Draft **MRI Scanning Addendum**

Complete the table below. Indicate “N/A” for scans that are not applicable to the research. Add additional rows as necessary.

If a participant is completing more than one imaging session (e.g. a longitudinal design), please indicate the number of repeated sessions a single subject will participate in. If the imaging sessions differ between time-points, cut and paste the table below to create a new table for each session.

|  |  |  |
| --- | --- | --- |
| MRI Sequence (scan) | Length of Scanning Time | Approximate decibel range |
| Localizer |  |  |
| GRE (field map) |  |  |
| EPI (bold) |  |  |
| T1\_MRPAGE (whole brain, anatomical) |  |  |
| T2\_W (whole brain anatomical) |  |  |
| T2\_TSE (hippocampus anatomical) |  |  |
| ASL (pcasl) |  |  |
| DSI (diffusion) |  |  |
| ***Total Scan Time*** *(single session):****Number of Sessions:*** ***Cumulative Scan Time*** *(across all sessions):* |