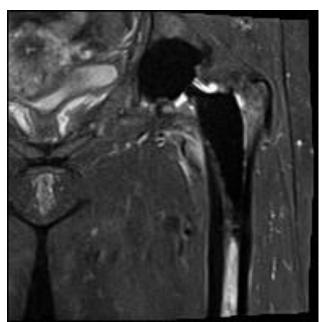
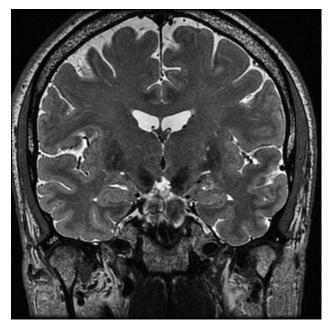


Magnetic Resonance Imaging

F.R.C.R. Physics Lectures







Lawrence Kenning PhD

FRCR MRI Syllabus



7.3 Basic MRI sequences & common variants

- Spoiled gradient echo, spin echo
- Multiple echo variants (TSE/FSE, EPI)
- Single shot versus multi shot
- Pulse sequence diagrams (interspersed throughout lecture)
- Basics of steady-state sequences

FRCR MRI Syllabus

Hull University Teaching Hospitals

7.3 Basic MRI sequences & common variants

- Spoiled gradient echo, spin echo
- Multiple echo variants (TSE/FSE, EPI)
- Single shot versus multi shot
- Pulse sequence diagrams (interspersed throughout lecture)
- Basics of steady-state sequences
- Spoiled gradient echo

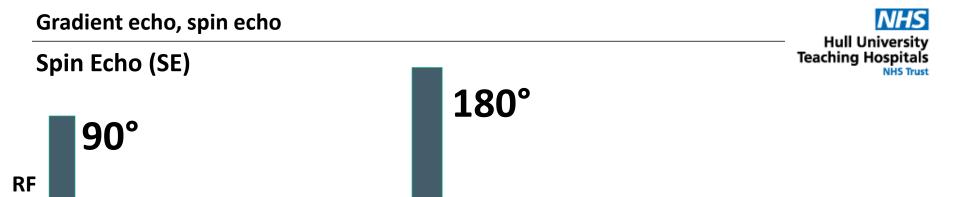
Hull University Teaching Hospitals

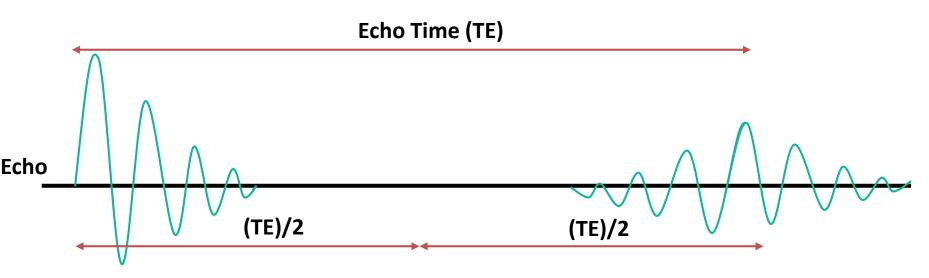
Spin Echo (SE) Pulse Sequences

- Spin echo describes the excitation of the magnetised protons in a sample with a 90° RF pulse and production of a FID, followed by a refocusing 180° RF pulse to produce an echo
- The 90° pulse converts M_z into M_{xy} and creates coherent transverse magnetisation that immediately begins to decay at a rate described by T_2^* relaxation
- The 180° RF pulse applied at TE/2 inverts the spins and induces phase coherence at TE
- Inversion of the spins causes the protons to experience external magnetic field variations opposite of that prior to TE/2, resulting in the cancellation of the extrinsic inhomogeneities and associated dephasing effects



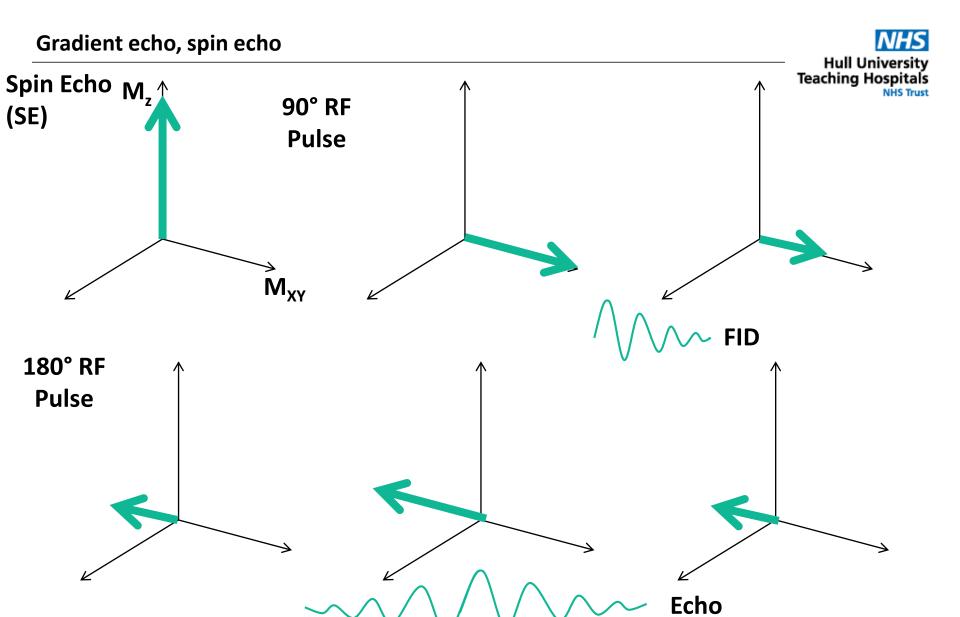
- Subsequent 180° RF pulses during the TR interval produce corresponding echoes with peak amplitudes that are reduced by intrinsic T₂ decay of the tissues, and are immune from extrinsic inhomogeneities
- Digital sampling and acquisition of the signal occurs in a time window symmetric about TE, during the evolution and decay of each echo
- Spin Echo sequences can produce T₁, T₂ and P.D. weightings





FID signal gradually decays with rate constant T₂*

Spin echo peak amplitude depends on T₂





Spin Echo Image acquisition

- Narrow band RF excitation pulse simultaneously applied with the slice select gradient causing a specific slab of tissue to be excited
- Transverse magnetisation (M_{xy}) is produced with amplitude dependence on the saturation of the protons and the angle of excitation
- Phase encoding gradient is applied briefly, introducing a phase difference among the protons along the phase encode direction

Spin Echo

- A refocusing 180-degree RF pulse is delivered at TE/2 to invert and reestablish the phase coherence of the transverse magnetisation at time TE
- During the echo formation, the **frequency encoding gradient is applied**, generating spatially dependent changes in the precessional frequencies of the protons

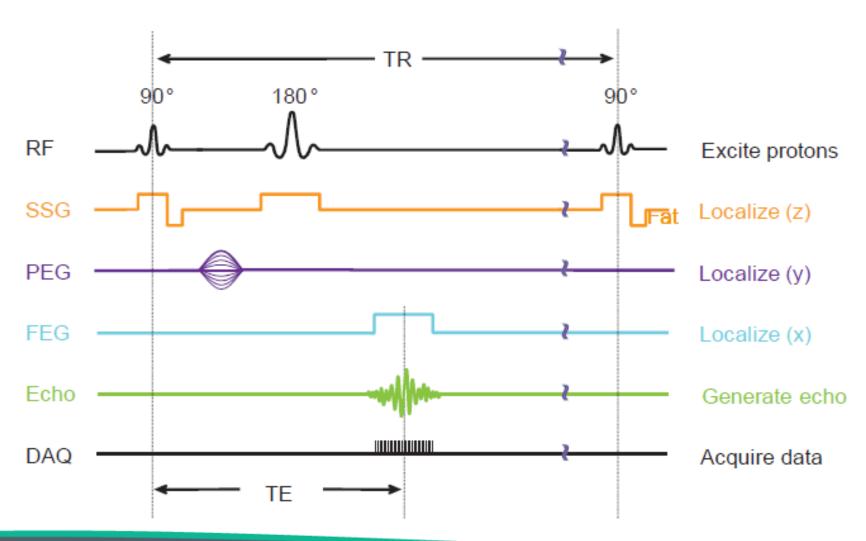


- Data sampling and acquisition of the signal occurs simultaneous to the frequency encoding gradient
- Data is deposited in the k-space matrix at a row location determined by the strength of the phase encoding gradient
- For each TR, an incremental change of the phase encoding gradient strength sequentially fills each row
- Following the complete filling of k-space, an inverse Fourier transform decodes the frequency domain variations in phase for each of the columns of k-space to produce the spatial domain representation - an image!



