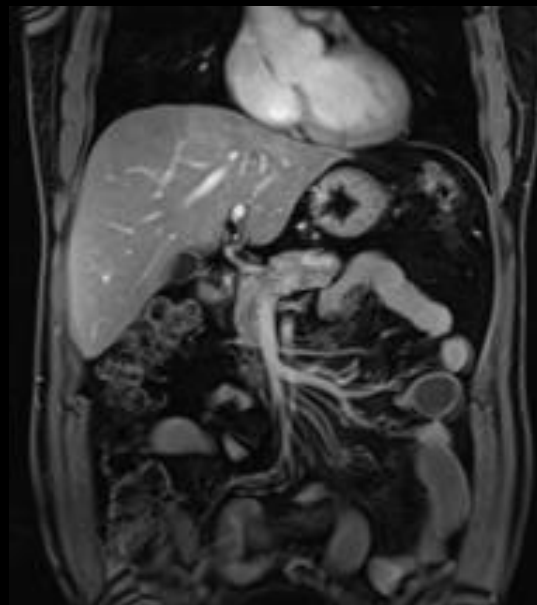


Coronal T1 FS





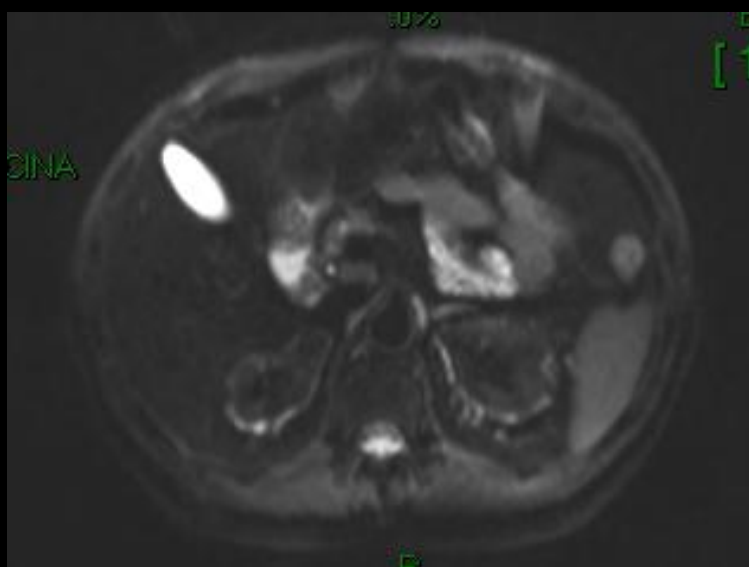
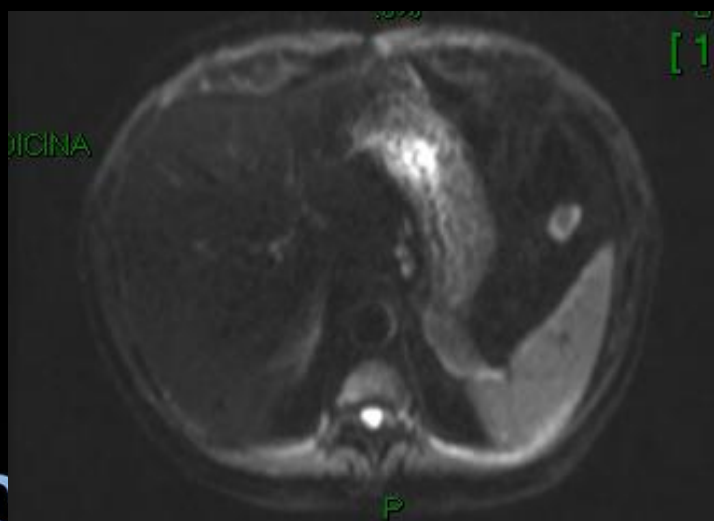
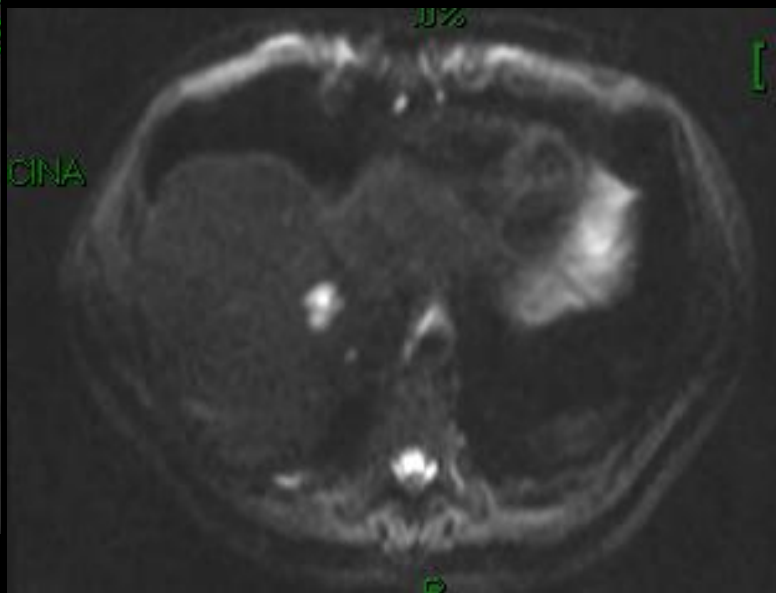
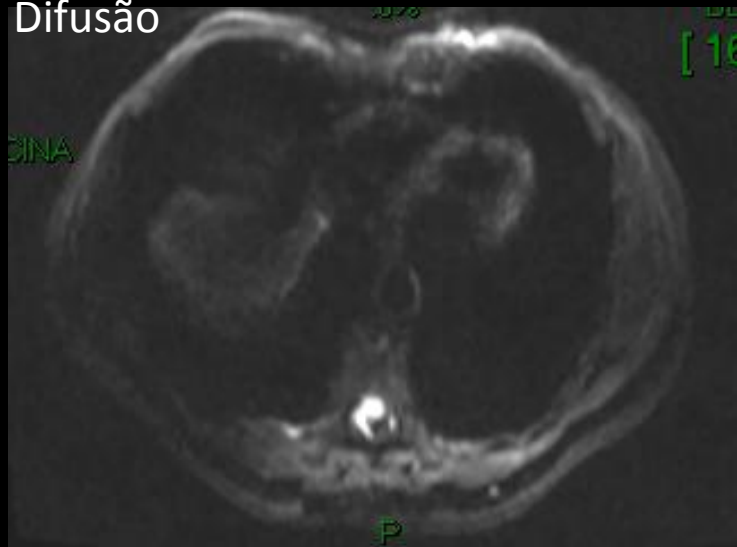
© Elsevier, Drake et al: Gray's Anatomy for Students - www.studentconsult.com



Gerenciamento profissional Ltda.



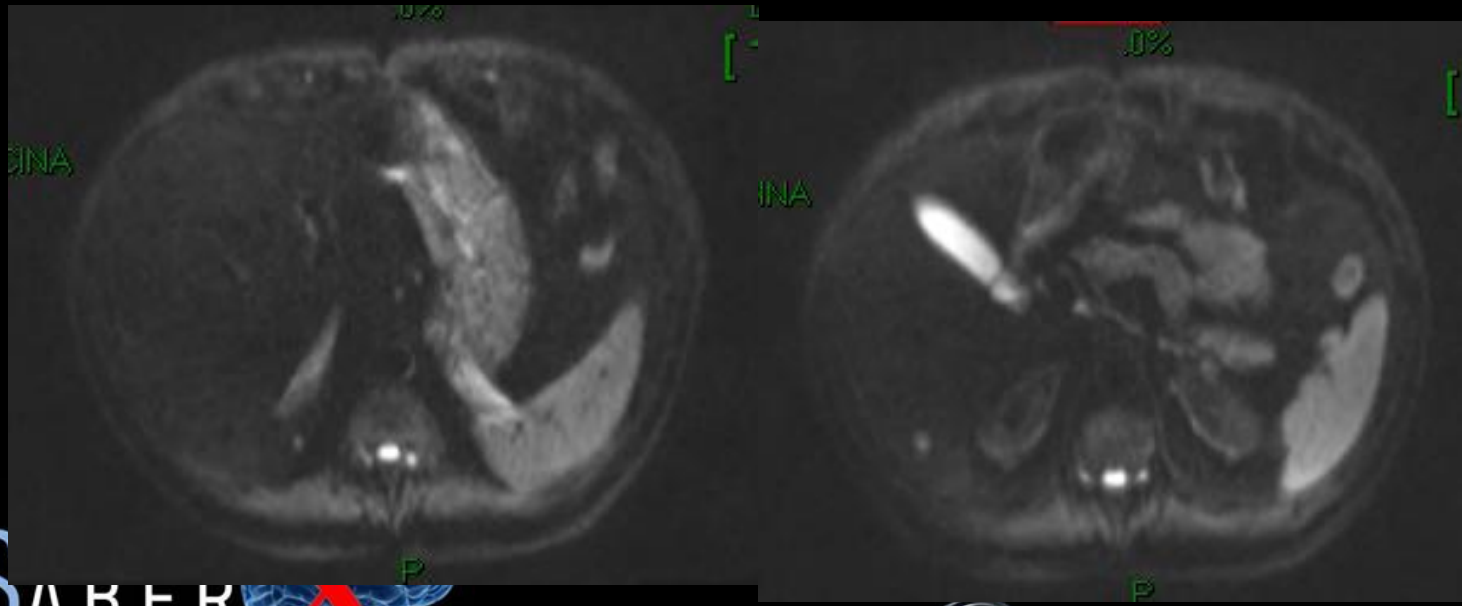
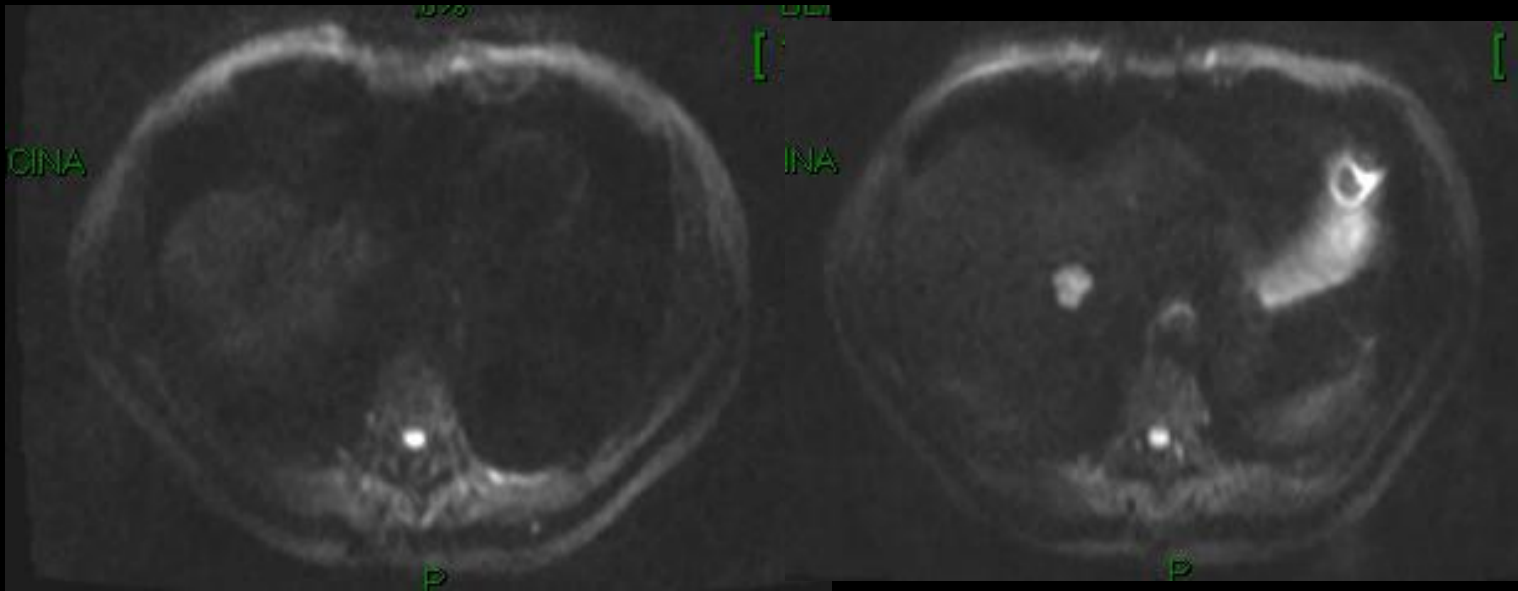
Difusão

