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Rohr et al.

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(54) **PEDIATRIC IMAGING ASSEMBLY**

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(2013.01); **A61B 2503/06** (2013.01); **A61G**
2210/50 (2013.01)

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(58) **Field of Classification Search**

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33/34007; **G01R 33/341**; **A61B 5/0555**;
A61B 5/0042; **A61B 2503/06**
See application file for complete search history.

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(56)

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(*) Notice: Subject to any disclaimer, the term of this
patent is extended or adjusted under 35
U.S.C. 154(b) by 857 days.

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(21) Appl. No.: **15/483,694**

(22) Filed: **Apr. 10, 2017**

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16, 2012, now Pat. No. 9,615,770.

(60) Provisional application No. 61/475,884, filed on Apr.
15, 2011.

(51) **Int. Cl.**

G01V 3/00	(2006.01)
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G01R 33/3415	(2006.01)
A61G 13/12	(2006.01)
G01R 33/30	(2006.01)
A61B 5/00	(2006.01)

(52) **U.S. Cl.**

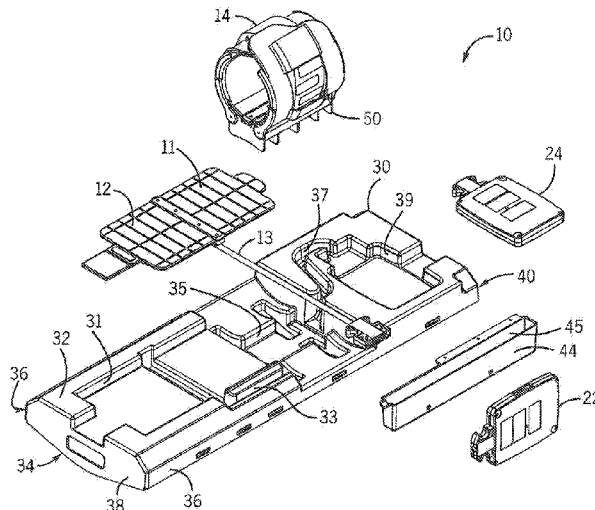
CPC **A61B 5/0555** (2013.01); **A61G 13/121**
(2013.01); **G01R 33/30** (2013.01); **G01R**
33/34007 (2013.01); **G01R 33/3415** (2013.01);

(57)

ABSTRACT

A patient support assembly for use in a magnetic resonance
image (MRI) scanner includes a first and a second patient
support structure and a first and a second imaging coil. The
patient support assembly provides support for multiple ana-
tomical regions being imaged, improving patient comfort
during the procedure. Access to the patient is improved by:
providing a flexible coil that wraps around at least one of the
anatomical regions being imaged, providing a support struc-
ture open to the anterior region of the anatomical region
being imaged, and providing a support structure that may be
opened and closed about the anatomical region being
imaged. The patient support assembly also aligns the two
imaging coils to minimize interference between coils during
imaging.

20 Claims, 15 Drawing Sheets



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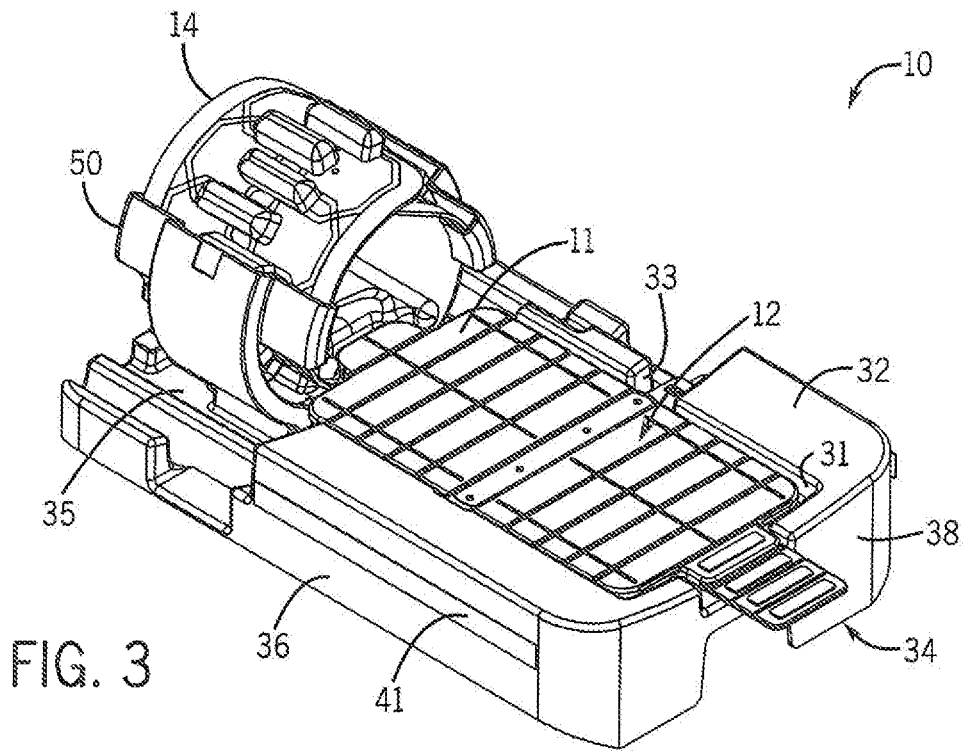