NHS Hull University Teaching Hospitals

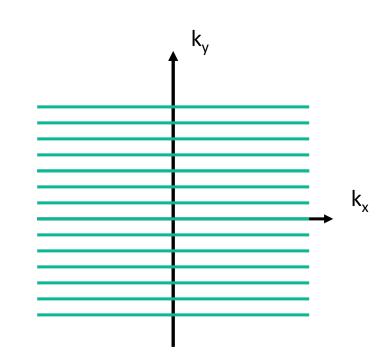
Spin Echo Sequence



Gradient echo, spin echo



- Time penalty for simplicity of spin echo
- T1 SE clinically possible
 - 384 x 384 matrix
 - TR/TE = 500/15ms
 - 1 Average
- 3 minutes 12 seconds per slice
- Time to excite different slice during TR dead time period
- T2 SE NOT clinically possible
 - 384 x 384 matrix
 - TR/TE = 5000/100ms
 - 1 Average
- 32 minutes per slice



GRE or SE: one line of k-space per TR (usually 256, 512 lines) Image time = $N_{phase} \times TR \times NEX$

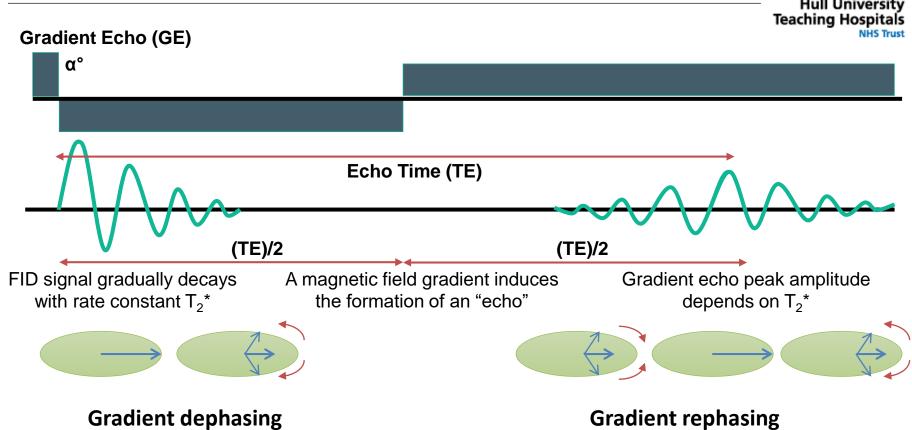


Gradient echo (GE/GRE)

- Gradient echo (GE/GRE) sequences utilise magnetic field gradients applied in one direction and then reversed to induce an echo
- The magnetic field gradient replaces 180° pulse used by spin echo sequences
- For a FID signal generated under a linear gradient (frequency encoding gradient), the transverse magnetisation dephases rapidly as the gradient is applied
- After a predetermined time, near instantaneous reversal of the GE polarity will rephase the protons and produce a GE that occurs when the opposite gradient polarity of equal strength has been applied for the same time as the initial gradient
- Gradient Echo sequences can produce T₁, T₂* and P.D. weightings



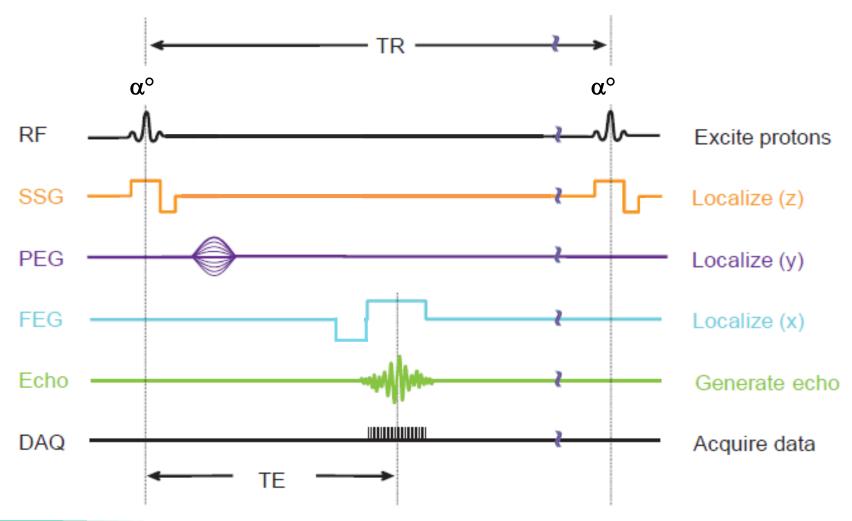




 Frequency encoding gradient is initially applied negatively to <u>speed up the</u> <u>dephasing of the FID</u>. Then its polarity is reversed producing rephasing of the gradient echo



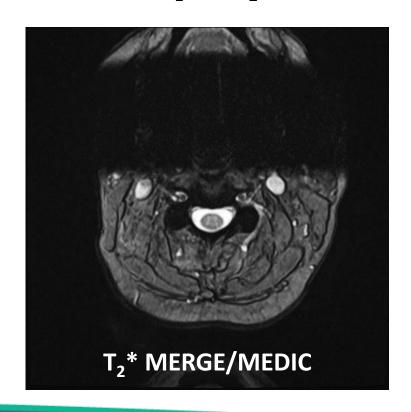
Gradient Echo Sequence



Gradient echo, spin echo

NHS
Hull University
Teaching Hospitals

- GE sequences are generally:
 - Lower SNR
 - Faster
 - More susceptible to metallic artefacts
 - Generally used to produce T₁ and T₂* weightings



Hull University Teaching Hospitals

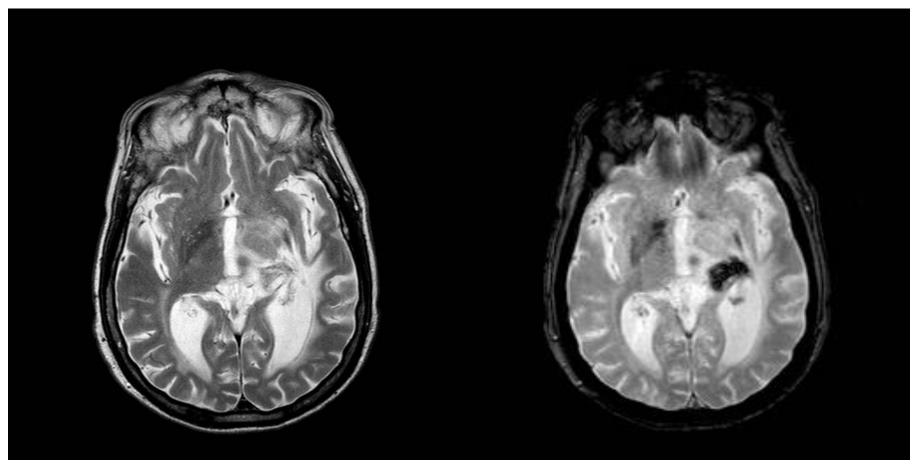
T_2/T_2*

- In the absence of a 180° rephasing pulse, field inhomogeneities are maintained and images are T₂* (not T₂) weighted
- GE sequences are thus more sensitive to magnetic susceptibility artefacts than spin echo sequences



Hull University Teaching Hospitals NHS Trust

T₂* Weighted Imaging



Spin Echo T₂

Gradient Echo T₂*



Gradient Echo Image Contrast

- Flip angle (α):
 - Small α

→ reduced T₁ weighting

• Large α

- \rightarrow increased T₁ weighting
- ** Small flip angles minimise T_1 -weighting because the longitudinal magnetisation (M_7) of tissues are less well differentiated
- TE:
 - Short TE

→ reduced T₂* weighting

• Long TE

 \rightarrow increased T_2^* weighting.

- TR:
 - Short TR

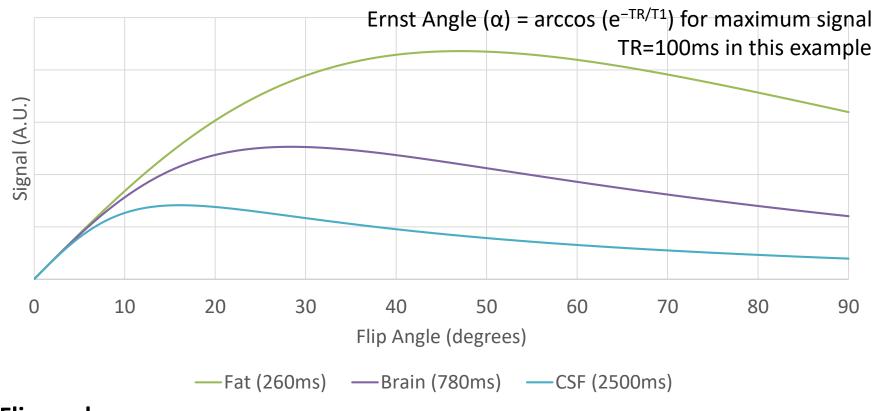
→ reduced T₁ weighting

• Long TR

→ increased T₁ weighting

Hull University Teaching Hospitals NHS Trust

Gradient Echo Image Contrast



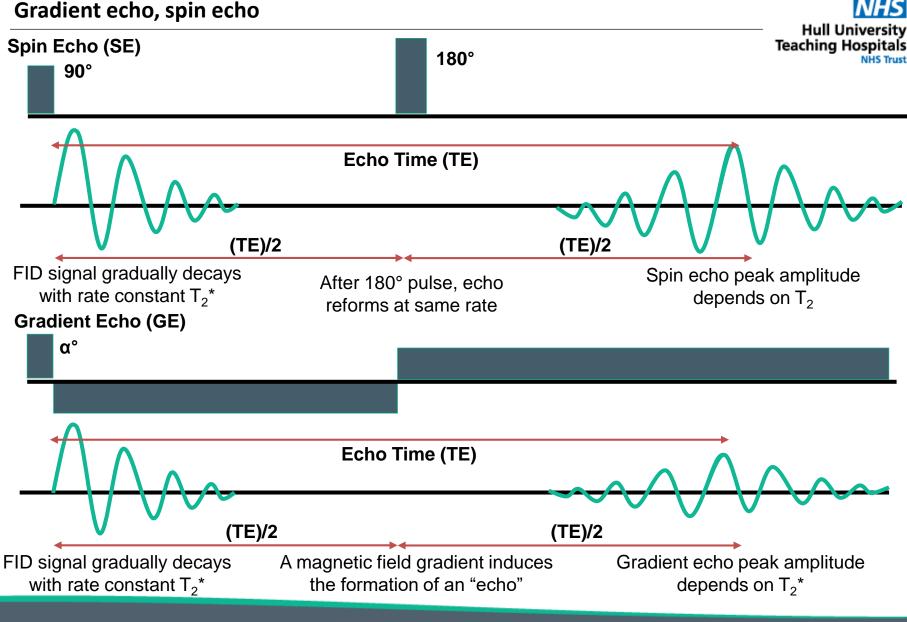
Flip angle:

T ₁ weighting	Flip=high	TR=short	TE=short
T ₂ * weighting	Flip=low	TR=long	TE=long
P.D weighting	Flip=low	TR=long	TE=short

Hull University Teaching Hospitals

Gradient Echo vs. Spin Echo

- Flip angle is usually less than 90°
- Absence of a 180° rephasing pulse
- Lower flip angle decreases amount of magnetisation tipped to transverse plane
- Faster recovery of longitudinal magnetisation
- Shorter TR/TE decreases scan time
- GE particularly useful as a rapid imaging technique. i.e. breath-hold studies,
 dynamic contrast examinations and angiography
- Allows new tissue contrasts (T₂*)
- Magnetic field inhomogenieties maintained!