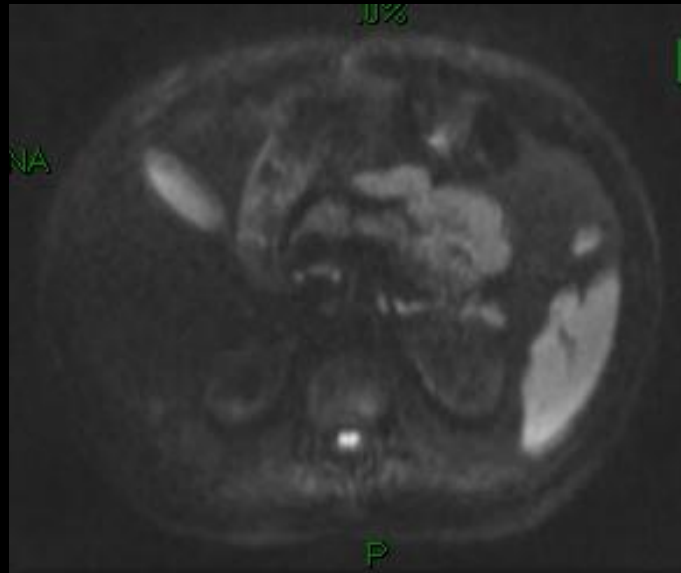
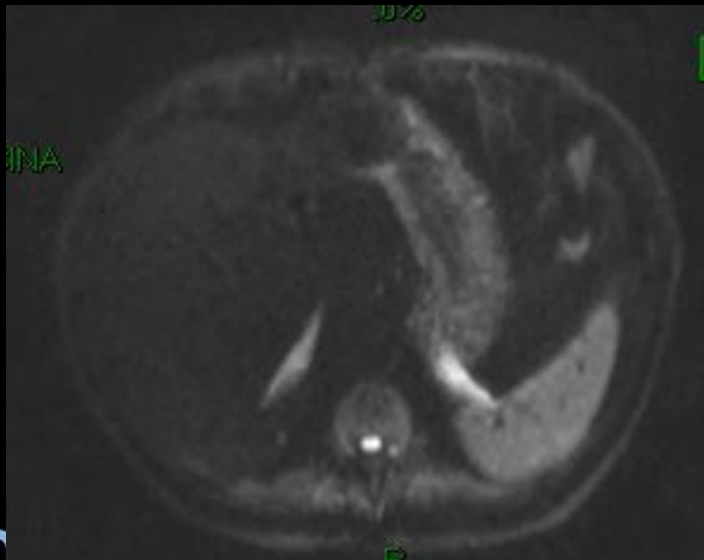
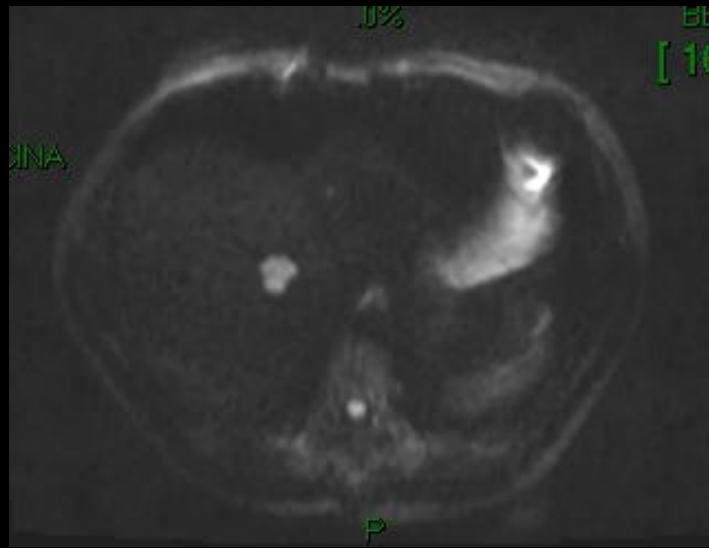
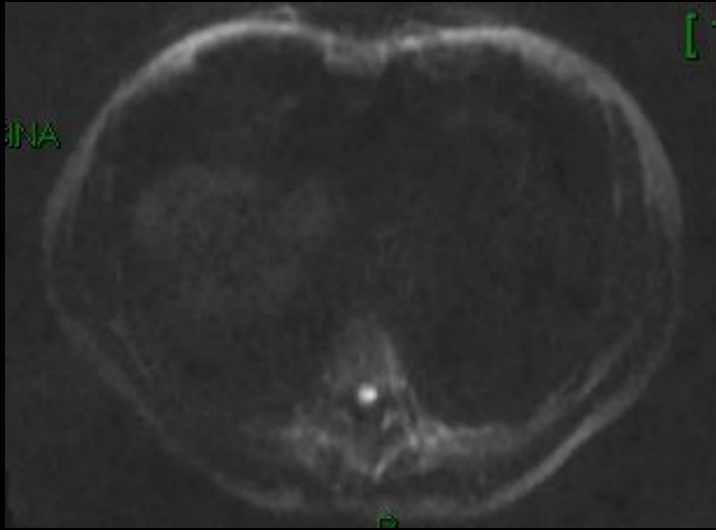


SABER 

Gerenciamento profissional Ltda.



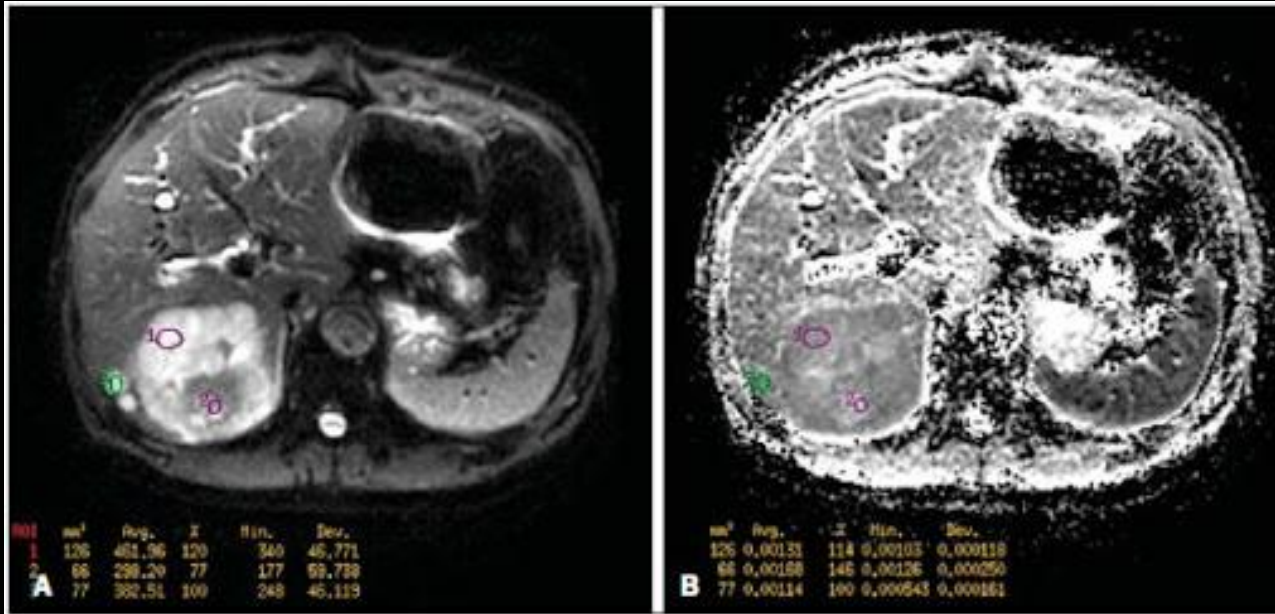




SABER X

Gerenciamento profissional Ltda.



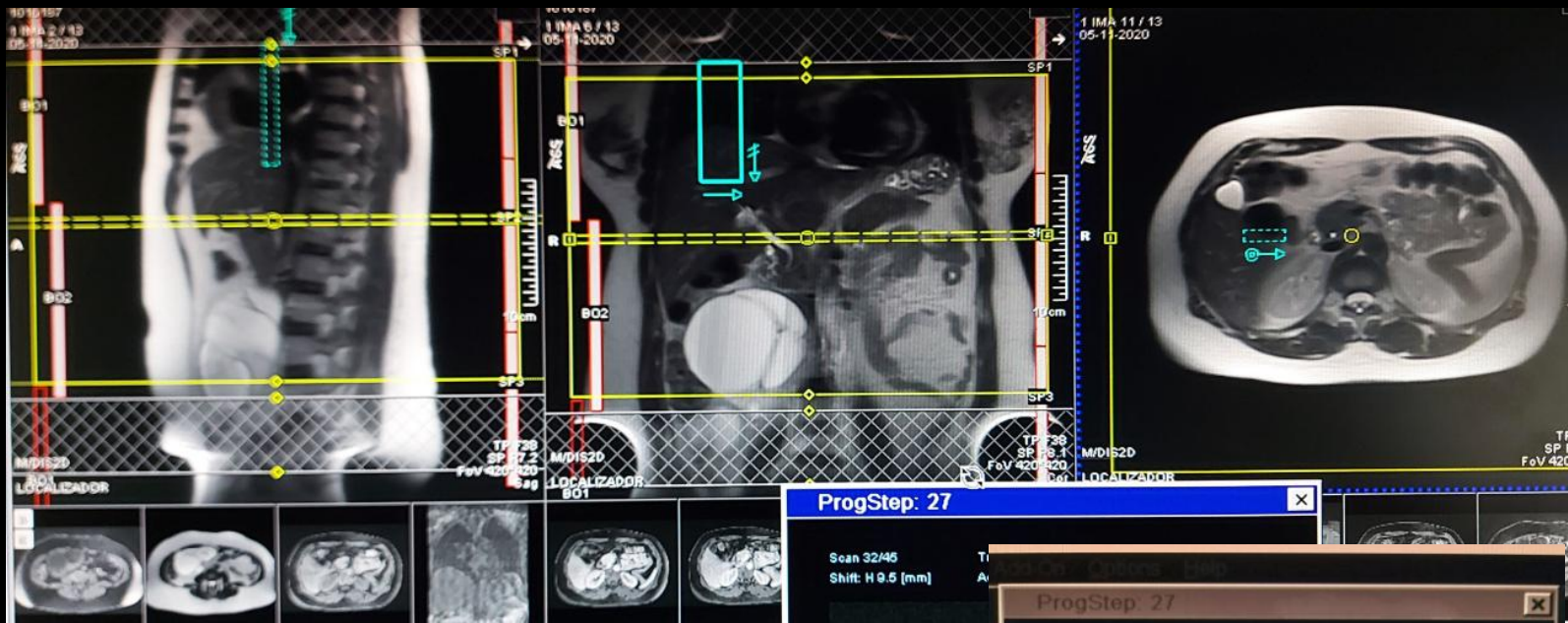


SABER X

Gerenciamento profissional Ltda.



Axial T2



ProgStep: 27

Scan 32/45
Shift: H 9.5 (mm)

TA: 3:45 PM: ISO PAT: 2 Voxel size: 1.5x1.5x6.0 mm Rel. SNR: 1.00 :tseBR

Signal **Cardiac** **PACE**

Resp. control **Trigger** Select acquisition window **Manual**

Scout mode Acquisition window **1866** ms

Scout TR **150** ms Scout type **Liver dome scout**

Accept window ± **2.0** mm Trigger pulse **1**

Position accept window **Automatic** Concatenations **5**

Store profile images

Program **Routine** **Contrast** **Resolution** **Geometry** **System** **Physio** **Inline** **Sequence**

ProgStep 27

Scan 16/45 Trig. period: 3.7 [s]
Shift: H 9.5 (mm) Accept pos.: 0 [%]

Head [mm]

96
77
58
38
19
0
-19
-38
-58
-77
-96

Free breathing

Details

TA: 0:55 PM: ISO PAT: 2 Voxel size: 1.6x1.6x6.0 mm Rel. SNR: 1.00 : h

Signal1 Cardiac PACE

Resp. control Breath-hold



TA: 0:55 PM: ISO PAT: 2 Voxel size: 1.6x1.6x6.0 mm Rel. S

Breath-hold duration: 20 s

Slices 30

Dist. factor 20 %

Position L10.1 P7.8 F79.8

Orientation Coronal

Phase enc. dir. R >> H

AutoAlign ---

Phase oversampling 100 %

FoV read 40

FoV phase 10

Slice thickness 8.0

TR 13

TE 93

Averages 1

Concatenations 2

Filter Distortion

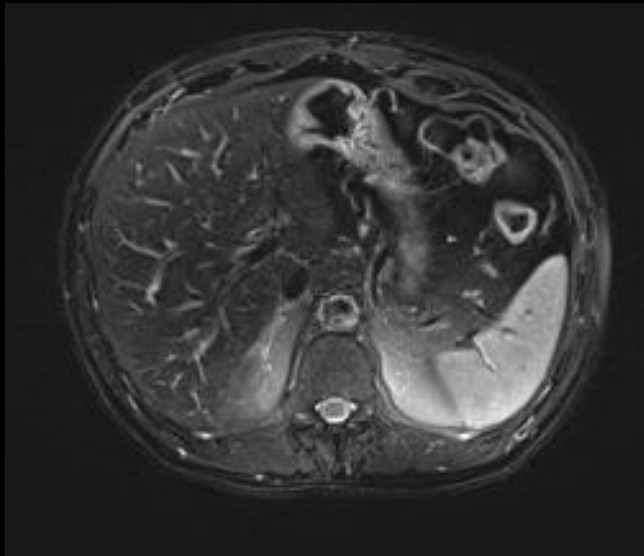
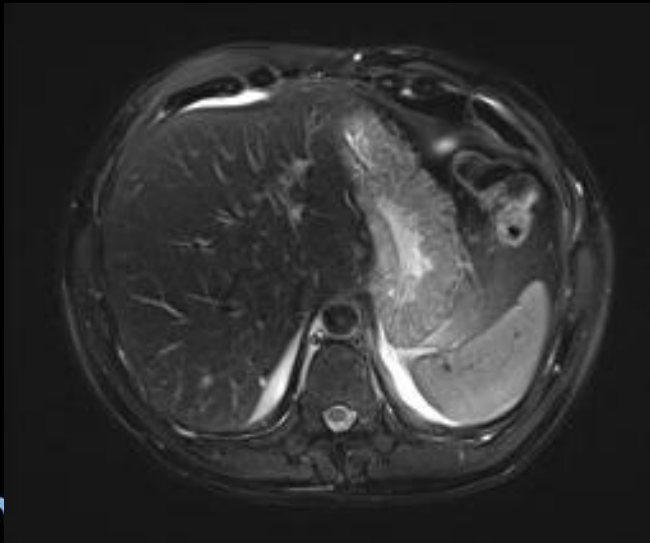
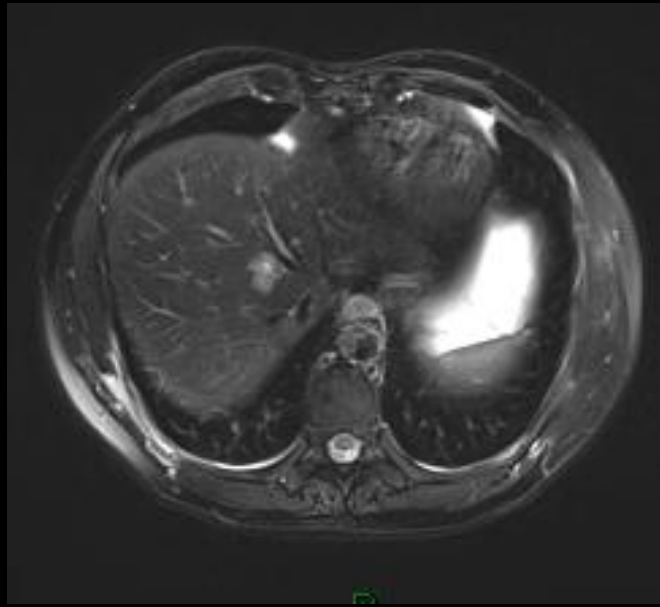
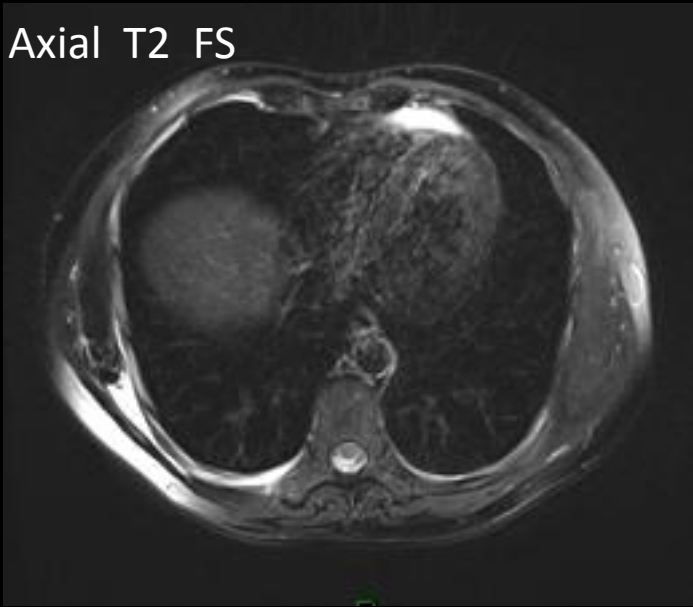
Concatenations 2