FIG. 3

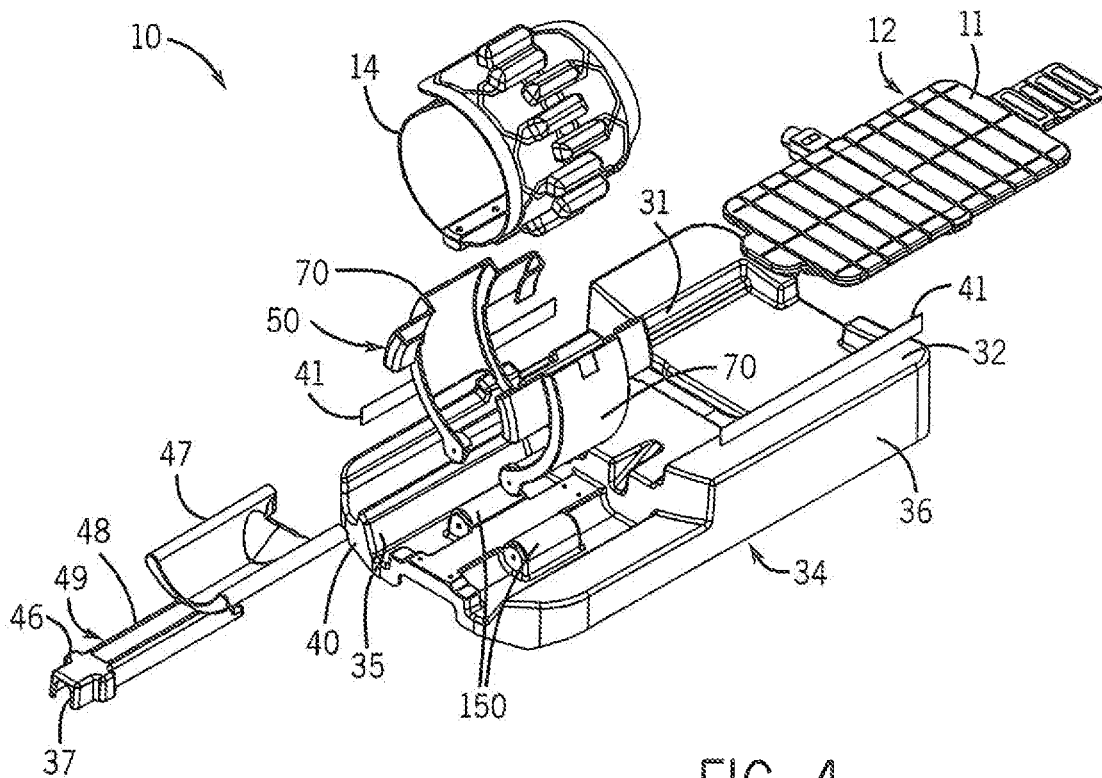
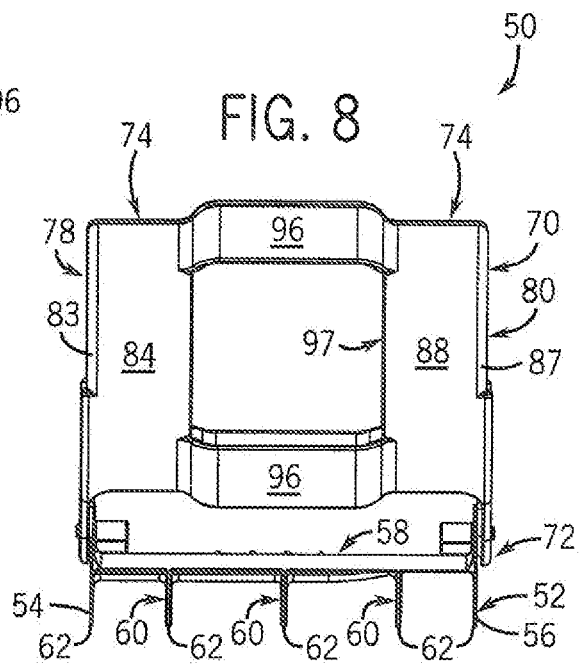
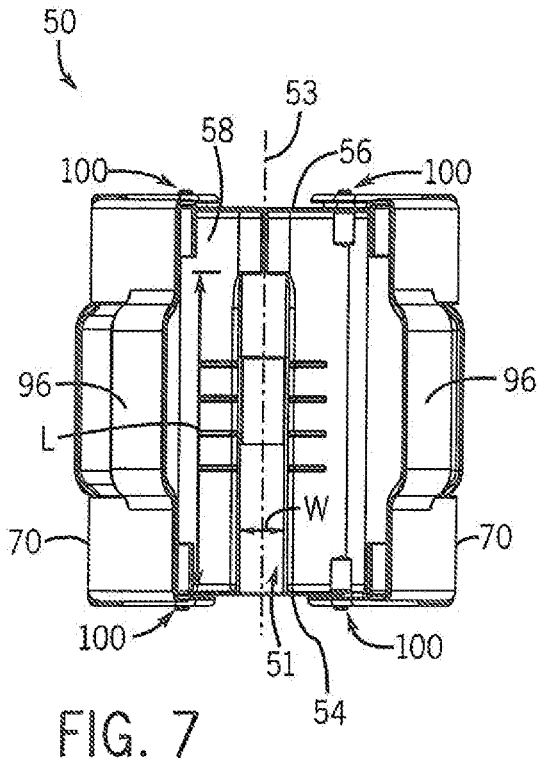
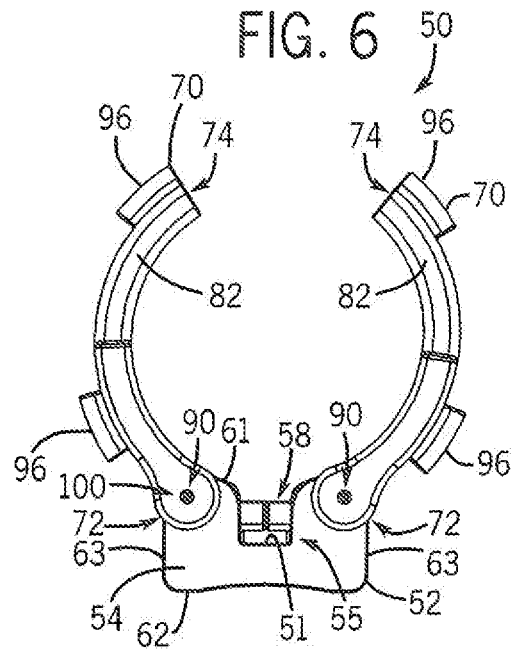
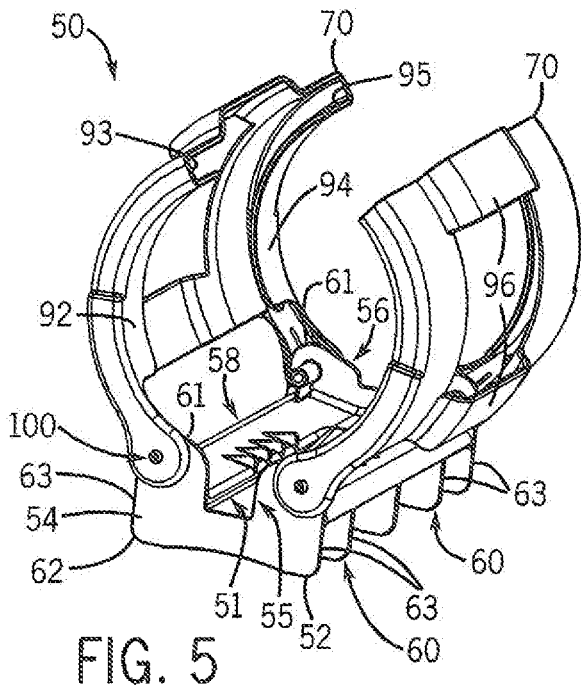