Remarkable people. Extraordinary place.



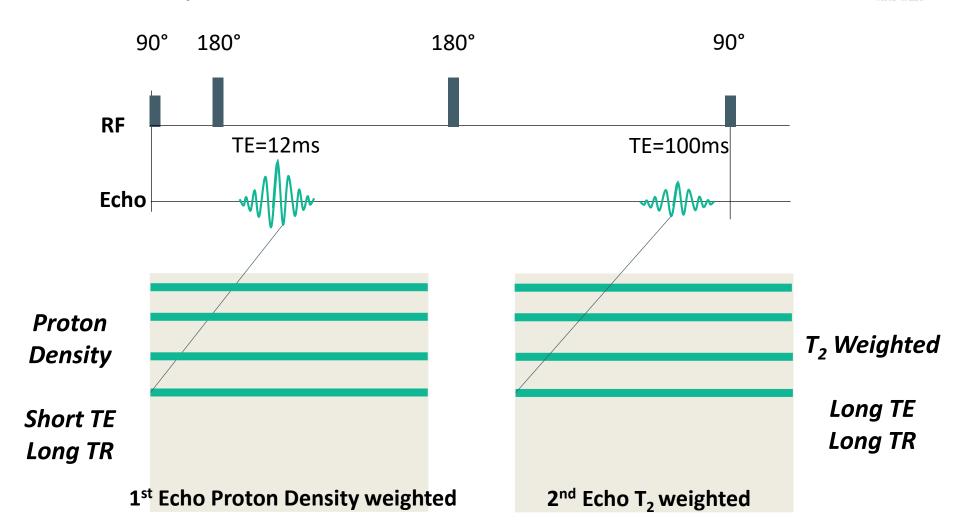
Multi-Echo Sequences

- Allow several images of the same slice position without increasing overall acquisition time
- Images obtained with different contrast
- After first echo is obtained, free interval until next TR
- By applying a new 180° pulse a new echo is received (but with the "same" phase encoding)
- The echo time of the 2 images differs and the second image will be more T₂ weighted than the first
- Typically used to obtain simultaneously P.D. & T₂-weighted images

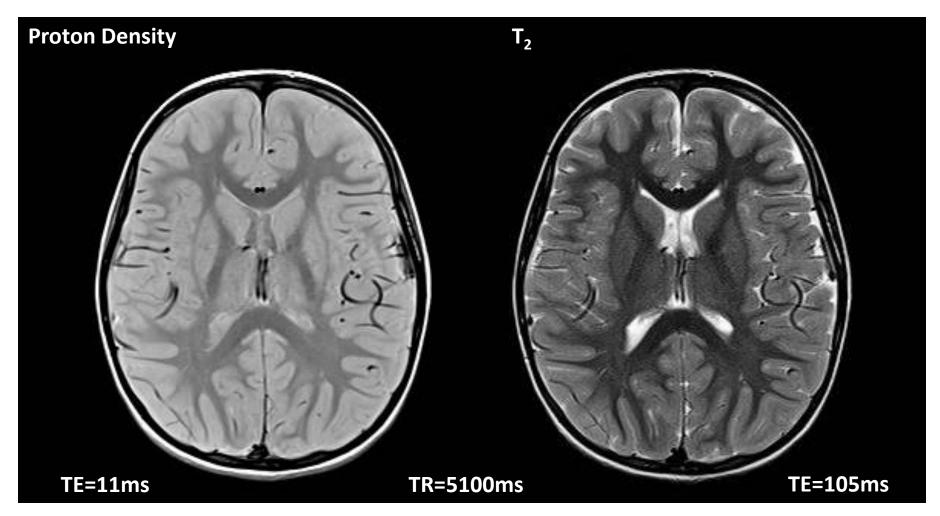
Multiple echo variants (TSE/FSE, EPI)



Multi-Echo Sequences









Fast Spin Echo (FSE) / Turbo Spin Echo (TSE)

- Interval time after the first echo used to retrieve echo train and fill other kspace lines.
- Done by applying new 180° pulses to obtain a spin echo "train".
- After each echo, the phase encoding is cancelled and a different phase encoding applied to the following echo
- Number of echoes received in the same repetition (TR) time is called the Turbo factor or Echo Train Length (ETL)
- Because of the reduced number of repetitions (TR), k-space is filled faster and slice acquisition time reduced.
- Time of scan = $(N_{PF} \times TR \times NEX) / ETL$



Echo Train Length (ETL)

- Longer ETLs result in greater T₂-weighting since more higher TE echoes will contribute to the final image contrast
- Longer ETL are also associated with a decrease in overall signal-to-noise ratio (SNR) and contrast-to-noise ratio (CNR)
- Scan time is given by:

$$N_{PE} \times TR \times NEX / ETL$$

- For a 256x256 image with a TR of 4000ms, 1 average and an echo train length of 24, the scan time would be 43 seconds
- The effective TE (TE_{eff}) describe the TE of central echo which fills the centre of k-space

Multiple echo variants (TSE/FSE, EPI)

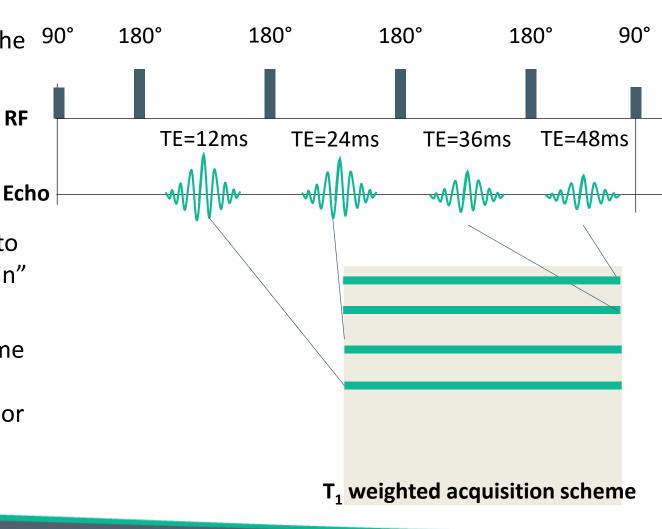


Fast Spin Echo (FSE) / Turbo Spin Echo (TSE)

• It is possible to utilise the 90° interval time after the first echo to fill additional lines of k-space

 Achieved by applying additional 180° pulses to obtain a spin echo "train"

 Number of echoes received during the same repetition time (TR) is called the Turbo factor or Echo Train Length (ETL)



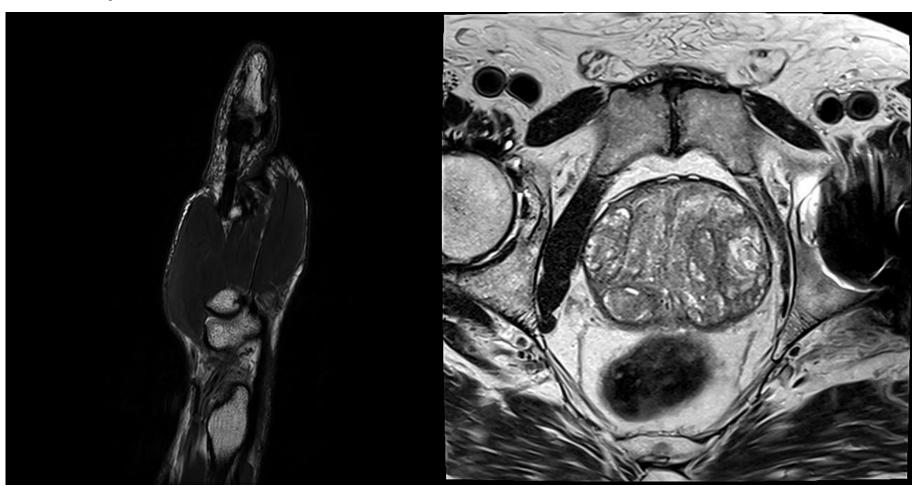


Fast Spin Echo: Contrast, Resolution & Scan Time

- Contrast is modified compared to a standard SE sequence
- Longer ETLs result in more T_2 -weighting because more late echoes with longer TE's contribute to the overall signal.
- Longer ETL's are also associated with a decrease in overall signal-to-noise ratio (SNR) and contrast-to-noise ratio (CNR) because the later echoes are weaker.
- Time at which these echoes fill central region of k-space is called the effective TE (TE_{eff})
- FSE can be P.D., T₁ or T₂ weighted
 - In T₁ weighted sequences need to choose short TR: limits echo train length