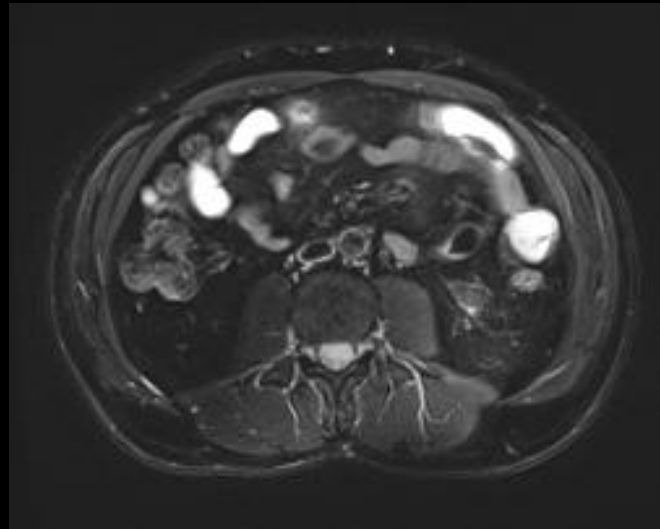
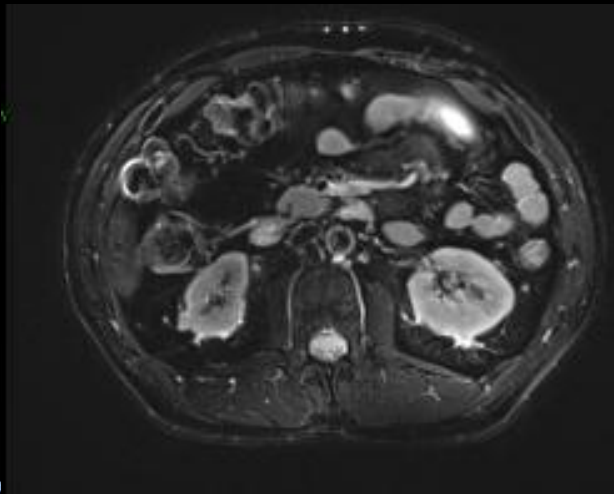
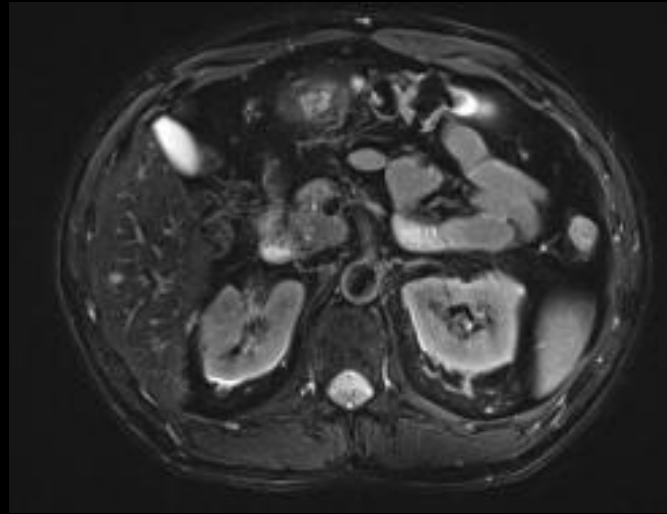
Physio Inline Sequence



Axial T2 FS



Axial T2 FS

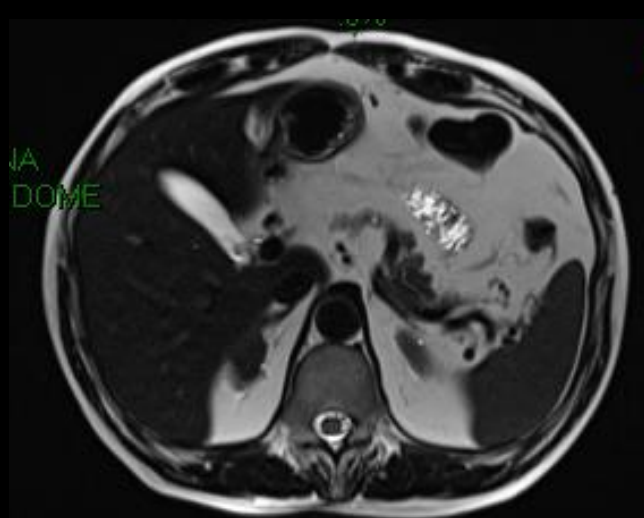
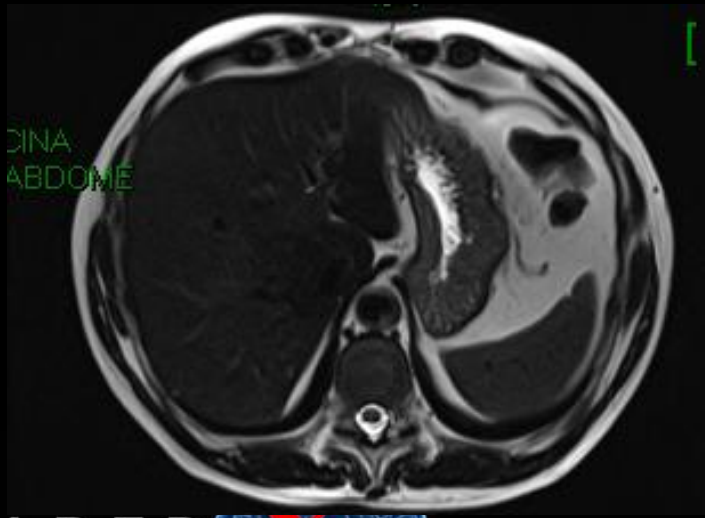
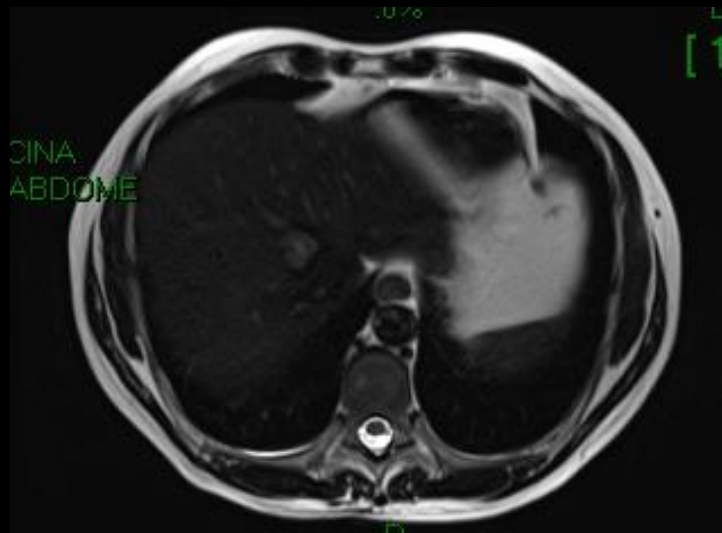
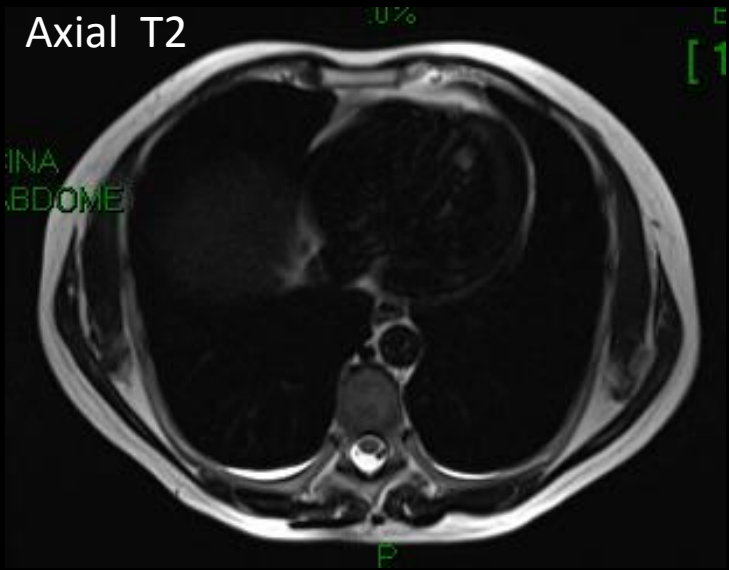


SABER 

Gerenciamento profissional Ltda.



Axial T2

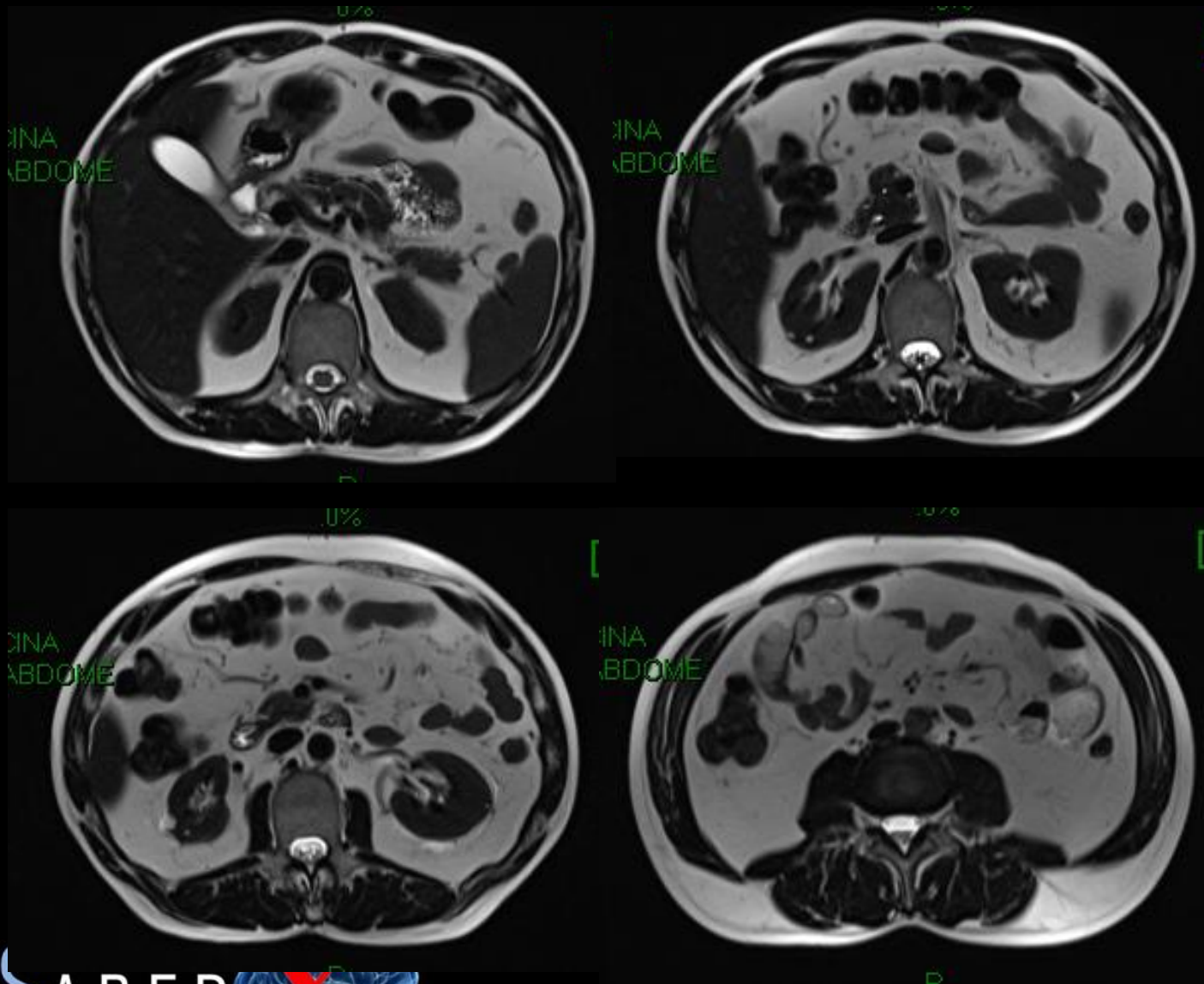


SABER X

Gerenciamento profissional Ltda.



Axial T2



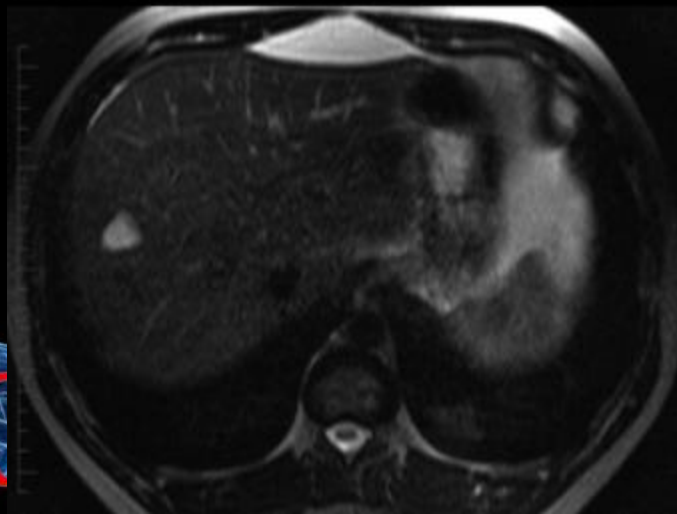
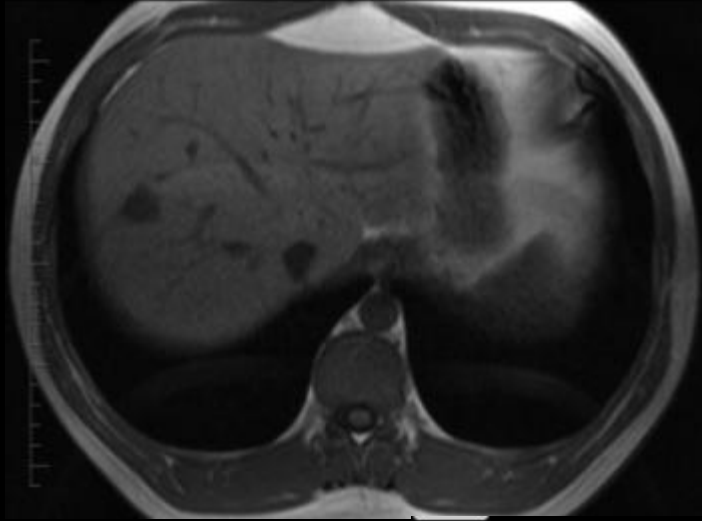
Vídeo