FIG. 4



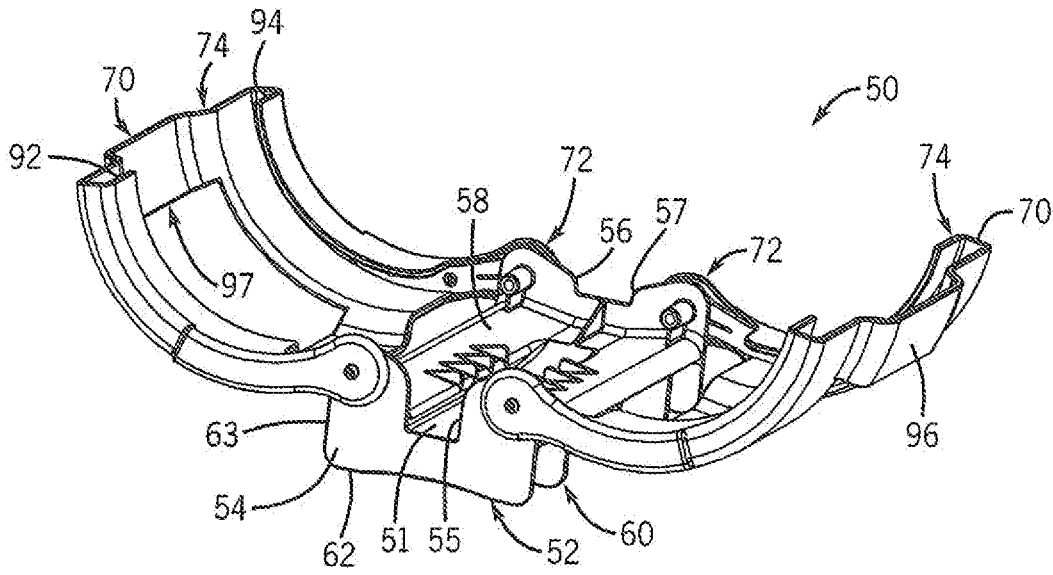


FIG. 9

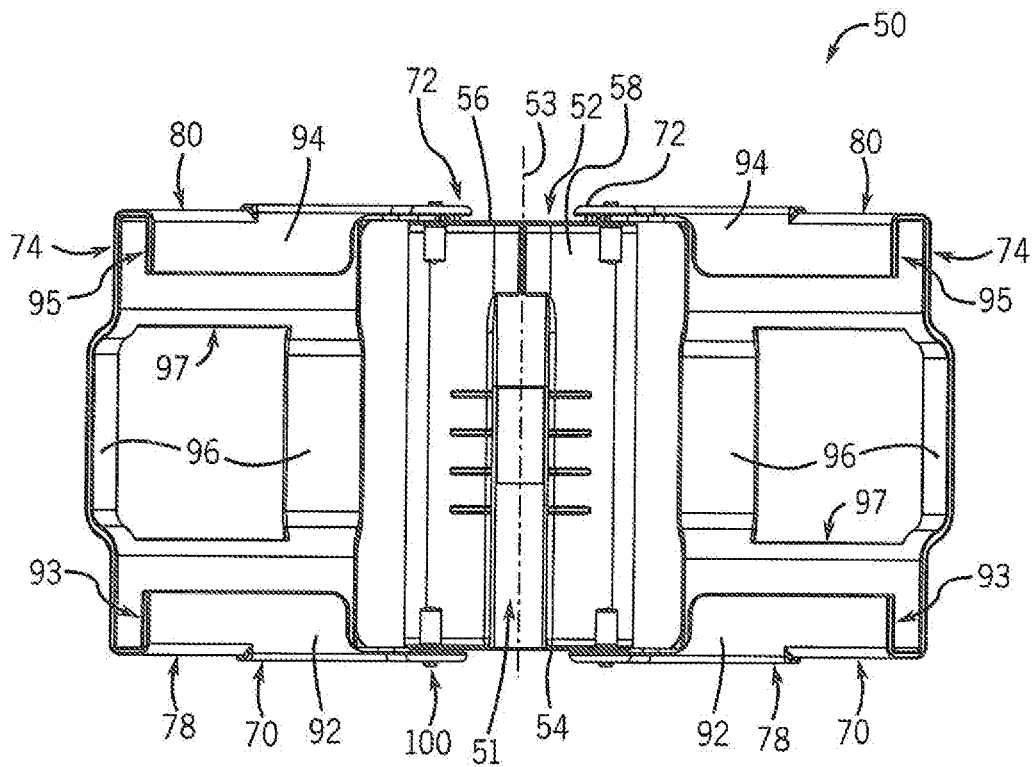


FIG. 10

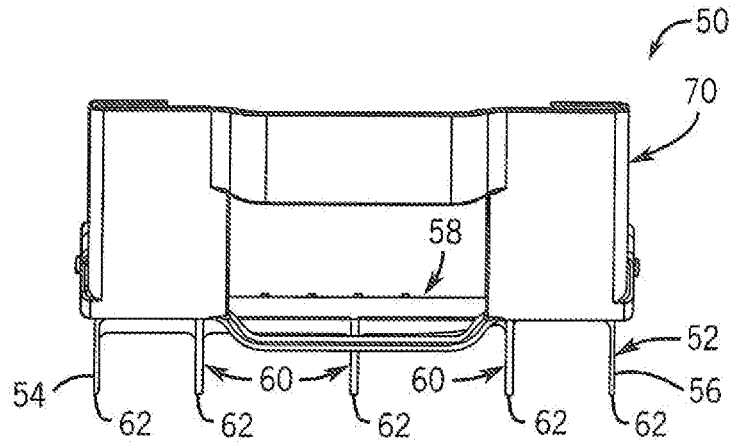


FIG. 11

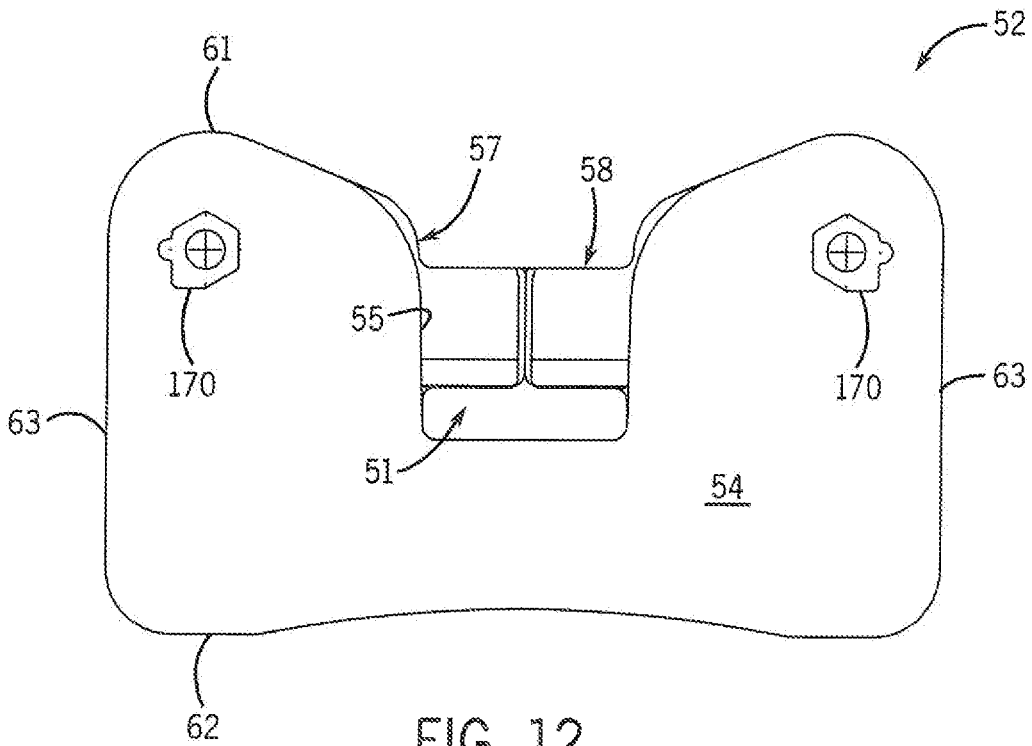


FIG. 12

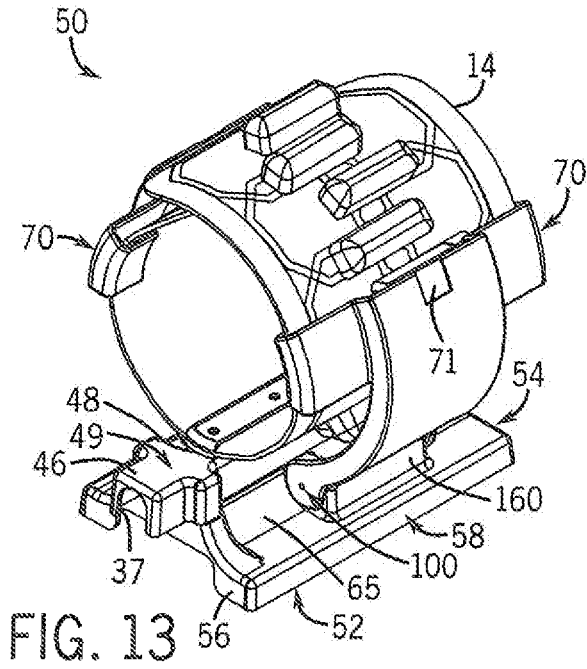


