



MR Prostate

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Standard uses: Elevated PSA, Surveillance

Patient prep: Should be NPO for >4 hours prior to study if possible. Have patient void before examination. The patient should evacuate the rectum, if possible, just prior to the MRI exam.

Oral contrast: None

Coil: Body coil

Coverage: Position the coil such that there is good coverage and signal from prostate, seminal vesicles, and bulbourethral gland.

Intravenous contrast: Single dose gadolinium.

Adult - 0.5 mmol/mL, maximum 20mL. Administer 2mL per second, example - MultiHance/ProHance/Doterem
0.25 mmol/mL, maximum 10mL, Administer 1.5mL per second, example - Gadavist

Anti-peristaltic agent: None

SUMMARY:

1. Localizer
2. Sag T2FS
3. Cor T2
4. Ax T1
5. Ax T2
6. Ax Diff
7. Ax Vibe Pre
8. Ax T1 TWIST
9. Ax Vibe Delay
10. Cor T1FS Post
11. Ax T1FS Post

SEQUENCES:

1. Localizer
2. Sagittal T2 Turbo SE (TSE, FSE) Fat Sat
 - a. Small FOV to pt anatomy, ≈ 200
 - b. Goal parameters
 - i. Coverage through the prostate left to right



- ii. Slice thickness 3mm
- iii. Pixel area $\leq 1.0\text{mm}^2$
- iv. Gap 0

3. Coronal T2 Turbo SE (TSE, FSE)

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slice thickness 3mm
 - iii. Pixel area $\leq 1.0\text{mm}^2$
 - iv. Gap 0

4. Axial T1 Turbo SE (TSE, FSE)

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slice thickness 3mm
 - iii. Pixel area $\leq 1.0\text{mm}^2$
 - iv. Gap 0

5. Axial T2 Turbo SE (TSE, FSE)

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slice thickness 3mm
 - iii. Pixel area $\leq 1.0\text{mm}^2$
 - iv. Gap 0

6. Axial DWI with ADC map

- a. Small FOV to pt anatomy, ≈ 300
- b. Goal parameters
 - i. b-value 0, 500, 1000, 1400
 - ii. Coverage to include prostate and seminal vesicles
 - iii. Slice thickness 3mm
 - iv. Pixel area $\leq 1.0\text{mm}^2$
 - v. Gap 0

7. Axial T1 Ultra fast 3D-GE with fat suppression (VIBE, LAVA, TIGRE) pre-contrast

- a. Breath hold
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slab slices ≤ 3 mm, (ACR Slice thickness ≤ 5.0 mm, Gap ≤ 1.5 mm, Pixel area $\leq 2.4\text{ mm}^2$)

8. Axial T1 Dynamic 3D MRA with k-space Sharing (TWIST TRICKS-XV, Keyhole (4D TRAK), DRKS, TRAQ)

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles



- ii. Slice thickness 3mm
- iii. Pixel area $\leq 1.0\text{mm}^2$
- iv. Gap 0

9. Axial T1 Ultra fast 3D-GE with fat suppression (VIBE, LAVA, TIGRE) Post

- a. Breath hold
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slab slices ≤ 3 mm, (ACR Slice thickness ≤ 5.0 mm, Gap ≤ 1.5 mm, Pixel area ≤ 2.4 mm²)

10. Coronal T1FS Post

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slice thickness 3mm
 - iii. Pixel area $\leq 1.0\text{mm}^2$
 - iv. Gap 0

11. Axial T1FS Post

- a. Small FOV to pt anatomy, ≈ 200
- b. Goal parameters
 - i. Coverage to include prostate and seminal vesicles
 - ii. Slice thickness 3mm
 - iii. Pixel area $\leq 1.0\text{mm}^2$
 - iv. Gap 0