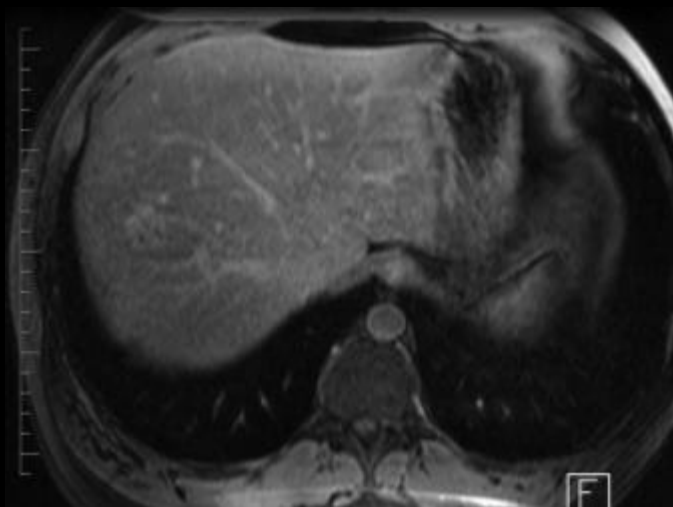
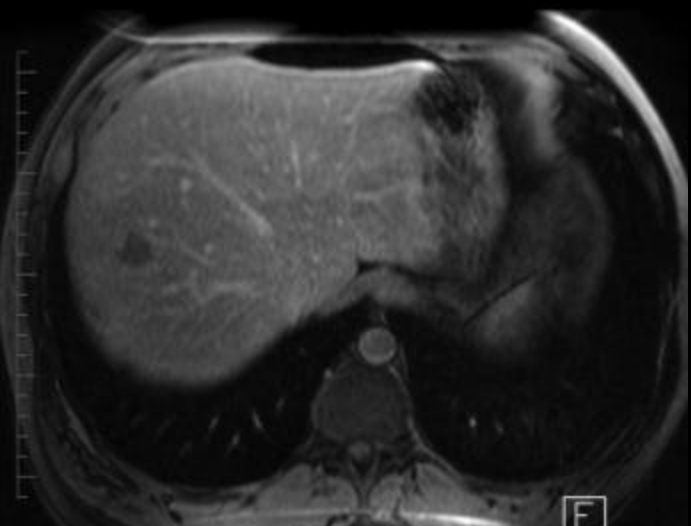
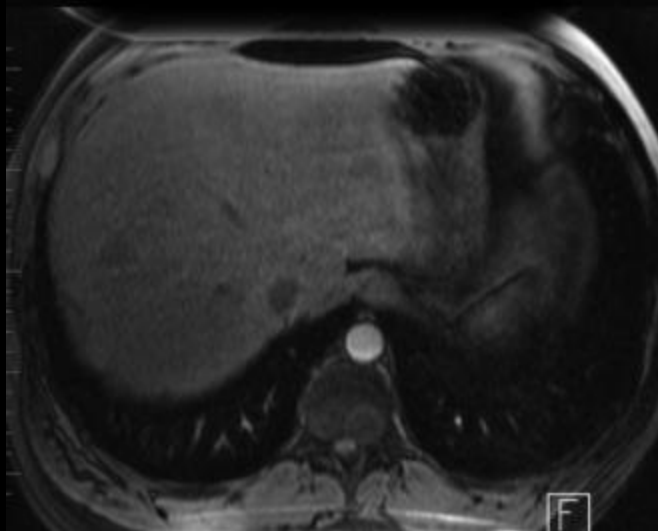
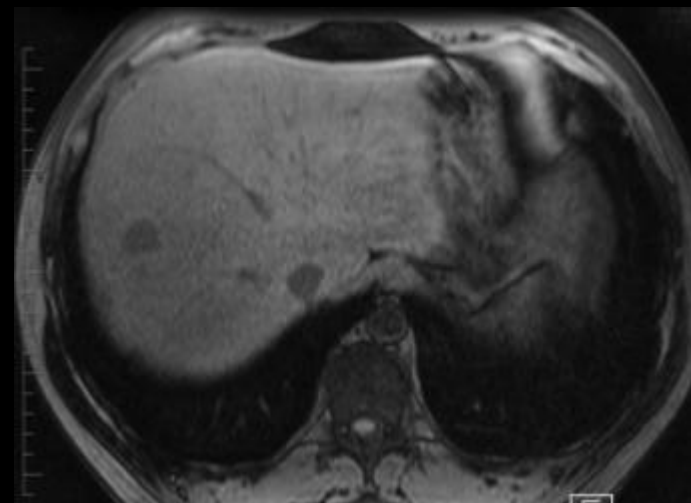


Gerenciamento profissional Ltda.



Hemangiomas hepáticos ou **malformações venosas hepáticas** são as lesões hepáticas vasculares benignas mais comuns . Eles são freqüentemente diagnosticados como um achado incidental em exames de imagem, e a maioria dos pacientes é assintomática.



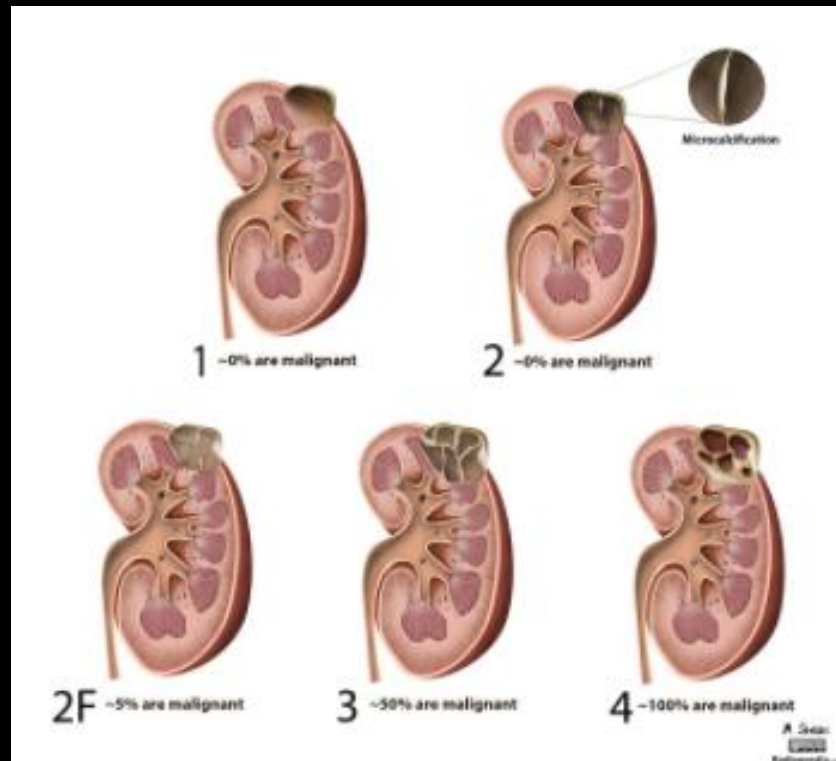


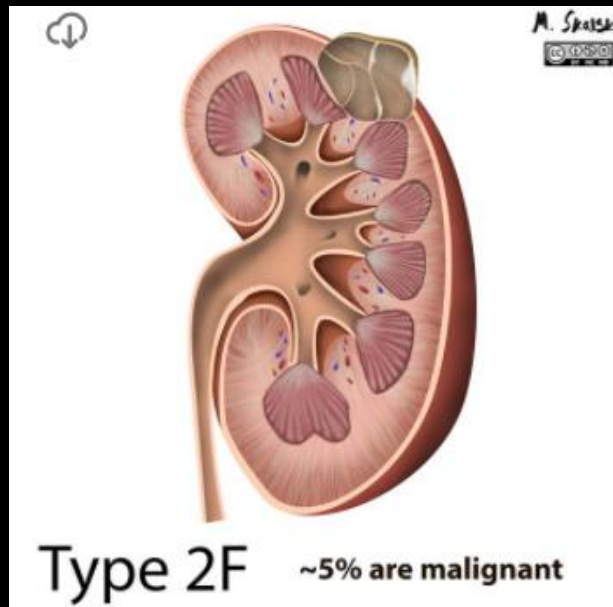
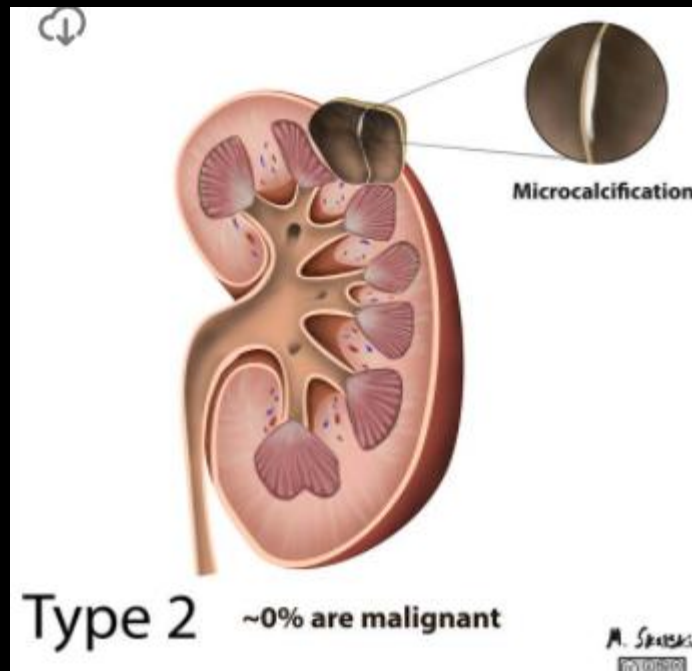
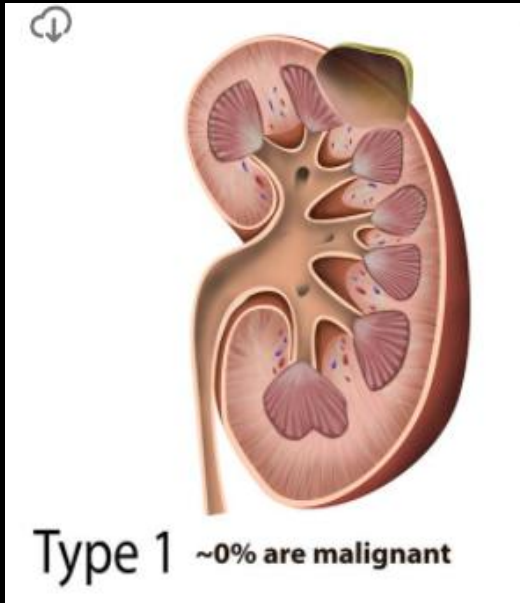
SABER X

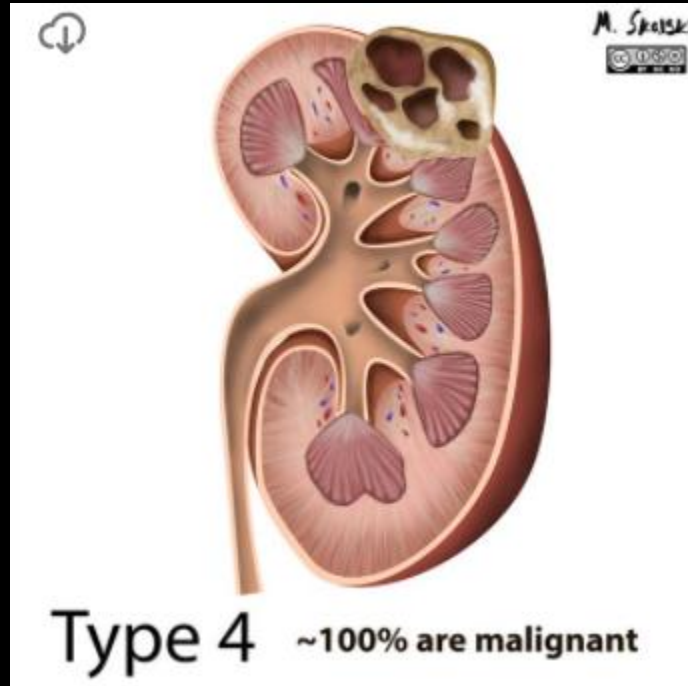
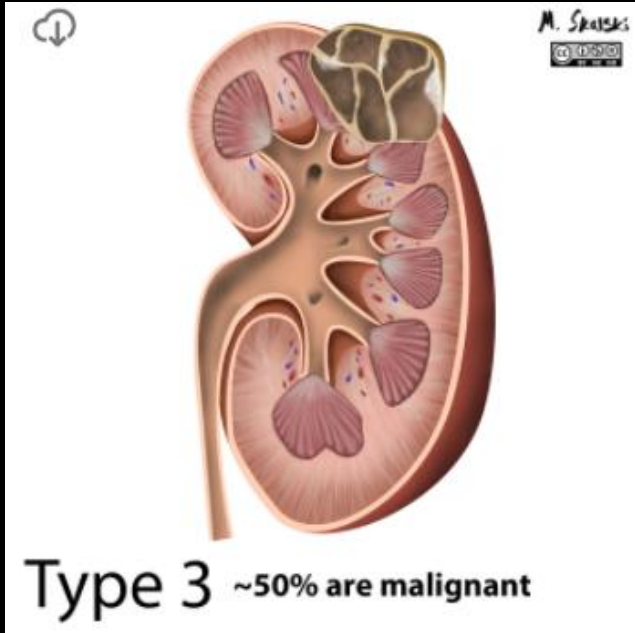
Gerenciamento profissional Ltda.



O sistema de classificação de Bosniak de massas císticas renais divide as **massas císticas** renais em cinco categorias com base nas características de imagem na TC com contraste. É útil para prever o risco de malignidade e sugerir acompanhamento ou tratamento.