FIG. 13

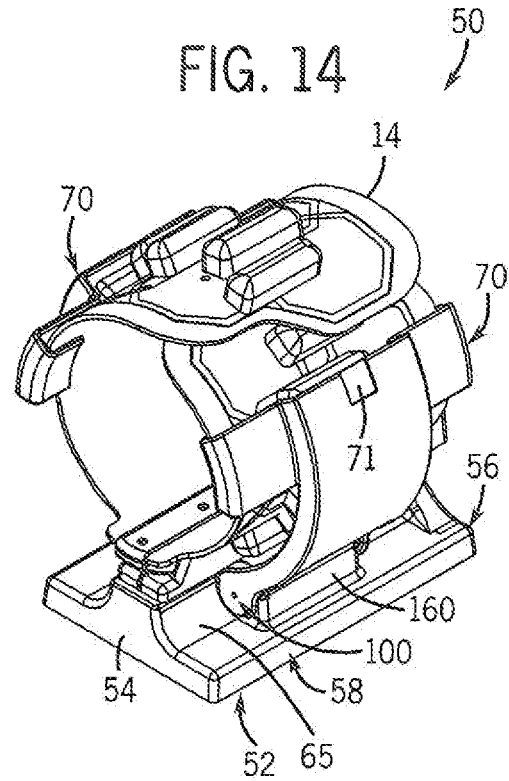


FIG. 14

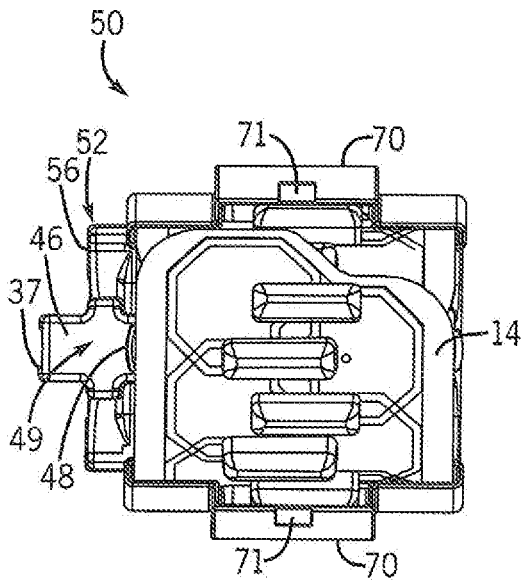


FIG. 15

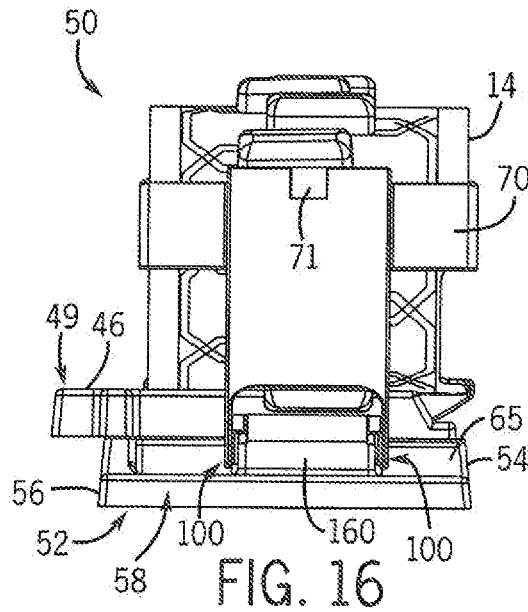


FIG. 16

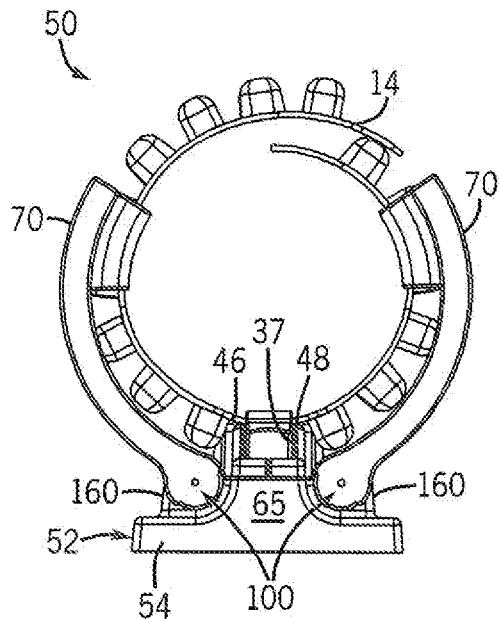


FIG. 17

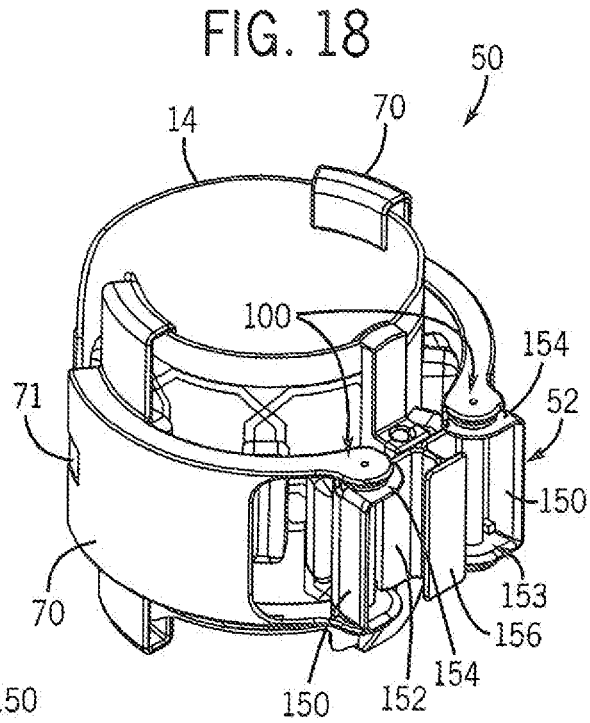