Hull University Teaching Hospitals NHS Trust

2D Fast Spin Echo

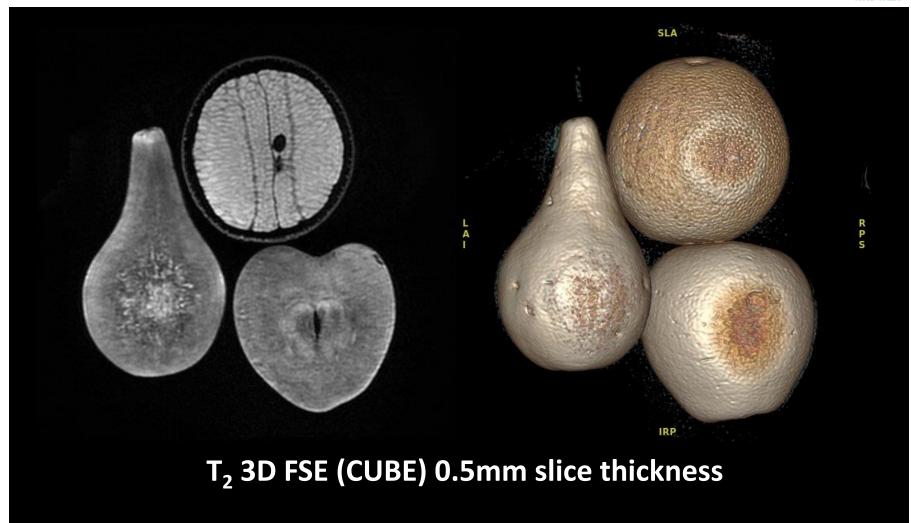




3D FSE/TSE

- SPACE/CUBE/3D BrainVIEW are 3D FSE/TSE sequences that utilise very long echo trains... up to 250 echoes long!
- Usually implement variable flip angles to limit SAR (sometimes constant)
- Ability to create T₁, T₂, P.D., FLAIR, STIR and DIR image contrasts
- Offer sub-millimetre imaging in clinical times (3-6 min)
- Possible replacement for multiple 2D acquisitions



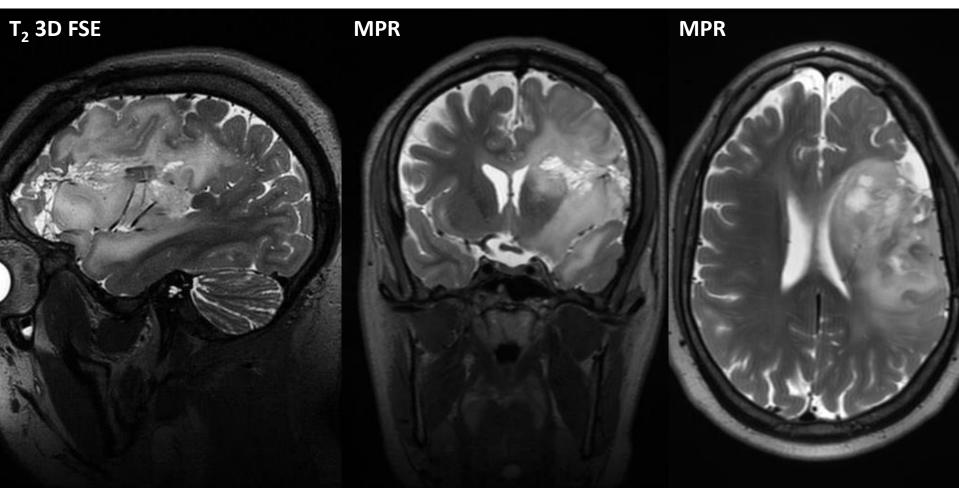


Multiple echo variants (TSE/FSE, EPI)







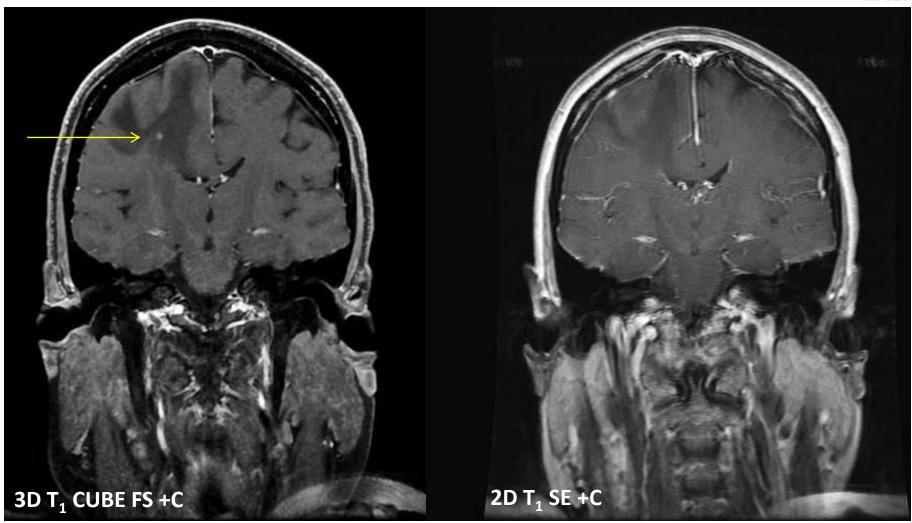




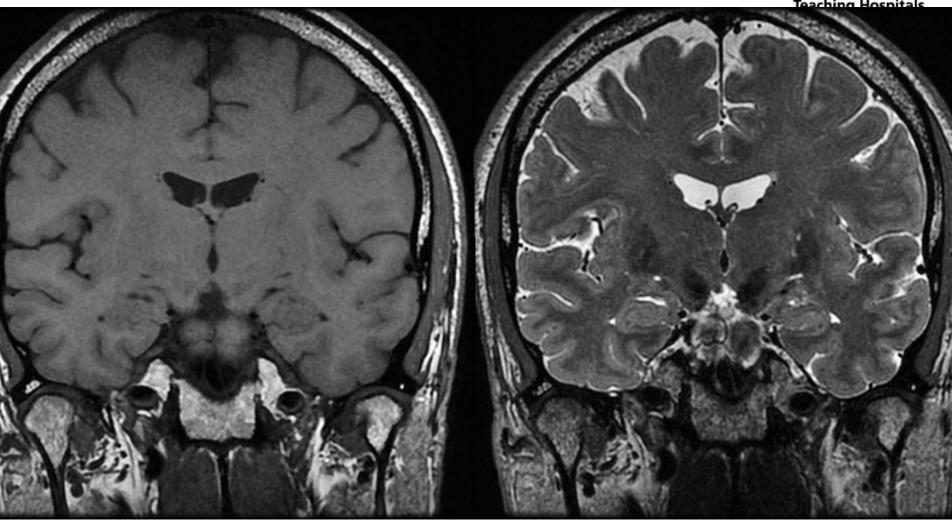
FSE

 $2D T_1 FSE + C$ ν^{\wedge} *FOV = 24cm Matrix* = 384x224 Phase FOV = 0.8TR/TE = 602/14.4ARC = 2SL Thick= 5/1mm *Scan Time = 1:53* $3D T_1 FSE FS + C$ *FOV = 24cm* Matrix = 320x320Phase FOV = 0.8TR/TE = 602/14.4 $ARC = 2 \times 2$ *SL Thick= 0.6/0mm Scan Time = 3:35*







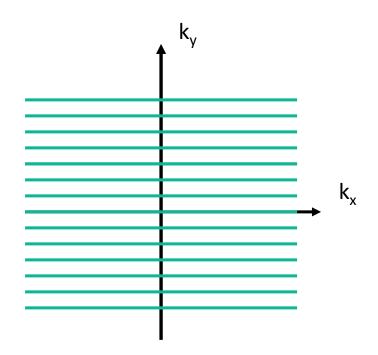


T1 3D FSE (CUBE) 0.5mm slice thickness

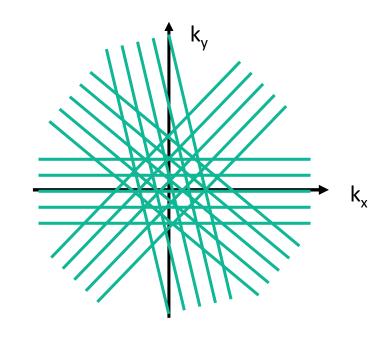
T₂ 3D FSE (CUBE) 0.5mm slice thickness



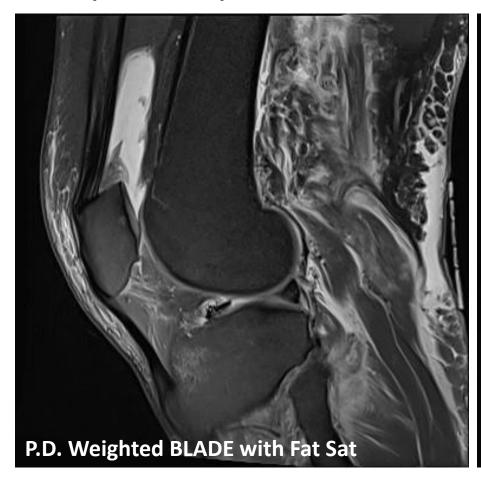
k-space trajectories

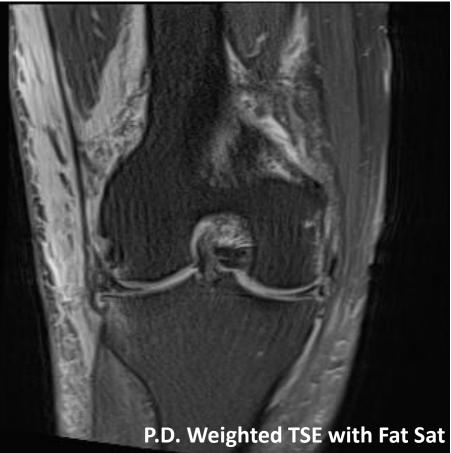


GRE or SE: one line of k-space per TR (usually 256, 512 lines) $Image time = N_{phase} \times TR$

