



SPORTS HERNIA - RECTUS ABDOMINUS TEAR

Magnet Vendor/Field	Approved By	Published/Rev
Siemens MAGNETOM 3.0T XQ Numaris/X VA60A-0CN3	Dr Alvarez	8.10.26 / 1

Protocol	Contrast	Estimated Scan Time
HERNIA / RECTUS ABDOMINUS TEAR	No	~15–25 min

TECHNOLOGIST WORKFLOW

#	Step	Seq	Pulse	Dim	Ori	Scan Dir	Phase Enc	FOV (mm)	Slc (mm)	Gap (mm)	TR (ms)	TE (ms)	Fat Sat	Freq	Phase	Notes
1	♥ Setup	LOCALIZE R	VIBE	2D	Sag	R>>L	A>>P	420	6.0	1.2	7.8	3.69	None	256	205	
2	■ T1	CORONAL T1	TSE	2D	Cor	A>>P	R>>L	400	5.0	1.3	500	9.80	None	512	333	
3	■ T2	CORONAL T2 STIR	IR	2D	Cor	A>>P	R>>L	400	5.0	1.3	5380	72.00	STIR	320	192	TI 220 ms
4	■ T2	AXIAL T2 FS	TSE	2D	Ax	S>>I	A>>P	360	5.0	1.0	5470	63.00	SPAIR Weak	384	326	
5	■ T2	AXIAL T2 STIR SM FOV	IR	2D	Ax	S>>I	A>>P	260	5.0	1.0	5140	68.00	STIR	320	192	Small FOV; TI 220 ms
6	■ T2	SAGITTAL T2 STIR SM FOV	IR	2D	Sag	R>>L	A>>P	260	5.0	1.0	5140	68.00	STIR	320	192	Small FOV; TI 220 ms

TECHNOLOGIST POST-PROCESSING

- ☐ Review all six series for complete pelvic/hernia coverage and diagnostic image quality
- ☐ Confirm small-FOV axial and sagittal T2 STIR series adequately cover the rectus abdominis/pubis region



- ☐ Verify fat suppression/STIR uniformity and absence of significant motion artifact
- ☐ Send all required series to PACS before patient leaves

ACTION ITEMS

- ♥ Confirm 3-plane localizer and correct planning before diagnostic sequences
- Confirm coronal, axial and sagittal T2 fat-suppressed/STIR coverage
- Verify the small-FOV sequences are centered on the symptomatic hernia/rectus region