

SCAN PROTOCOL HEARTPRINT

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These general HeartPrint<sup>®</sup> imaging guidelines can help you reach the optimal image quality to create a HeartPrint<sup>®</sup> model. Should you have any questions or require further clarification, please don't hesitate to contact us via <u>HeartPrint@materialise.com</u>. We are happy to help you as well on more specific imaging guidelines for pediatric patients.

# **COMPUTED TOMOGRAPHY (CT)**

### Heart Structures

(Examples: aortic and pulmonary valves, coronaries, LAA ...)

General rule: standard ECG-triggered diastolic protocol with good contrast, more specifically:

- 100-120kV, 550-700mAs
- Slice distance: 0.3-0.7mm (0.5mm most common)
- Slices are incremental or (at least) equal to slice distance
- CT scanner with 64 or more slices to avoid motion and misalignment artifacts
- Medium contrast on the left or right side of the heart for diagnostic imaging
- Heartbeat below 65
- For the access route (if required): see vessel structure details below
- Ideally, with the patient holding their breath

### Vessel Structures

(Examples: TAA, AAA, coarctation ...)

General rule: standard vascular protocol with good contrast, more specifically:

- 100-120kV, 550-700mAs
- Slice distance: 0.7-1mm
- Slices are incremental or (at least) equal to slice distance
- CT scanner with 16 or more slices to avoid long scans
- No ECG triggering required
- Medium contrast on the left or right side of the heart for diagnostic imaging





**Figure 1.** Example of an approved CT heart scan – good scan with clear contrast, slice increment and slice distance 0.625mmm, no misalignments

# **MAGNETIC RESONANCE IMAGING (MRI)**

# Heart Structures

(Examples: aortic and pulmonary valves, coronaries, LAA ...)

**<u>General rule</u>**: standard diastolic protocol with good contrast, more specifically:

- Slice distance: 0.3-0.7mm (0.5mm most common)
- Slices are incremental or (at least) equal to slice distance
- The higher the spatial resolution the better (as long as the signal-to-noise ratio permits)
- Ideally, with the patient holding their breath
- Contrast medium (e.g. Ablavar<sup>®</sup>) on the left or right side of the heart for diagnostic imaging
- For full heart: it is preferable to obtain 3D volume data (at least) three times and merge it into one file so that all cardiovascular structures contain contrast medium
- **Important rule:** nearly isotropic voxels (not standard)



# Vessel Structures

(Examples: TAA, AAA, coarctation ...)

General rule: standard vascular protocol with good contrast, more specifically:

- Slice distance: 0.7-1mm
- Slices are incremental or (at least) equal to slice distance
- The higher the spatial resolution the better (as long as the signal-to-noise ratio permits)
- Contrast medium (e.g. Abalavar<sup>®</sup>) on left or right side of the heart for diagnostic imaging
- Important rule: nearly isotropic voxels (not standard)

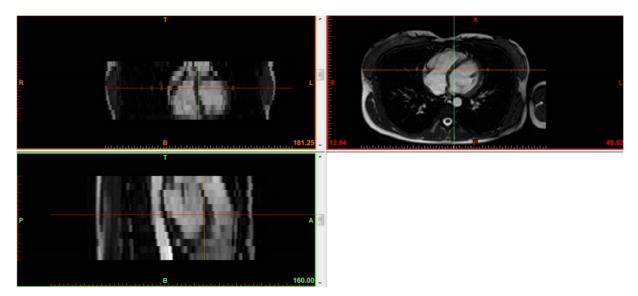


Figure 2. Example of MRI heart unsuitable - very anisotropic voxels (large slice increment)

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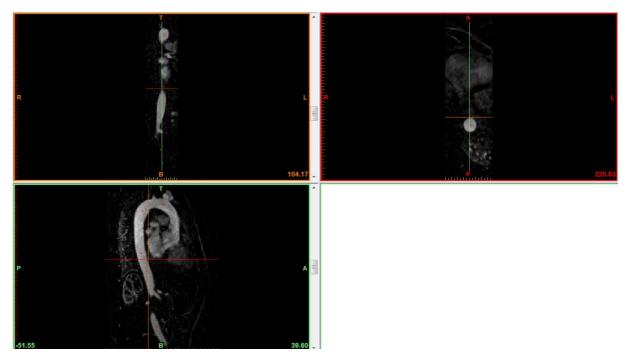


Figure 3. Example of an approved MRI of an aorta: isotropic voxels, 0.9mm slice increment and thickness

#### Data transfer

Image data must be transferred to Materialise via the SurgiCase platform.

- First time users can contact Materialise Customer Service to obtain a SurgiCase account and instructions (<u>heartprint@materialise.com</u>).
- Ensure necessary rights are obtained for transfer of data to Materialise.
- Instructions for image submission can be found in the SurgiCase Online User Manual for uploading images:

https://mat1euce1oosdoc.s3.amazonaws.com/surgicase/SurgiCase%20Online%20User%20Guid e%20for%20Uploading%20Images\_L-30442.pdf

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