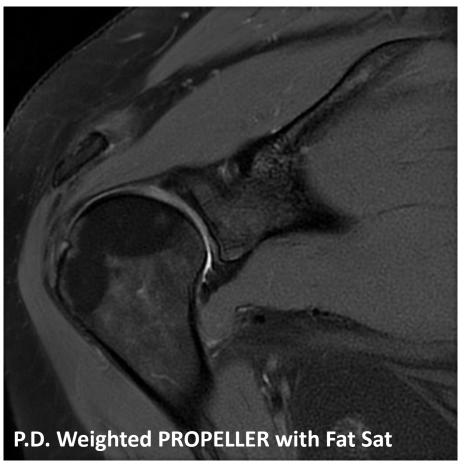


Radial:
Centre oversampled
Motion compensation

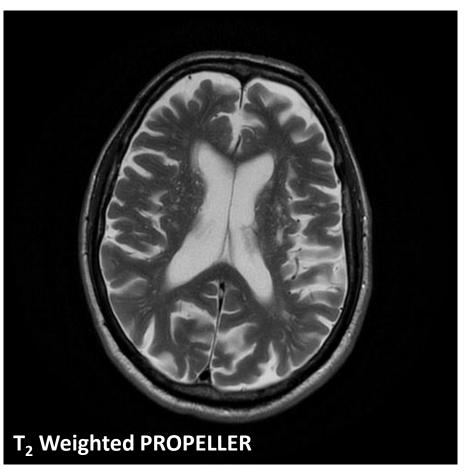


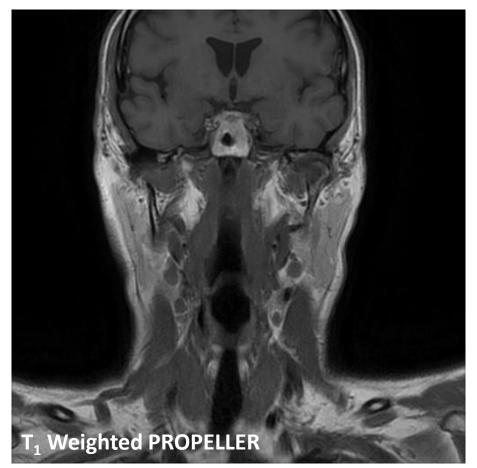


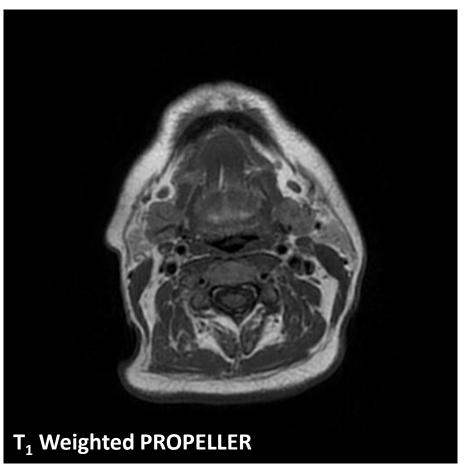












Multiple echo variants (TSE/FSE, EPI)



Echo Planar Imaging (EPI)

• EPI is the fastest acquisition method in MRI (100ms/ slice), but with limited

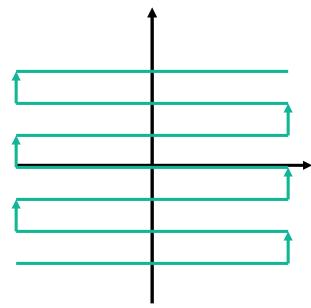
spatial resolution

Single-shot (can be run multi-shot)

Scan time = TR

- Inherently noisy
- Prone to distortions and ghosting
- Limited resolution (~128x128)
- Can be SE or GE based

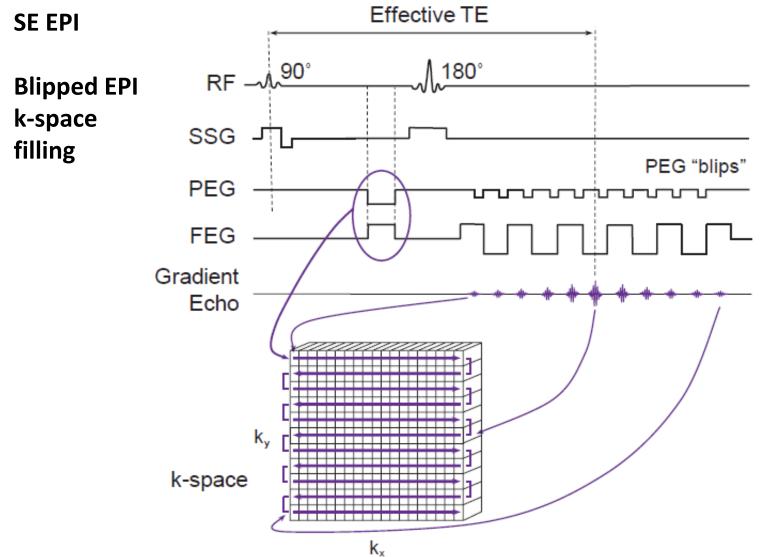
Widespread use in diffusion and fMRI



EPI: all lines of k-space per TR (typically 64 or 128) Image time = TR

Multiple echo variants (TSE/FSE, EPI) & Pulse sequence diagrams







EPI: Preparation & Contrast

- For GE train a readout gradient (FEG) is continuously applied, with positive & negative alternations
- With alternating gradient k-space scanned from left to right and back with each echo.
- At same time PE gradient may be permanent & constant (non-blipped) giving a zigzag trajectory or intermittent (blipped)



EPI: Preparation & Contrast

- Requires high performance gradients: need to allow rapid on-off switching of gradients.
 - Limits on how large this can be are determined by peripheral nerve stimulation
- Contrast determined by excitation pulse & possible magnetisation preparation

Options:

GE-EPI: single RF pulse, with no preparation

 \rightarrow T₂* weighting

• SE-EPI: 90°-180° pulses

 \rightarrow T₂ weighting

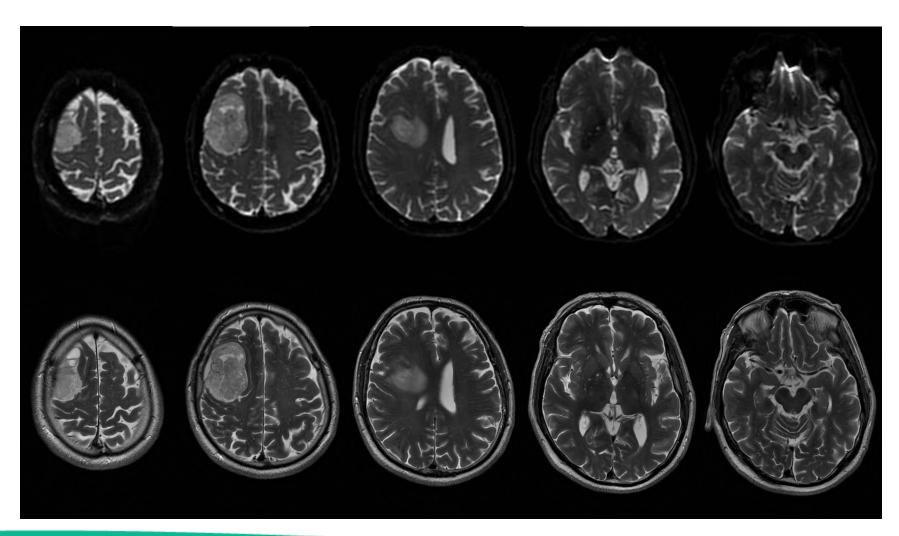
• IR-EPI: 180° inversion pulse then RF excitation pulse

 \rightarrow T₁ weighting

DW-EPI: preparatory pattern for diffusion weighting



EPI vs SE



Multiple echo variants (TSE/FSE, EPI)



Advantages

- rapid acquisition (effectively freezes physiological motion)
- no problems with RF burden
- contrast easily manipulated since EPI is just a readout module

Disadvantages

- severe hardware requirements
- ghosting artefacts due to eddy currents induced by rapid switching of gradient coils
- extremely sensitive to off-resonance and susceptibility effects



Single shot fast spin echo (SSFSE)

- Conventional (Cartesian) k-space filling takes in the order of seconds to minutes to fill
 - T_1 FSE TR=500ms, 256 PE steps & ETL=3 = 43 seconds
 - T_2 FSE- TR=5000ms, 256 PE steps & ETL=24 = 53 seconds
- This makes conventional k-space filling prone to motion artefacts cause by the misalignment of data in k-space prior to inverse FFT.
- Without complete filling of k-space, reconstruction artefacts occur.

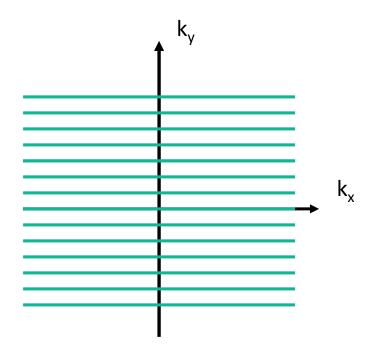
The purpose of SSFSE is:

- to reduce motion artefact and imaging time
- to scan uncooperative patients in short scan times
- for breath hold abdominal and cardiac imaging
- with long TE values (300-1300 ms) to image the gallbladder and biliary tree

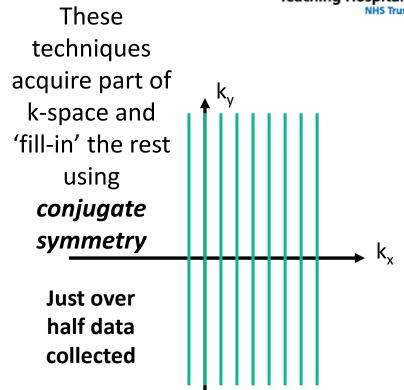
Single shot versus multi shot



k-space trajectories



GRE or SE: one line of k-space per TR (usually 256, 512 lines) $Image time = N_{phase} \times TR$



Partial Echo (Read-conjugate symmetry):

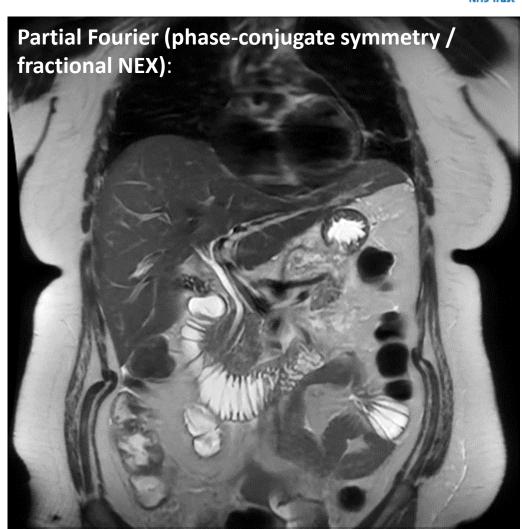
ollects half of echo reducing the

Collects half of echo reducing the shortest possible TE



Partial k-space (Single shot)

- HASTE (Half Fourier Acquisition Single Shot Turbo Spin Echo) / SS-FSE (Single-shot fast spin echo)
- Often make use of partial Fourier to reduce breath-hold time
- Short acquisition time makes sequence motion insensitive
- Image contrast is determined by the effective echo time TE_{eff}, that is, the echo time in the raw-data centre.