Ressonância magnética

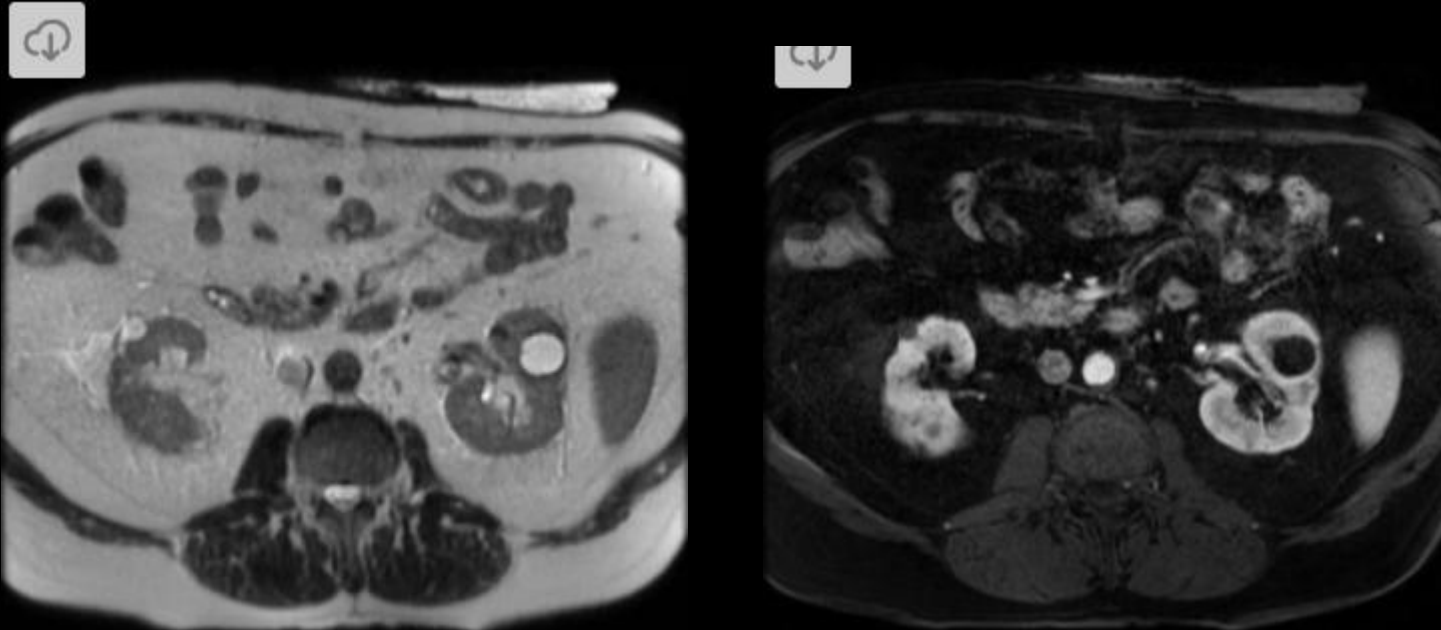
As características simples do cisto são semelhantes à ultrassonografia e TC:

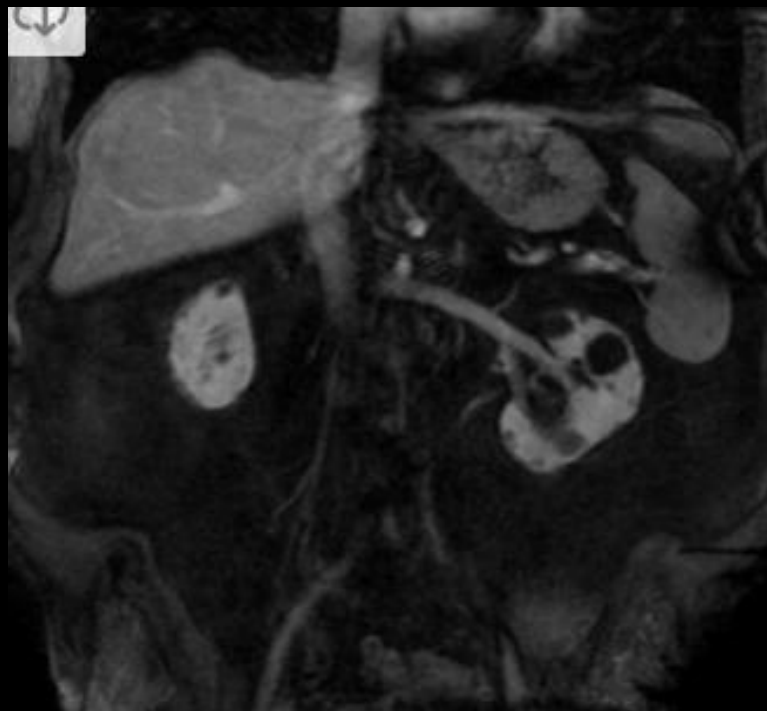
T1: hipointenso (detritos hemorrágicos podem aumentar levemente o sinal)

T1 C + (Gd): sem realce pós-contraste

T2: fortemente hiperintenso (detritos hemorrágicos podem diminuir levemente o sinal) e separados do sistema coletor

DWI: sinal aumentado, mas sem difusão restrita





SABER 

Gerenciamento profissional Ltda.



Protocolo Adrenal – em fase 3mm

The image displays a medical imaging software interface for an MRI protocol. It features three main axial views of the abdomen, each with a red rectangular box highlighting the adrenal gland area. The views are labeled with 'C' and 'R' (Right). Below the views, there is a patient information section with the name 'CINTIA TESTE' and date '15-Mar-78'. A sequence list on the left shows various scan sequences, with 'cor_t2_tse_3_apneias' selected. A parameter control panel on the right shows settings for 'Slice group 1', 'Slices 20', 'Dist. factor 80', 'Position R3.9 F13.3 F32', 'Orientation Transversal', 'Phase enc. dir. A >> P', and 'Phase oversampling 15'. A 'ProgStep: 2' window shows a coronal view of the abdomen. The bottom of the interface includes a toolbar with icons for 'auto', 'stop', 'play', and 'filter', with the filter set to 'Distortion Corr (2D)'. A radiation warning symbol is visible at the bottom center.

TP: 0 SP: 0.0 Fov: 400*100 localizar: trocar bobina APNEIA

TP: 0 SP: 0.0 Fov: 400*100 localizar: trocar bobina APNEIA

TP: 0 SP: 0.0 Fov: 400*100 localizar: trocar bobina APNEIA

TP: 0 SP: 0.0 Fov: 400*100 localizar: trocar bobina APNEIA

CINTIA TESTE 15-Mar-78 TA: 1:08 PM: FIX PAT: Off Voxel size:

1 localizar trocar bobina APNEIA

2 cor_t2_tse_3_apneias

3 axial_t2_tse_4_apneias

4 axial_str_5_apneias 3 01:27

5 t1_fi2d_in+out_tra 3 01:07

6 t1_vibe_axial_pre 3 00:19

7 t1_vibe_cor_PRE 3 00:19

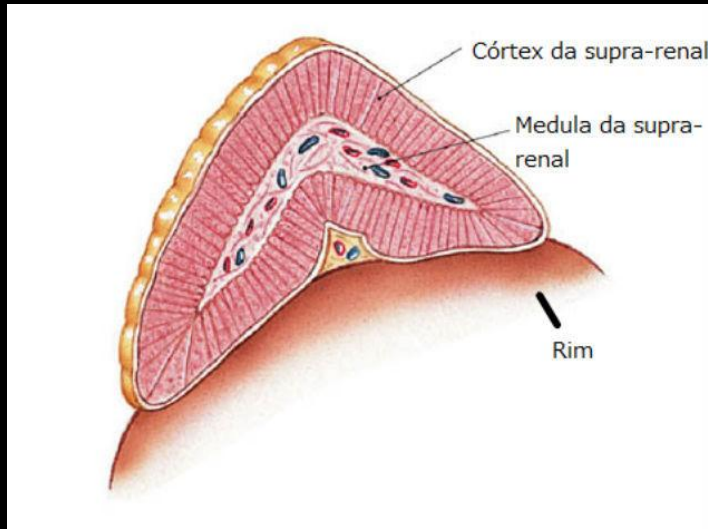
ProgStep: 2

CINTIA TESTE

IMA: 12

Filter: Distortion Corr (2D)

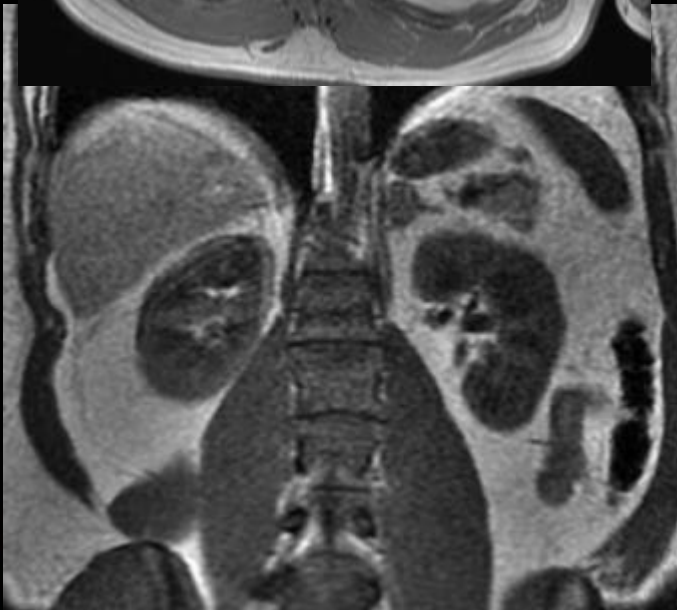
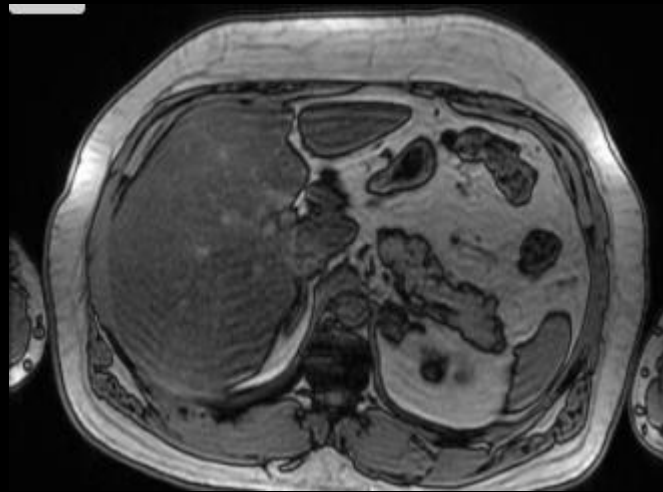
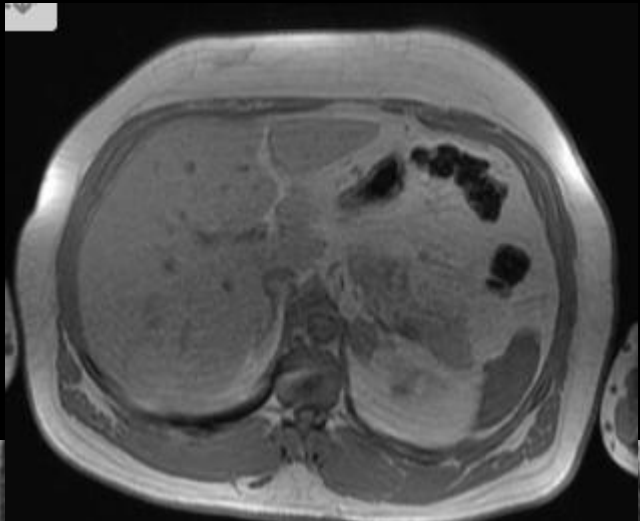
Protocolo Adrenal – 3mm