FIG. 18

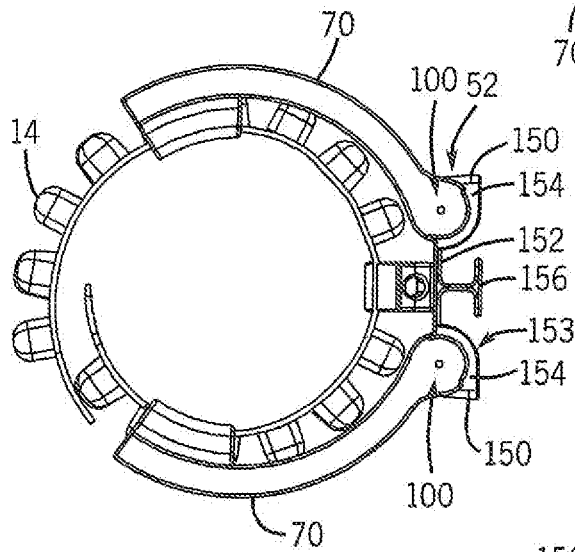


FIG. 19

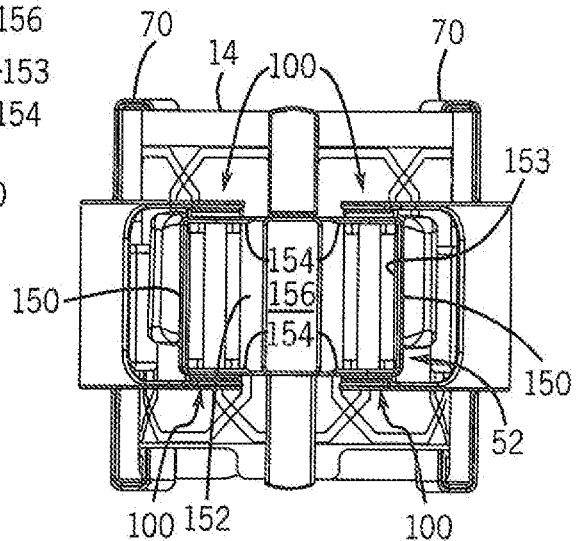


FIG. 20

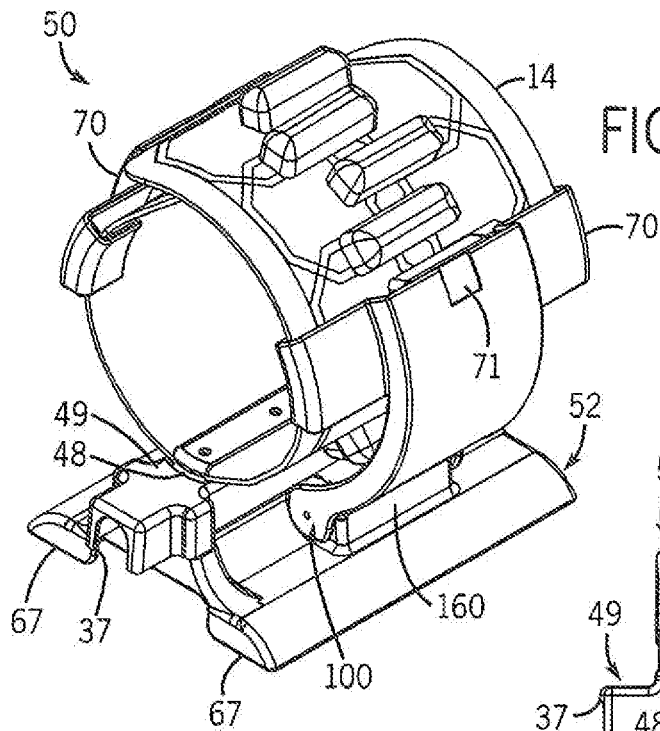


FIG. 21

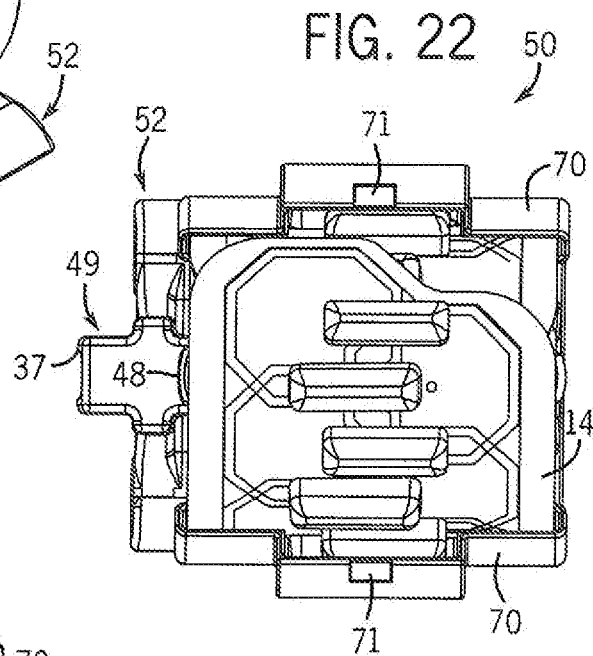


FIG. 22

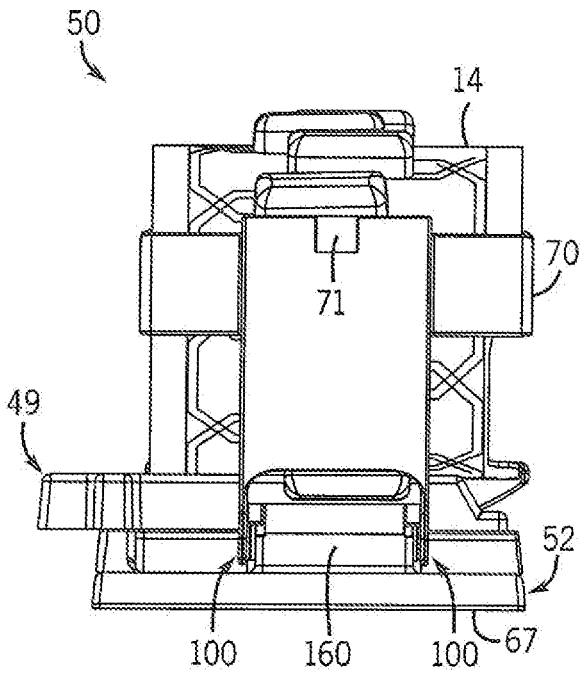