Single shot versus multi shot

NHS Hull University Teaching Hospitals

90°

Partial k-space (Single shot)

 Echo Train technique to fill entire Fourier plane with a single 90° pulse (so TR is infinite)

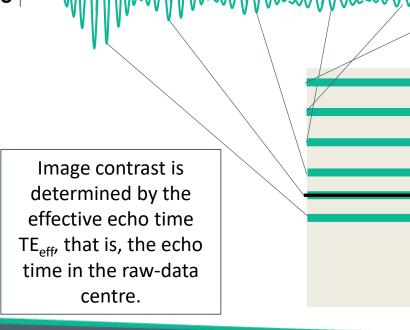
e RF

90° 180°

180°

 Requires successive Echo application of as many 180° pulses as there are k-space lines to fill

 Fill-in missing lines of kspace using conjugate symmetry



180°

180°

180°

180°

Remarkable people. Extraordinary place.



Partial k-space (Single shot)

- Images are highly T₂ weighted as majority of k-space lines are filled with long TE echoes.
- Duration = TE * N_{PE}
- Well adapted to imaging non-circulating liquid structures appearing as highly T₂ weighted signal: Cholangio MRI (gallbladder, biliary system and pancreas: MRCP); Uro-MRI

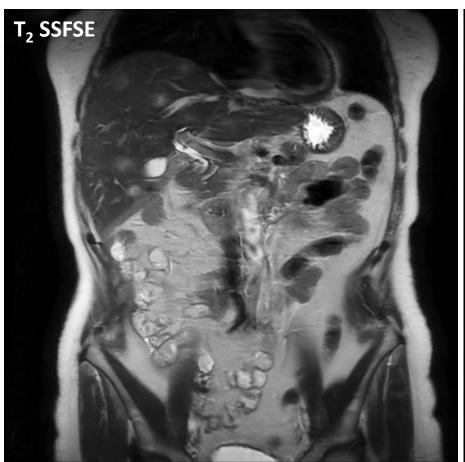
k-space trajectory	Advantages	Disadvantages	
Cartesian	Simple to acquire. Minimal distortion artefacts. Works with parallel imaging	Prone to ghosting in PE direction. Requires complete filling of k-space. Image contrast generated ½ way through acquisition.	
Partial Fourier (phase-conjugate symmetry)	Reduced acquisition time Preservation of spatial resolution	Reduced SNR. Square root % of data acquired. E.g. ½ data has 70% SNR compared to full k-space.	

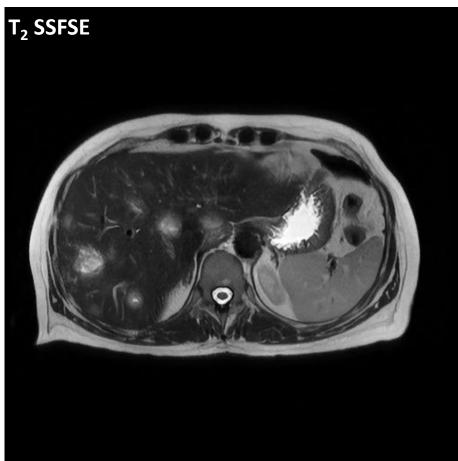




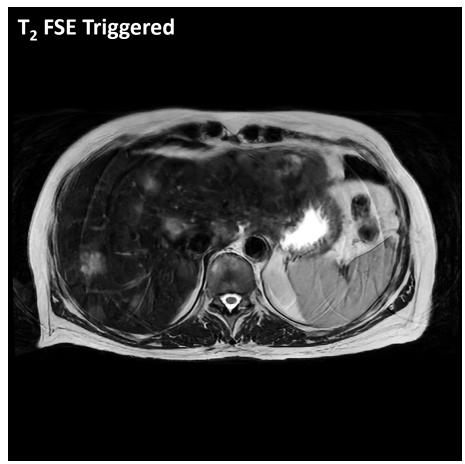










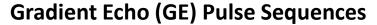




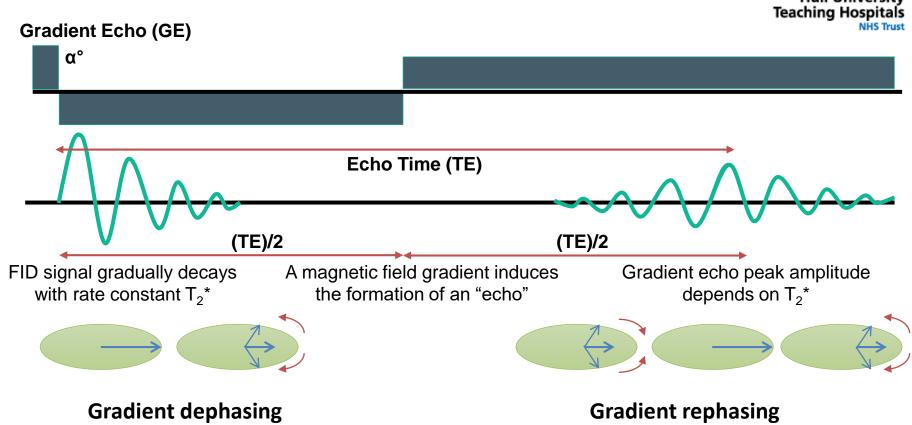




Magnetic resonance cholangiopancreatography (MRCP)







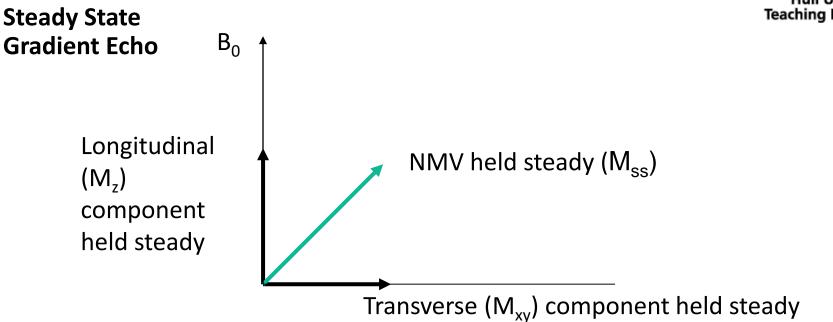
 Frequency encoding gradient is initially applied negatively to <u>speed up the</u> <u>dephasing of the FID</u>. Then its polarity is reversed producing rephasing of the gradient echo



Steady State Gradient Echo

- Using a RF pulse, longitudinal magnetisation (M_z) is tilted into the transverse plane (M_{xy}). However, when TR is short, there is no time for the transverse (M_{xy}) magnetisation to decay before the pulse sequence is repeated
- Therefore there is coexistence of both longitudinal (M_z) and transverse (M_{xy}) magnetization
- The net magnetisation vector (NMV) is the sum of M_z and M_{xy}
- "Steady State" is where the <u>TR is shorter than the T_1 and T_2 relaxation times of the tissue being imaged</u>
- Flip angle and TR can maintain the "steady state" which holds the longitudinal and transverse components stationary during data acquisition





- When steady state is maintained, the transverse component does not have time to decay during pulse sequence
- This transverse magnetisation, produced as a result of previous excitations is called the residual transverse magnetisation (RTM)

Gradient Echo (GE) Pulse Sequences



Steady State Gradient Echo

- The residual transverse magnetization (RTM) affects image contrast as it results in tissues with long T_2 times, appearing bright on the image
- Most gradient echo sequences use "steady state" approach since shorter scan times can be achieved (shorter TR)
- Gradient echo sequences are classified according to whether the residual transverse magnetisation is in phase (coherent) or out of phase (incoherent)

Steady State Gradient Echo

Two main classes of GE sequence depending on how residual transverse magnetisation (RTM) is managed:

- Coherent or Rewound GE (GRE/FISP/FFE)
 - M_{ss} conserved. Rewinder gradient applied to PE direction at end of cycle to reverse effects
 - By maintaining residual transverse magnetisation excitation pulses will produce new echoes (Hahn echoes, stimulated echoes) in addition to the GE
- **Spoiled or incoherent GE** (SPGR/FLASH/T₁FFE/RAGE)
 - M_{ss} eliminated by use of RF / gradient spoiling
- M_{ss} = steady state magnetisation

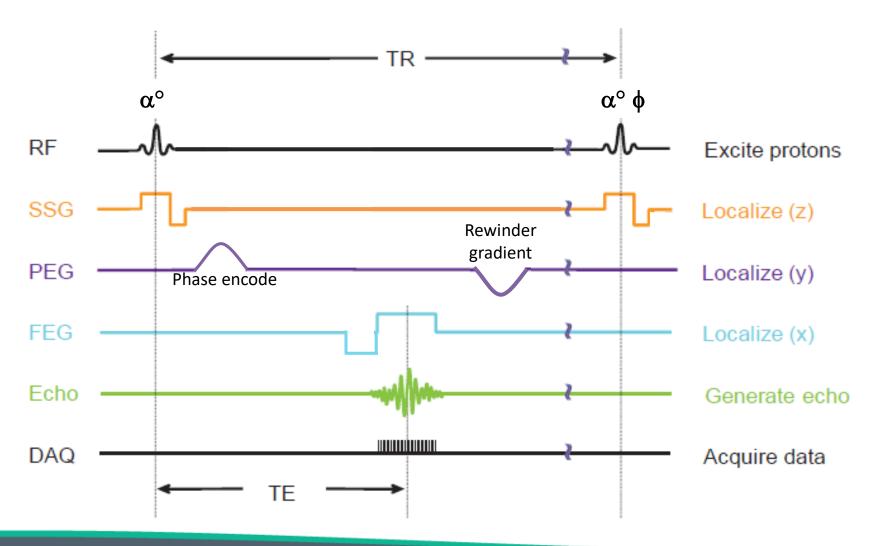


Coherent Gradient Echo (GRASS, FISP, FAST, FFE)

