

Magnetic resonance angiography of the head and neck - a teaching file

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Notes: Includes bibliographical references and index.

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Tags: #Magnetic #resonance #angiography
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Goyen M, Herborn CU, Vogt FM, Kröger K, Verhagen R, Yang F, Bosk S, Debatin JF, Ruehm SG: Using a 1 M Gd-chelate

Magnetic resonance angiography in the head and neck.

For all patients CT and MR angiograms could be acquired with a minimum of motion artefact and were of diagnostic quality; therefore no examinations had to be repeated or excluded from the study. All examinations were performed under breath hold and the patients were instructed to avoid swallowing during the examination.

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Normal and Abnormal Swallowing Jones, Bronwyn Hardcover Fundamentals of X-Ray and Radium Physics Joseph Selman, MD Paul and Juhl's Essentials of Radiologic Imaging Juhl, John H.

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Hardcover Clinical Magnetic Resonance Imaging: 3-Volume Set Edelman, Robert R. Our results indicate that whole-body MRA is a promising screening modality for planning of microvascular reconstructions, allowing the identification of relevant host site target vessels in the neck. The scanning settings for CTA were 120 kV, 140 eff.

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With this approach we had to focus on the proximal parts of the ECA branches, which are relevant for anastomosis in order to keep imaging time within reasonable limits. Editor Nuclear Radiology: Test and Syllabus Keyes, John W. However, the perfusion of the host vessels can be impaired as a consequence of tumor infiltration, previous irradiation or surgery.

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