FIG. 23

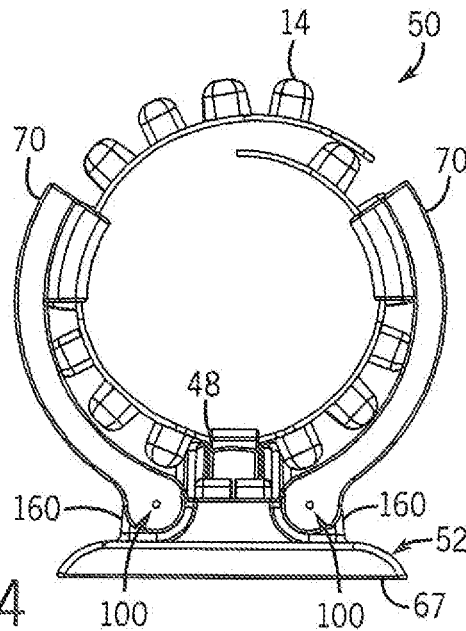


FIG. 24

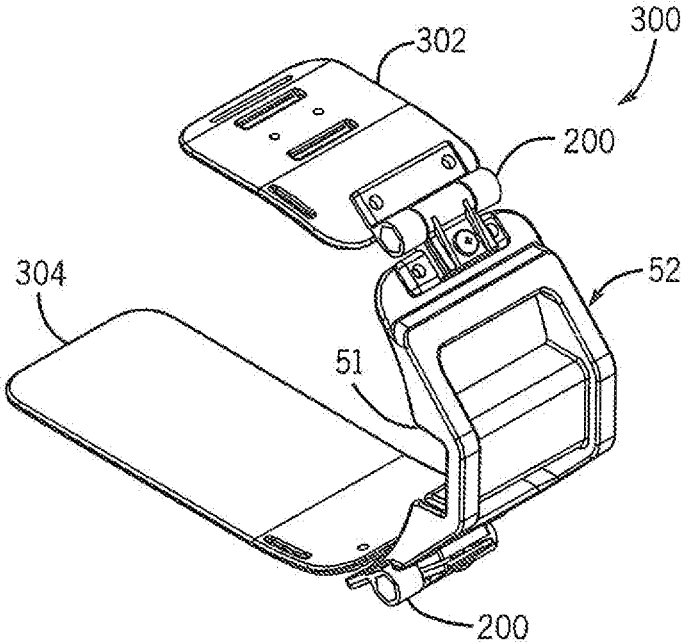


FIG. 25

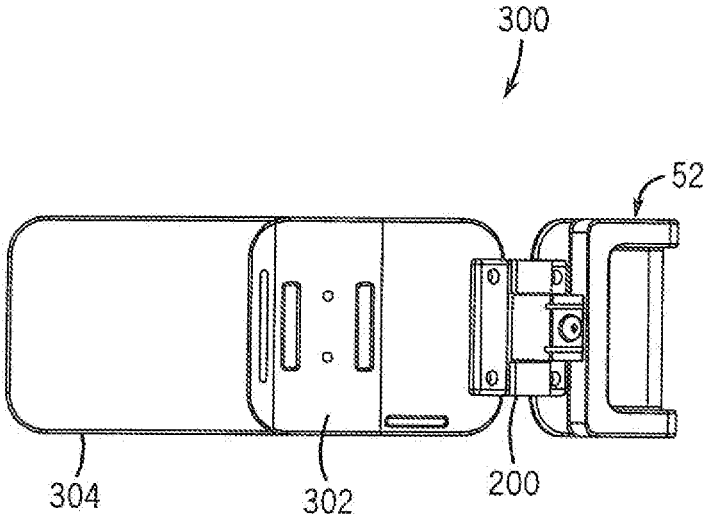


FIG. 26

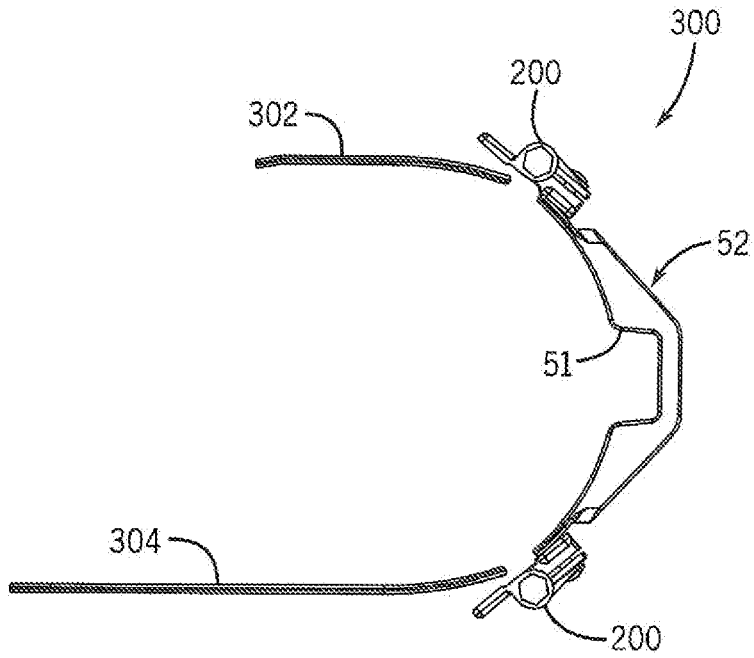


FIG. 27

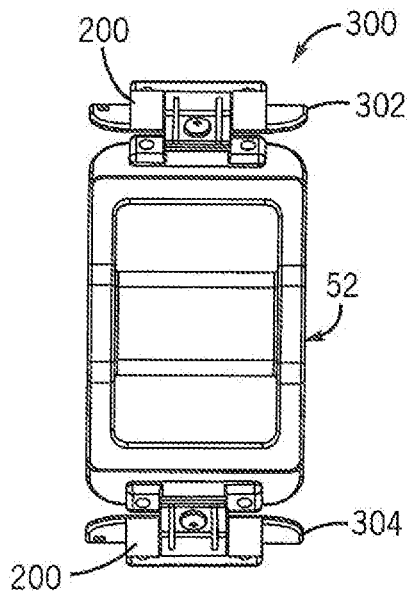