- This type of pulse sequence uses a variable flip angle excitation pulse followed by gradient rephasing, to produce a gradient echo
- Steady state is maintained by selecting TR shorter than T₁ and T₂
- There is therefore RTM left over when the next excitation pulse is applied
- The RTM is kept coherent by a process known as rewinding
- Rewinding is achieved by reversing the slope of the phase encoding gradient after readout
- This results in RTM rephasing, so that it is in phase at the beginning of the next repetition. This allows the RTM to build up so that tissues with a long T₂ time produce a high signal

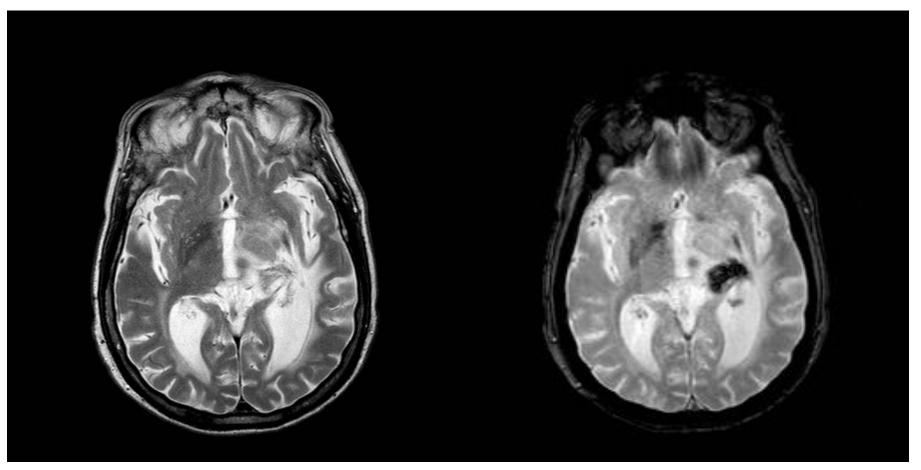


Coherent Gradient Echo Sequence





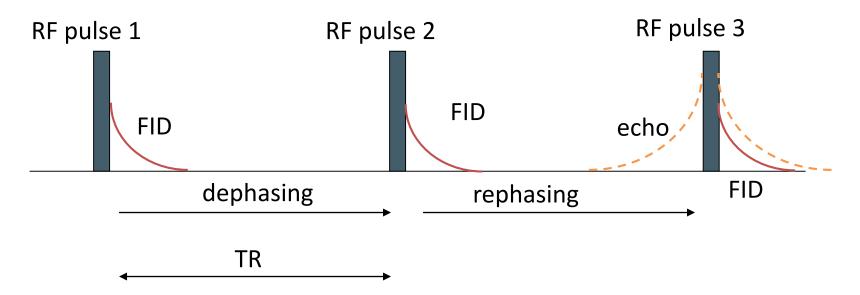
T₂* Weighted Imaging



Spin Echo T₂

Gradient Echo T₂*

Hahn / Stimulated echoes



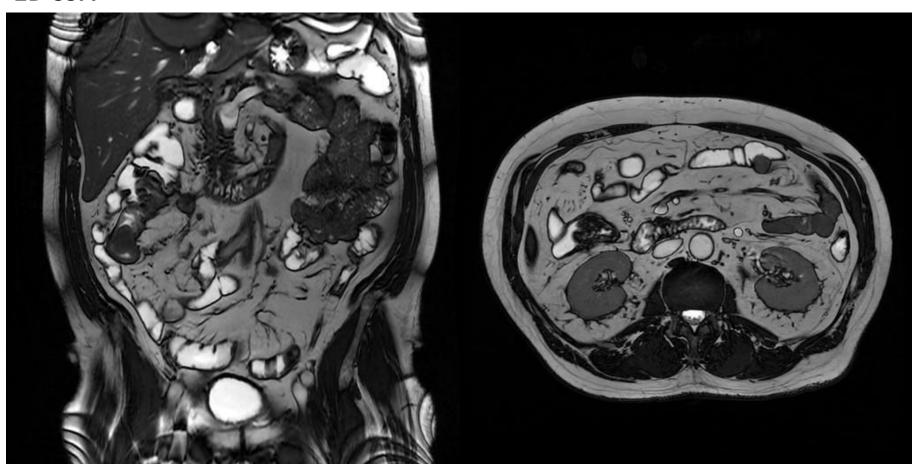
- A FID and an echo occur at each RF pulse
- The echoes produced are sometimes called Hahn or stimulated echoes
- The first RF pulse excites the nuclei regardless of its net amplitude
- The second RF pulse rephases the FID resulting from the first

Gradient Echoes: Steady State Free Precession (SSFP/PSIF)

- Hahn echo origin
- Images give a T₂ weighted appearance but with advantage of faster acquisition than spin echo
- Sensitive to motion (still quicker than spin echo)
- Less sensitive to flow
- Relatively low SNR
- Used a lot before 3D T₂ FSE became available
- Mixed T₂/T₁ image contrast

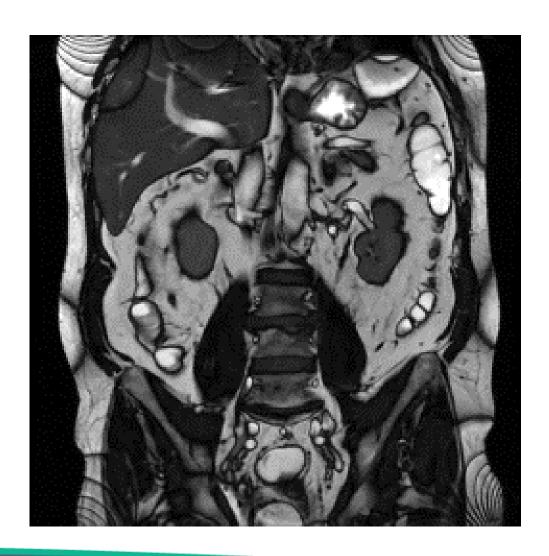
Hull University Teaching Hospitals NHS Trust

2D-SSFP



Hull University Teaching Hospitals NHS Trust

2D CINE-SSFP



Hull University Teaching Hospitals NHS Trust

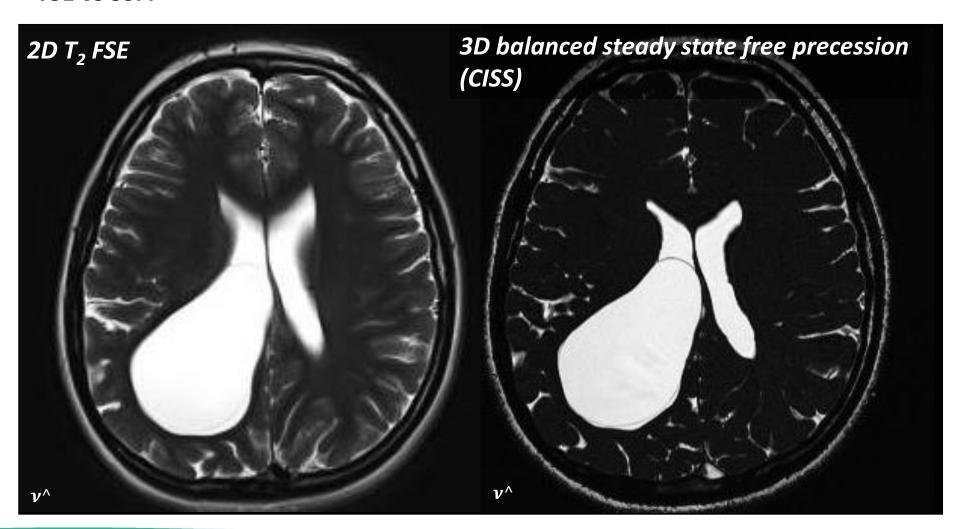
2D Gated CINE-SSFP





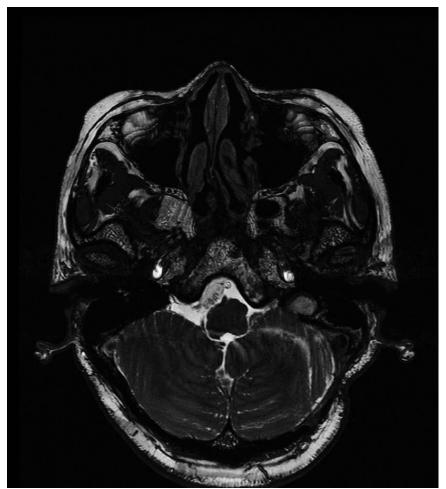


TSE vs SSFP

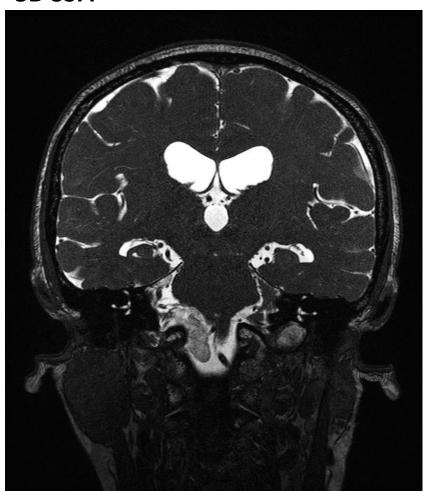




3D SSFP



3D SSFP



Gradient Echo (GE) Pulse Sequences

Hull University Teaching Hospitals NHS Trust

Spin Echo (SE)