Protocolo Adrenal – 3mm

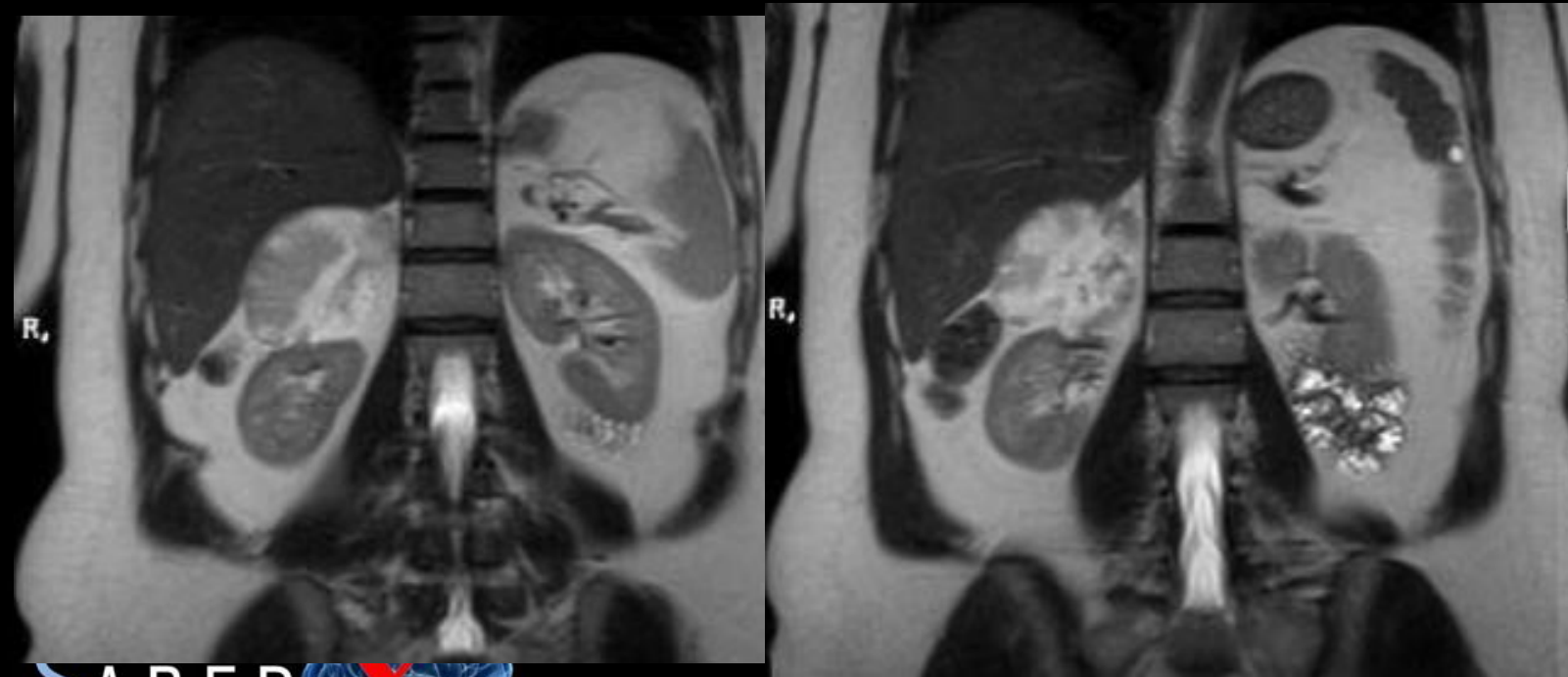


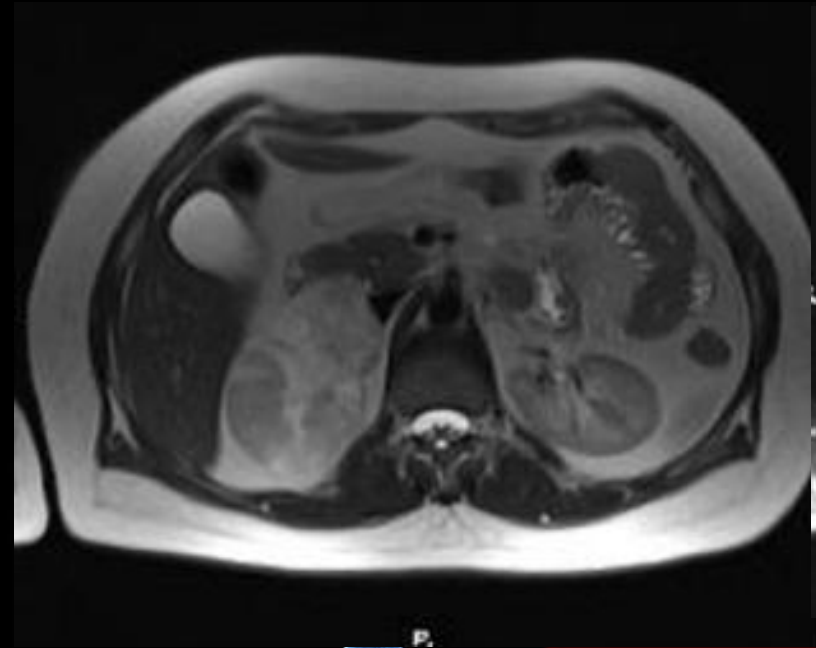
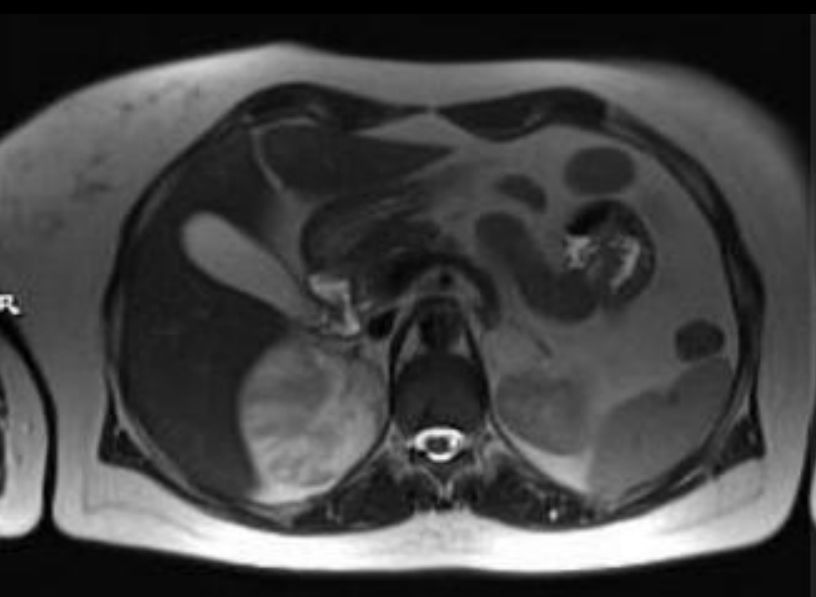
Os adenomas adrenais , são as lesões mais comum e costumam ser encontrados incidentalmente durante exames de imagem abdominal por outros motivos.

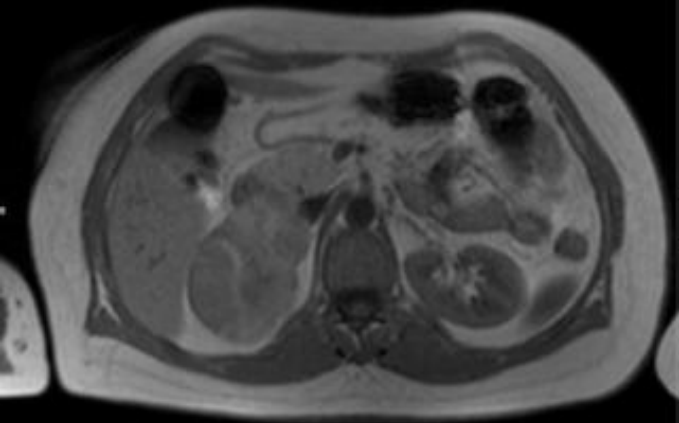
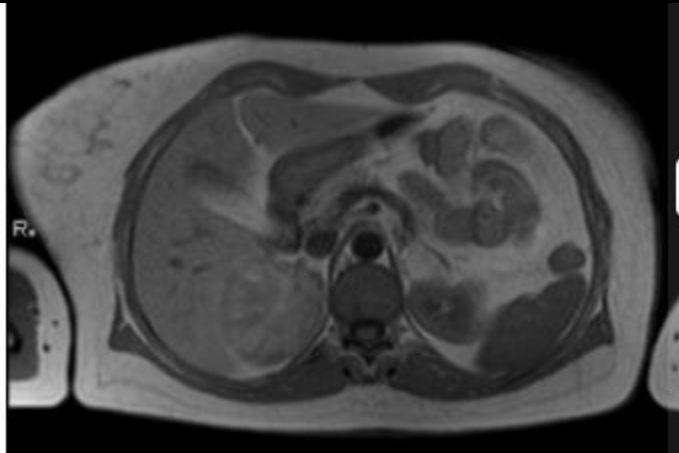


Os **mielolipomas adrenais** são tumores raros, benignos e geralmente assintomáticos [da glândula adrenal](#), caracterizados pelo predomínio de adipócitos maduros.

Na imagem, eles geralmente se apresentam como grandes massas com uma quantidade variável de componentes contendo gordura.



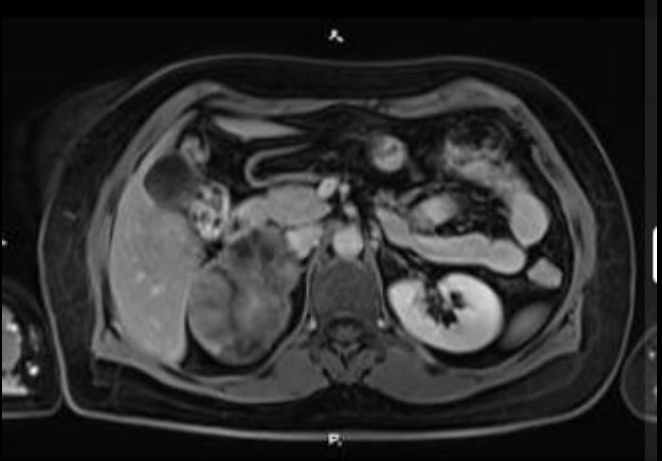
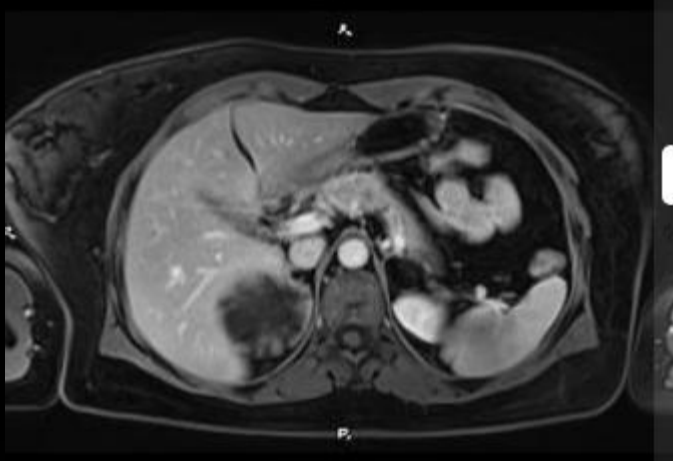
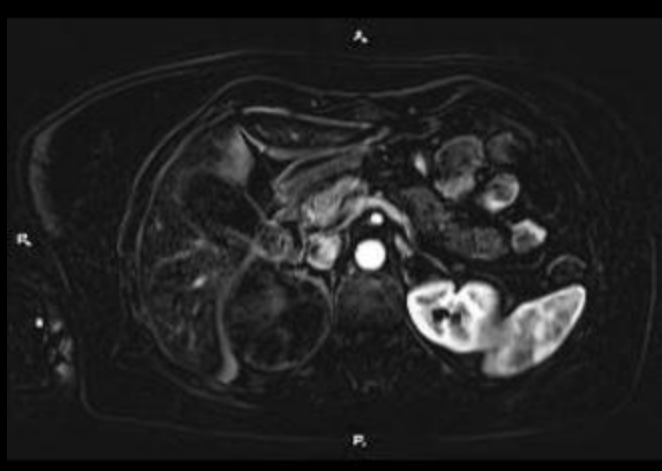
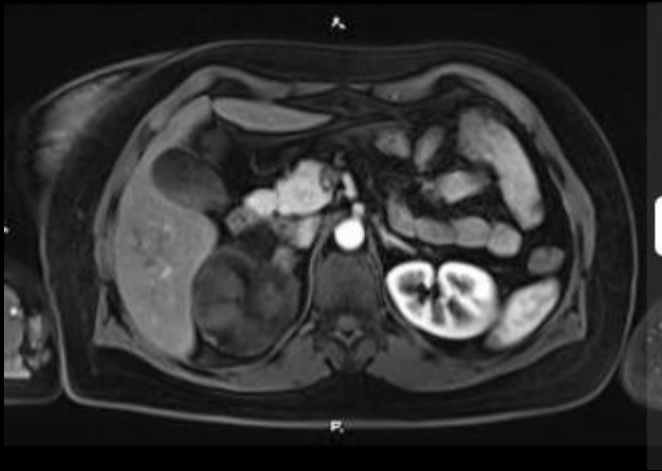




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Protocolo Pâncreas

The interface displays MRI scan parameters and sequence lists. The top section shows three views of the abdomen with a red box indicating the region of interest and a white 'C' marker. The bottom section contains a control panel with a sequence list, a parameter configuration window, and a 'ProgStep: 2' window showing a coronal view of the abdomen.

Sequence List:

Seq #	Name	Time
1	localizer trocar bobina APNEIA	
2	cor_t2_tse_3_apneias	
3	axial_t2_tse_4_apneias	
4	axial_str_5_apneias	01:27
5	t1_f12d_in+out_tra	01:07
6	t1_vibe_axial_pre	00:19
7	t1_vibe_cor_PRE	00:19

Parameter Configuration:

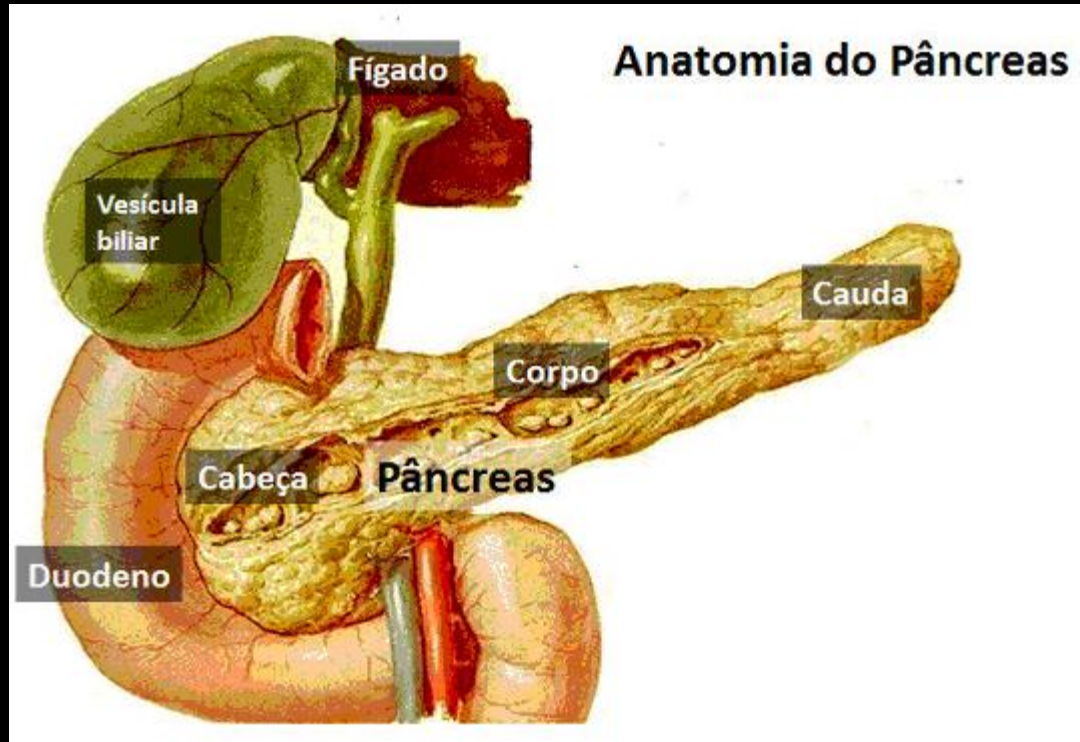
- Slice group: 1
- Slices: 20
- Dist. factor: 80 %
- Position: R3.9 F13.3 F32
- Orientation: Transversal
- Phase enc. dir.: A >> P
- Phase oversampling: 15 %

ProgStep: 2

CINTIA TESTE
IMA: 12

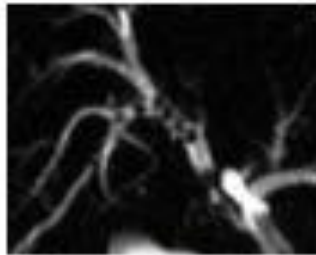
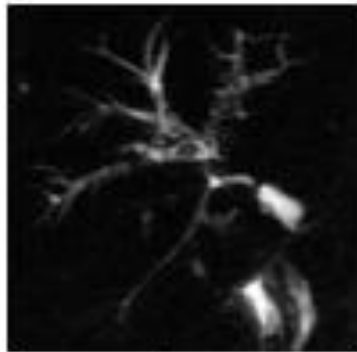
Filter: Distortion Corr (2D)