FIG. 28

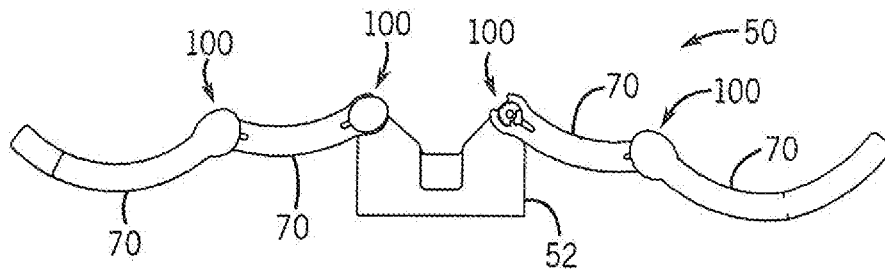


FIG. 37

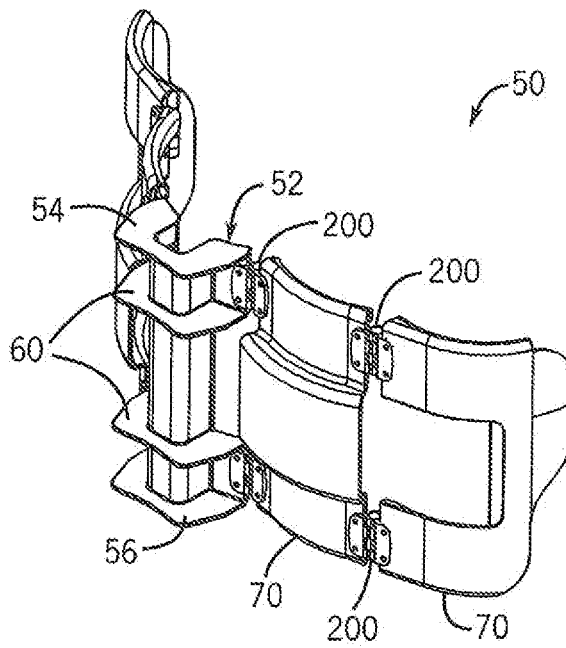


FIG. 38

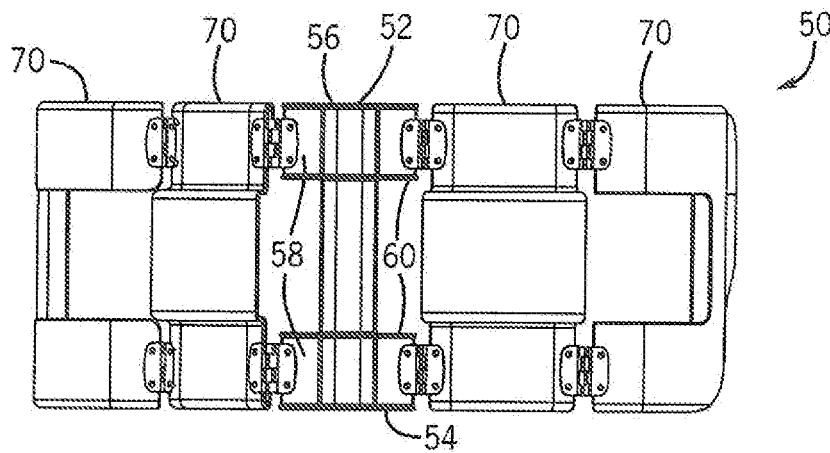


FIG. 39

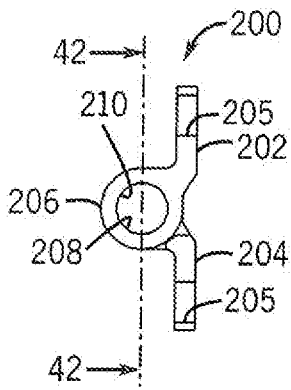
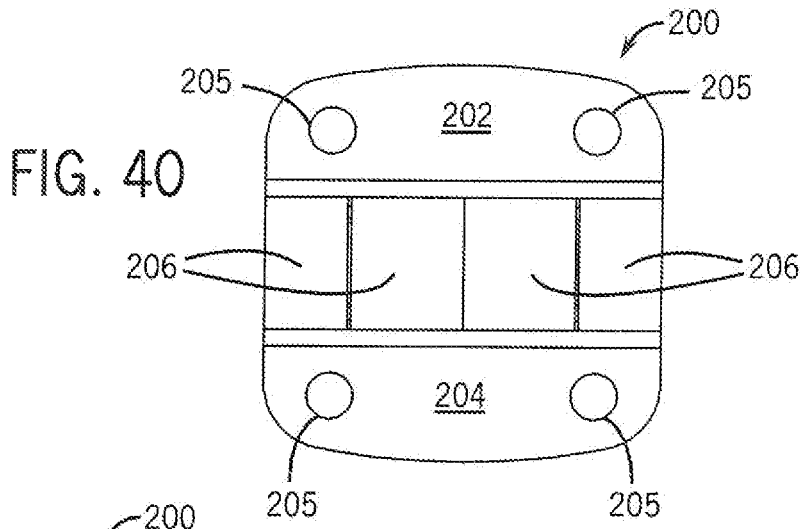