Typical Parameters	T ₁	T ₂ /T ₁	T ₂	T ₂ *	P.D.
Flip angle (degrees)	90	N/A	90	N/A	5–30
TR (ms)	400–600	N/A	2000–4000	N/A	2000–4000
TE (ms)	5–30	N/A	60–150	N/A	5–30

Gradient Echo (GRE)

Typical Parameters	T ₁	T ₂ /T ₁	T ₂	T ₂ *	P.D.
Flip angle (degrees)	45–90	30–50	5–15	5–15	5–30
TR (ms)	200–400	10-50	200–400	100-300	100-300
TE (ms)	3–15	3–15	30–50	10-20	5–15

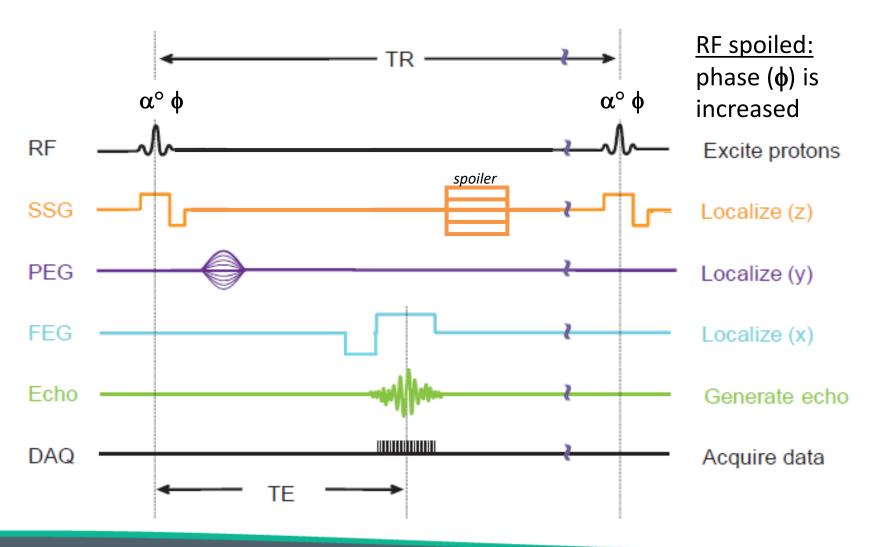


Spoiled Gradient Echo (SPGR/FLASH/T1FFE/RAGE)

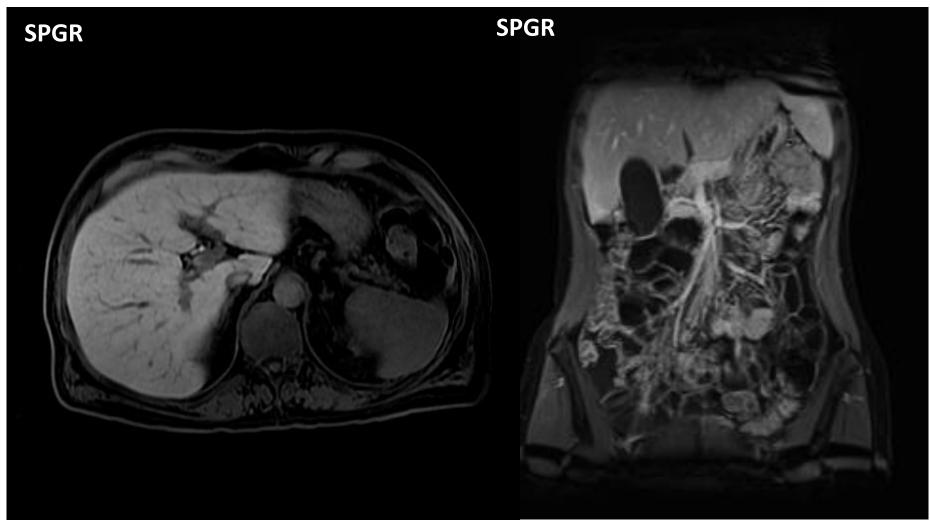
- Incoherent gradient echo (gradient spoiled) is a type of sequence that uses continuous shifting of the RF pulse to spoil (destroy) the remaining transverse (M_{xv}) magnetisation
- The transverse (M_{xy}) magnetisation is spoiled by a magnetic field gradient resulting in more T_1 weighting
- Gradient spoiling occurs after each echo using strong gradients in the sliceselect direction after the frequency encoding and before the next RF pulse
- Because spins in different locations in the magnet thereby experience a variety of magnetic field strengths, they will precess at differing frequencies; as a consequence they will quickly become dephased
- Generally scan times are quicker and subsequently allow for 3D and/or breathhold implementations



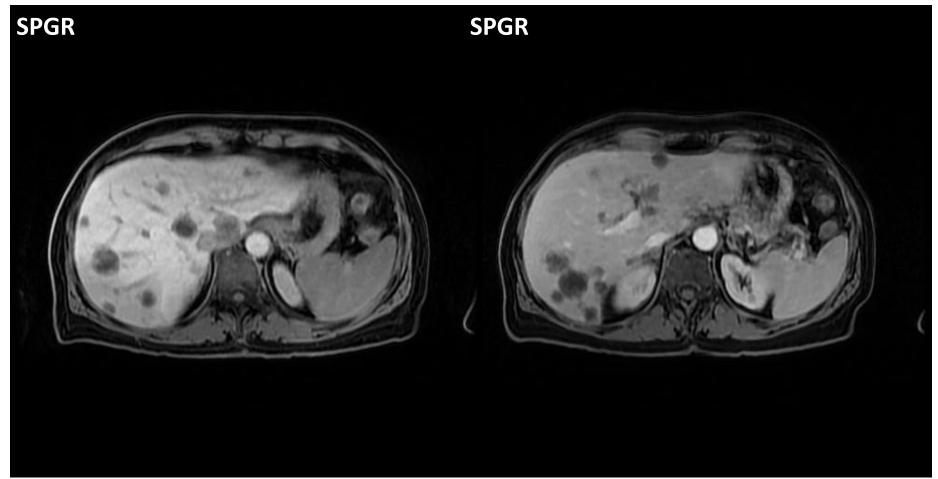
Spoiled Gradient Echo Sequence











Gradient Echo (GE) Pulse Sequences

Hull University Teaching Hospitals

BASG Balanced SARGE (Steady-state Acquisition Rewound Gradient Echo)

BRAVO Brain Volume imaging

CISS Constructive Interference in the Steady Steady State

COSMIC Coherent Oscillatory State Acquisition for Manipulation of Imaging Contrast

DESS Double Echo Steady State

FAME Fast Acquisition with Multiphase Elliptical fast gradient echo

FE Field Echo
FFE Fast Field Echo

FIESTA Fast Imaging Employing Steady State Acquisition

FIESTA-C Fast Imaging Employing Steady State Acquisition - Constructive Interference

FISP Fast Imaging with Steady Precession

FLASH Fast Low Angle Shot

GE, GRE Gradient Echo/ Gradient Recalled Echo
GEIR Gradient Echo Inversion Recovery

GRASE Gradient And Spin Echo

GRASS Gradient Recalled Acquisition in the Steady State

LAVA Liver Acquisition with Volume Acceleration
MEDIC Multi-Echo Data Image Combination
MENSA Multi-Echo iN Steady-state Acquisition

MERGE Multiple Echo Recombined Gradient Echo
M-FFE Multiple Fast Field Echo

MP-RAGE Magnetization Prepared Rapid Gradient Echo

PBSG Phase Balanced SARGE
PSIF Time-reversed FISP
RGE Rapid Gradient Echo
RSSG RF-Spoiled SARGE

SARGE (SG) Steady-state Acquisition Rewound Gradient Echo

SSFP Turbo Gradient Spin Echo
TGSE Steady State Free Precession

THRIVE T1-weighted High Resolution Isotropic Volume Examination

TIGRE T1-weighted Gradient Echo
TRSG Time-Reversed SARGE

VIBE Volumetric Interpolated Breath-hold Examination





7.3 Basic MRI sequences & common variants

- Spoiled gradient echo, spin echo
 - SE is simple 90°-180° pulse sequence. Gradient echo has a flip angle α and magnetic field gradients to generate echo. GE sequences are quicker than SE.
- Multiple echo variants (TSE/FSE, EPI)
 - FSE/TSE uses dead time in TR to acquire additional lines of k-space using additional 180° pulses. 90°–180°–180°–180°. EPI fills all of k-space in a single go.
- Single shot versus multi shot
 - Single shot fill all of required k-space in a single acquisition. T_2 weighted.
- Pulse sequence diagrams (interspersed throughout lecture)

FRCR MRI Syllabus



7.3 Basic MRI sequences & common variants

- Basics of steady-state sequences
 - Two main types of GE sequence: Coherent or Rewound GE (GRE/FISP/FFE) and spoiled or incoherent GE (SPGR/FLASH/T1FFE/RAGE). Depend on how residual transverse magnetisation (RTM) is managed. Spoiled gradient echo used for rapid T_1 weighted imaging. Rewound GE used for T_2 *

Questions



In gradient echo sequences use in magnetic resonance imaging (MRI) Teaching Hos

- A. a gradient replaces the 90 degree rephasing pulse used in spin echo imaging
- B. Higher flip angles (30-50°) provide more T₁ weighting
- C. TR is characteristically shorter than spin echo sequences
- D. Resultant images are affected by T_2^* information

Questions



In magnetic resonance imaging the following are true:

- A. Within a single TR, following collection of PD-weighted data the echo can be re-sampled after another TE to provide T₂-weighted data
- B. Fast (turbo) spin-echo (FSE) techniques use several refocusing 180° RF pulses to rephase and produce extra echoes at different phase gradients for each excitation