Protocolo Pâncreas



T2 SSFSE: T2 Single Shot Fast Spin Echo

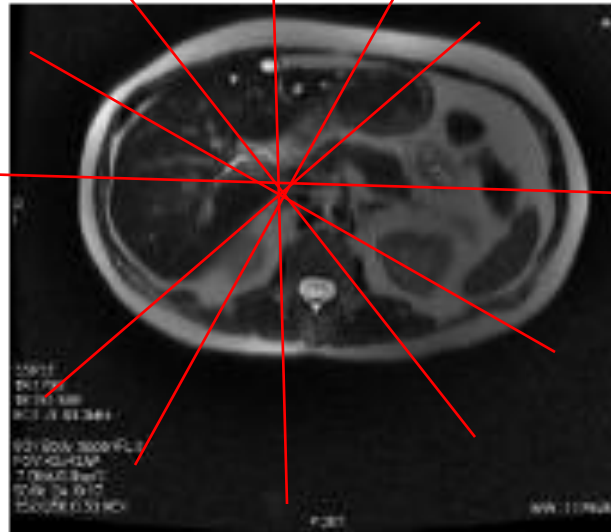
Acquisition Images

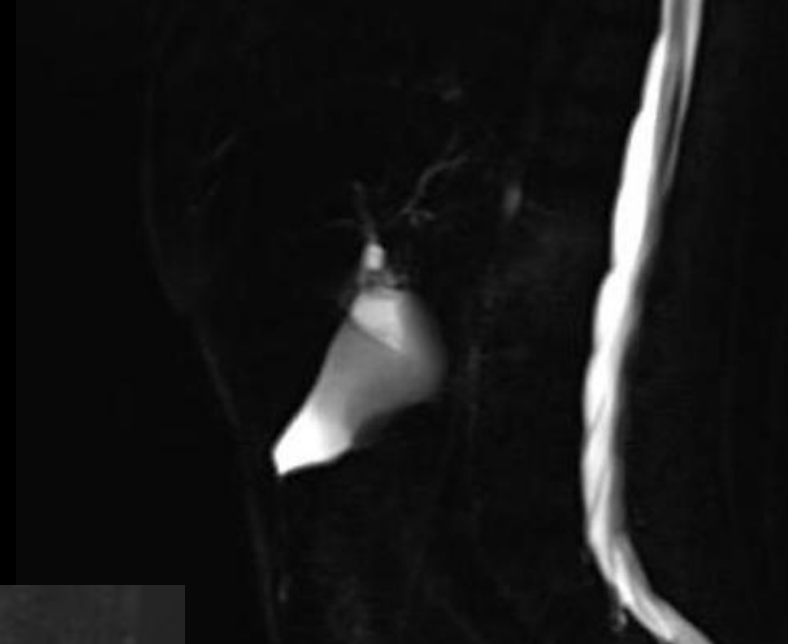


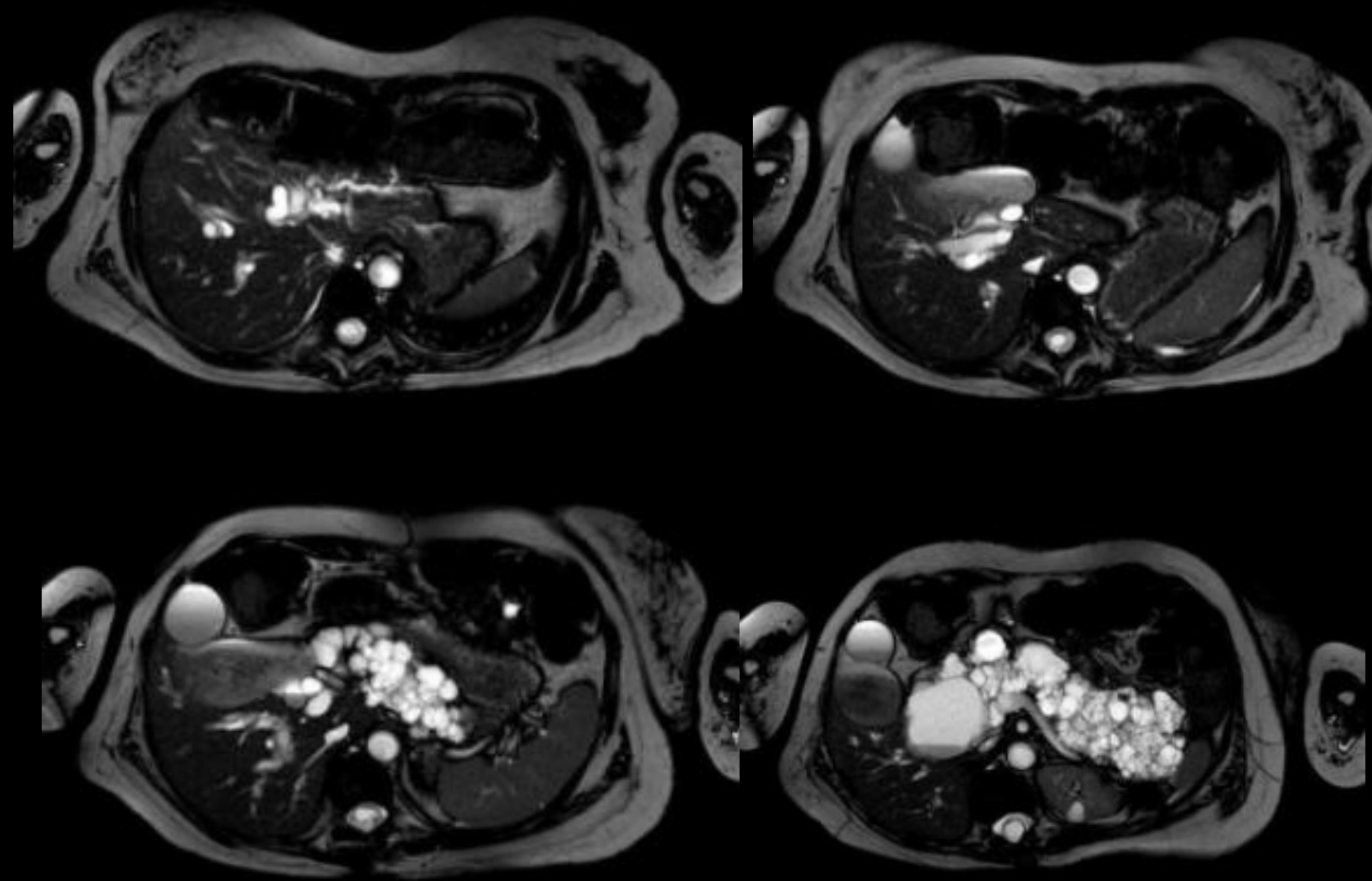
2D SSFSE
long TE



2D SSFSE short TE



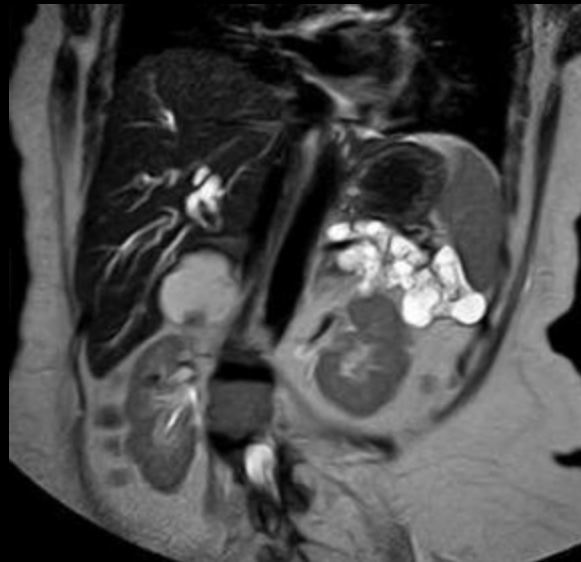
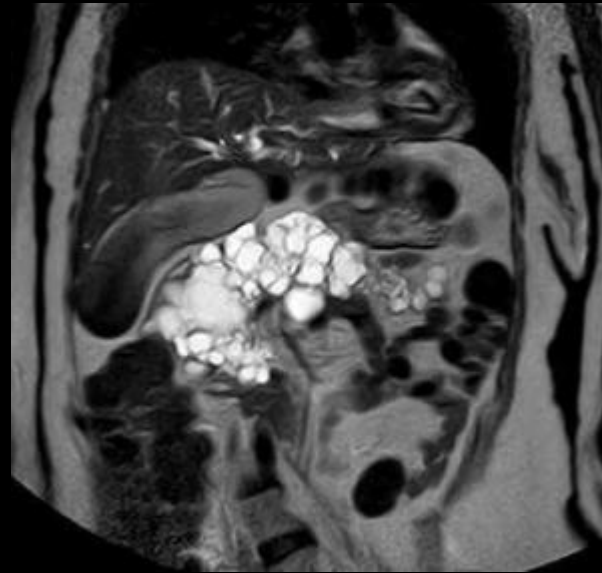
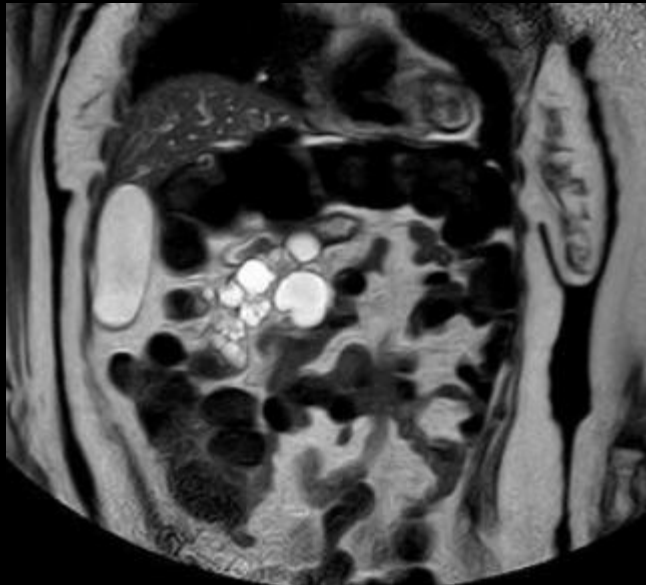


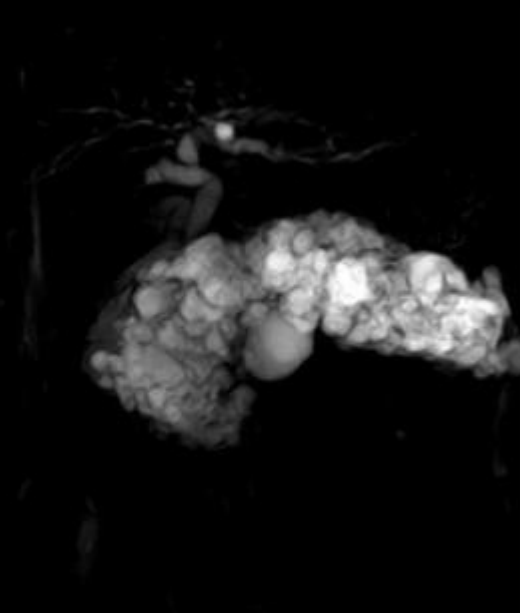
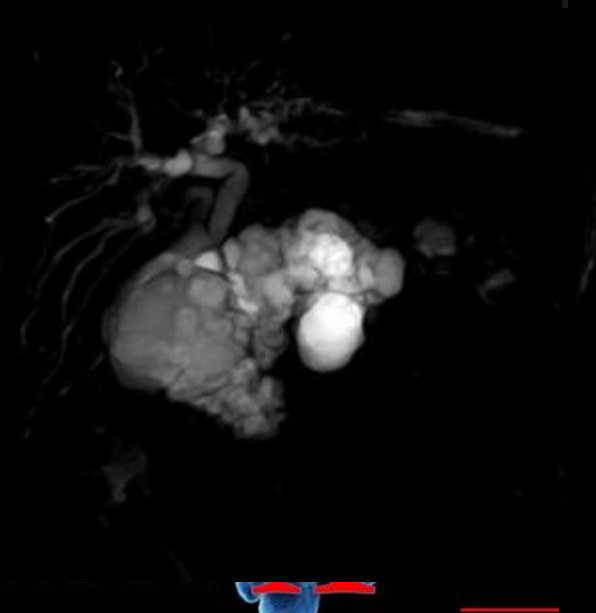
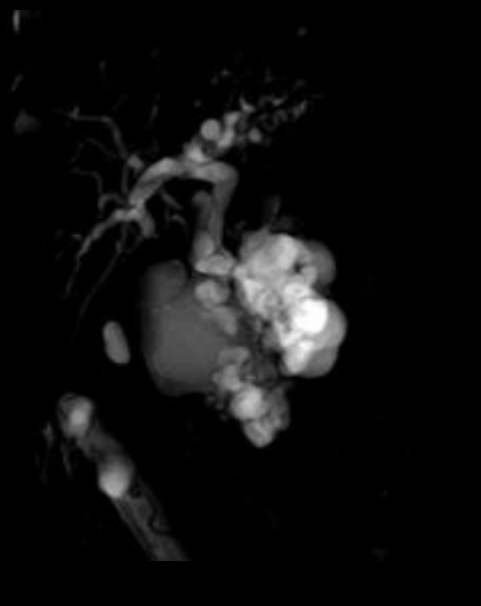
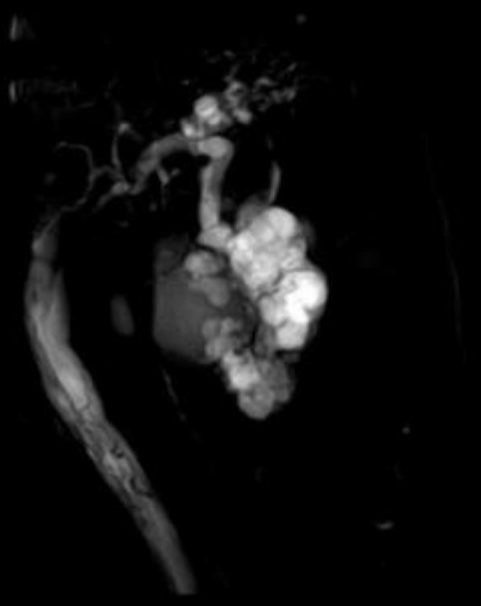


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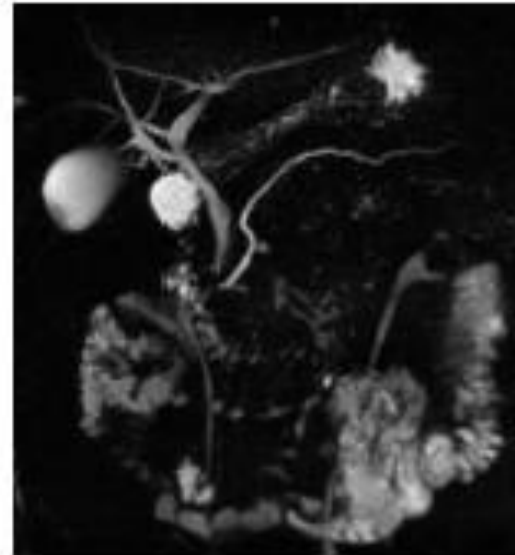




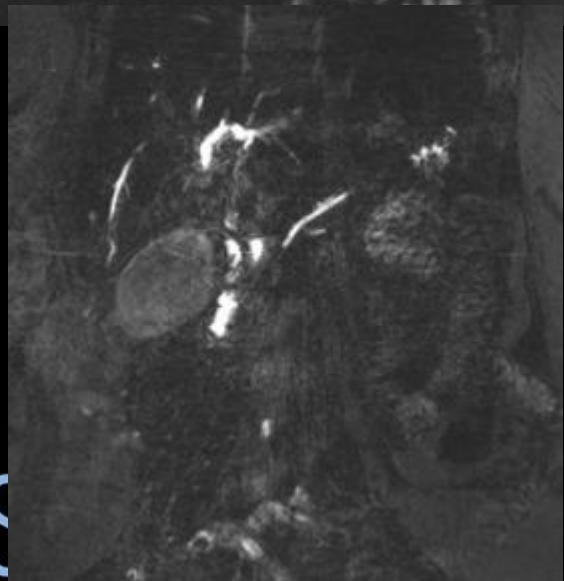
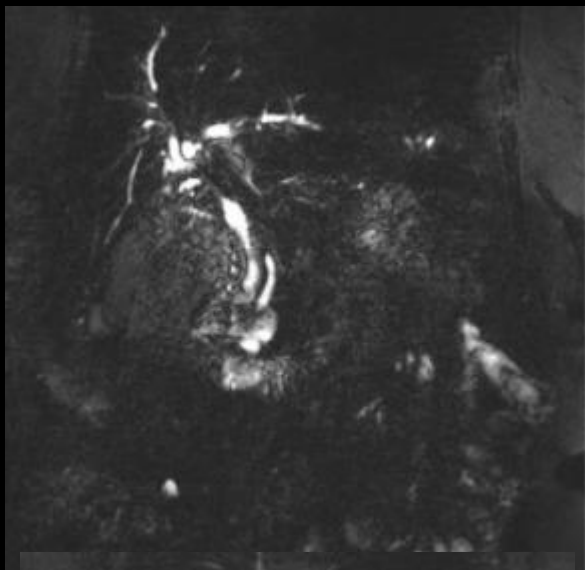


Colangio Rm

3D FRFSE: 3D Fast Recovery Fast Spin Echo

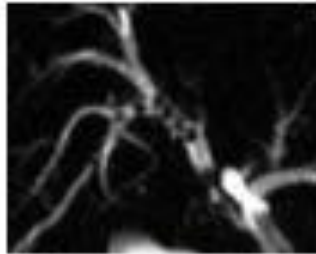
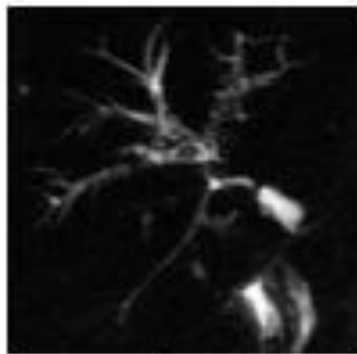


Colangio Rm



T2 SSFSE: T2 Single Shot Fast Spin Echo

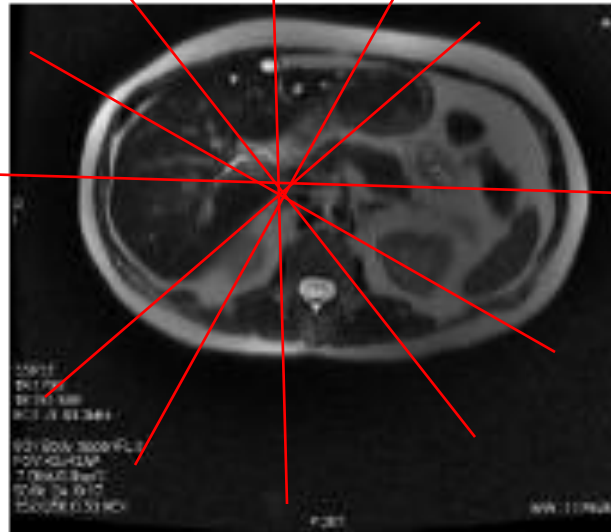
Acquisition Images



2D SSFSE
long TE



2D SSFSE short TE



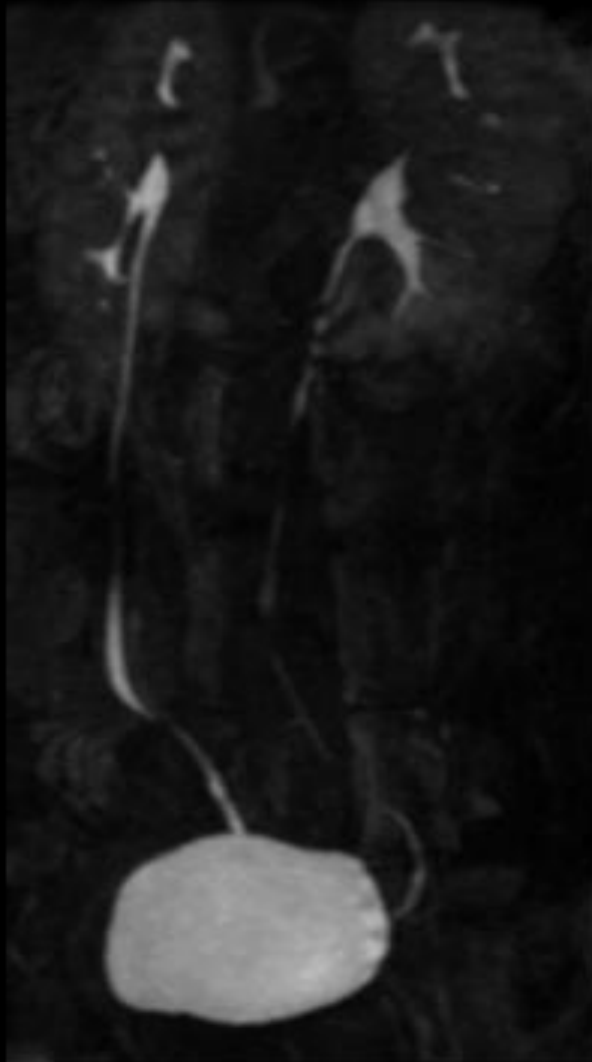
Vídeo



Gerenciamento profissional Ltda.



Uro Rm

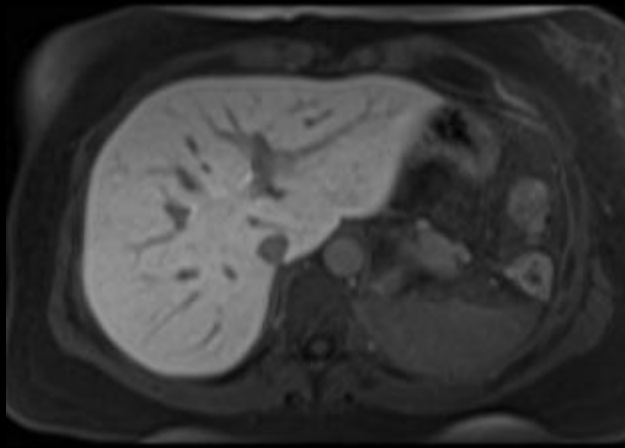
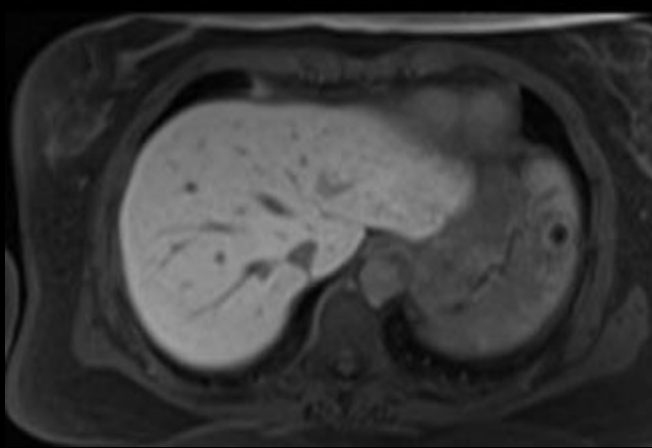




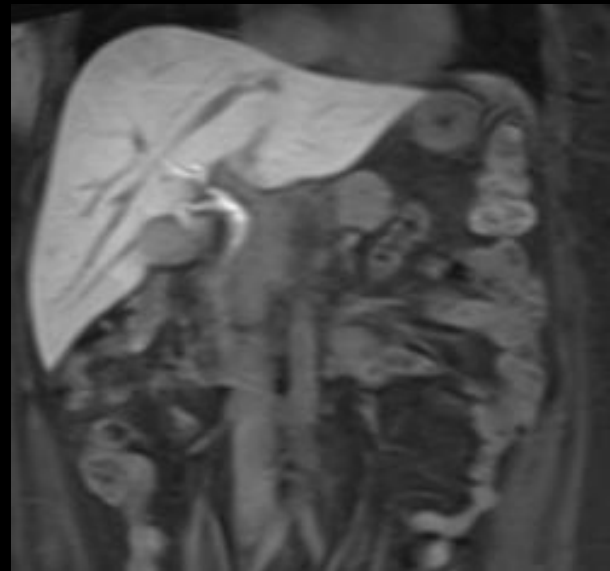
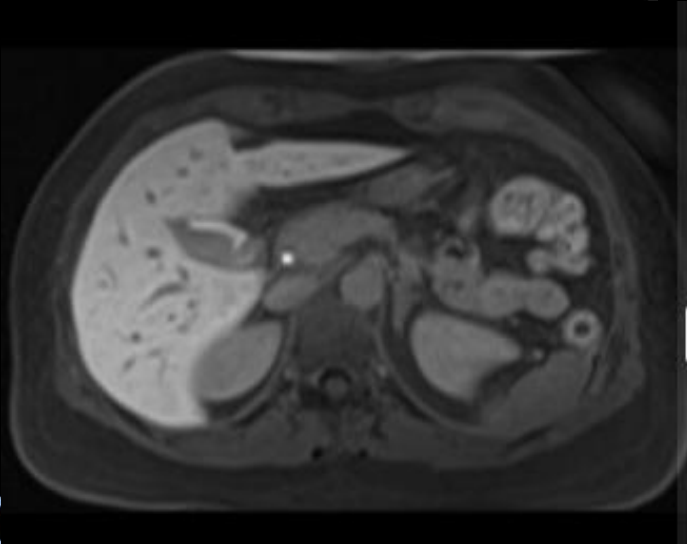
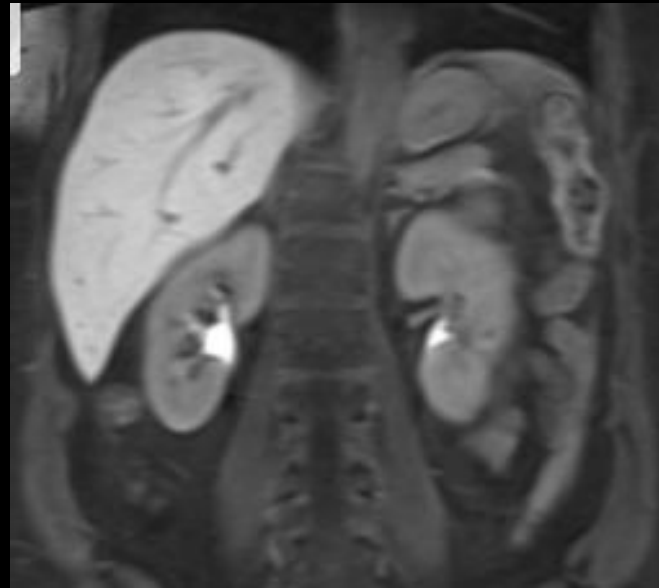
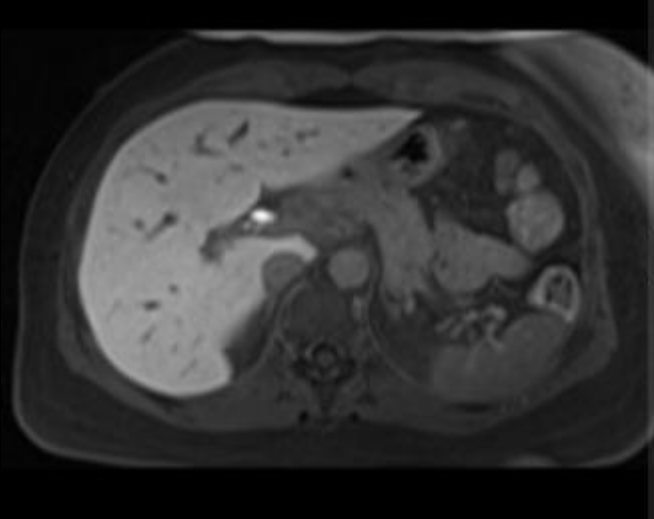
Entero Rm
Truffi/Fiesta



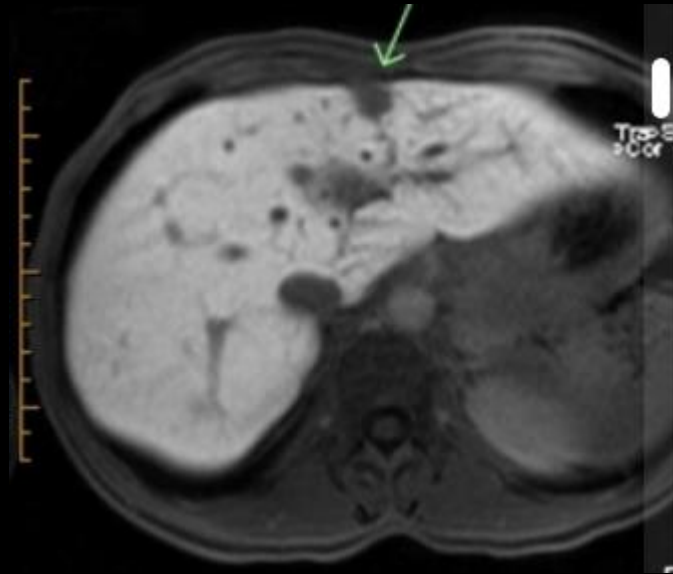
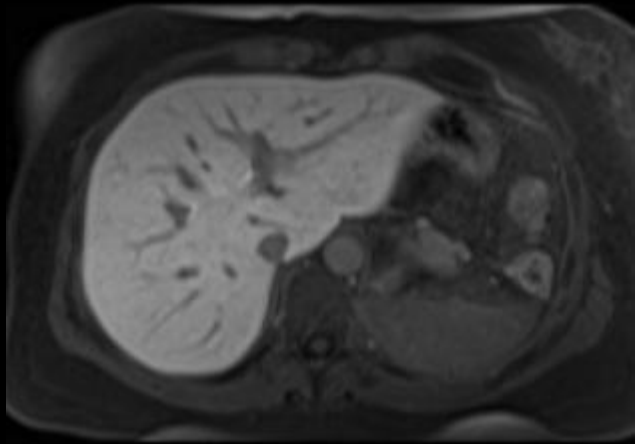
O **gadoxetato dissódico** (também conhecido pelos nomes comerciais **Primovist™** e **Eovist™**) é um agente de contraste à [base de gadolínio paramagnético](#) hepatoespecífico, usado exclusivamente em [imagens de ressonância magnética do fígado](#). Seu uso principal é na caracterização de lesões hepáticas, ou seja, na avaliação de lesões hepáticas focais identificadas em outros estudos de imagem.



Primovist



Primovist



SABER X

Gerenciamento profissional Ltda.



Obrigado



Gerenciamento profissional Ltda.