FIG. 41

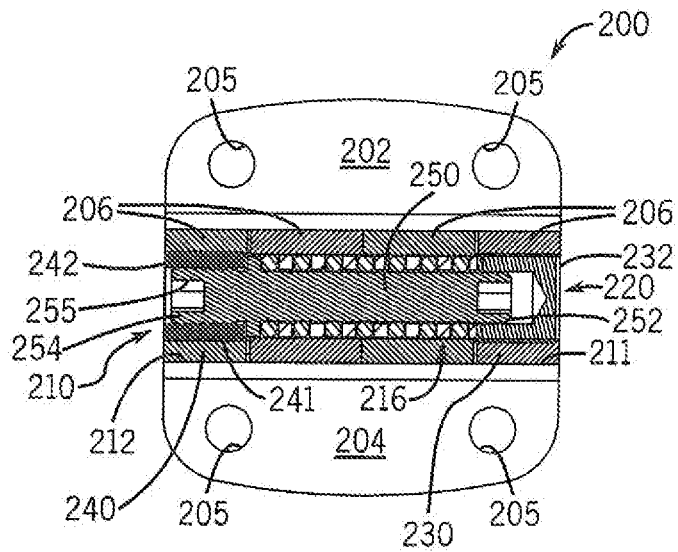


FIG. 42

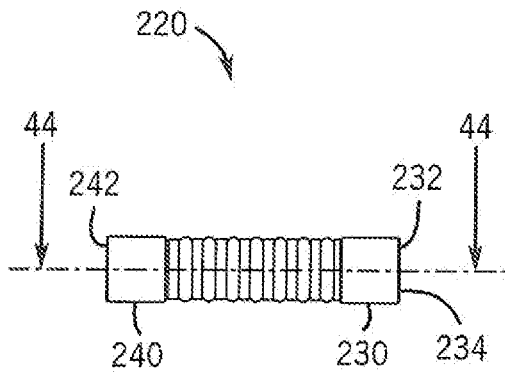


FIG. 43

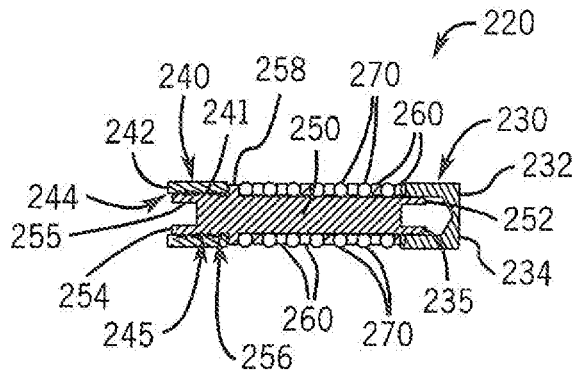


FIG. 44

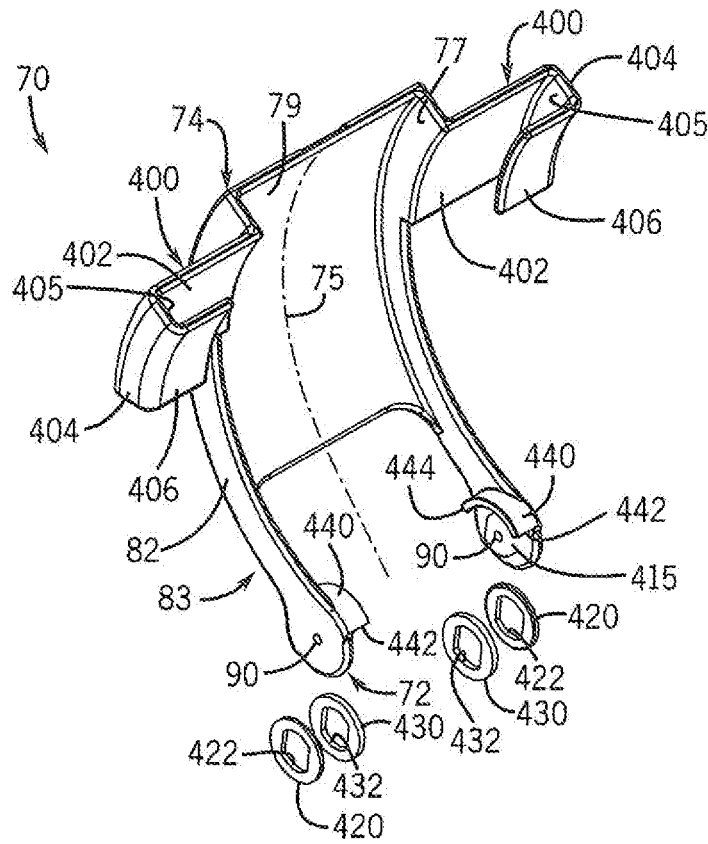


FIG. 45

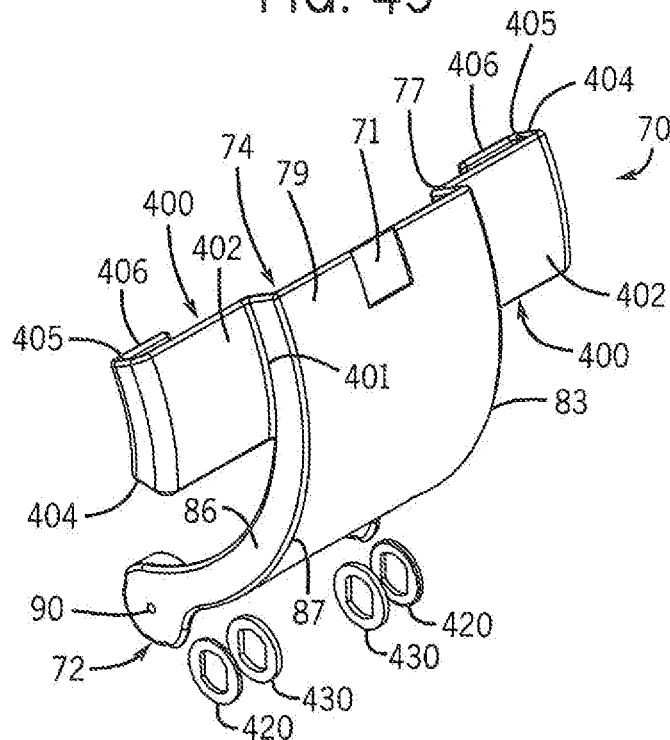


FIG. 46

PEDIATRIC IMAGING ASSEMBLY**CROSS-REFERENCE TO RELATED APPLICATIONS**

This application is a divisional of and claims priority to U.S. Ser. No. 13/447,603, filed Apr. 16, 2012, which, in turn, claims priority to U.S. provisional application Ser. No. 61/475,884, filed Apr. 15, 2011, titled Pediatric Imaging Assembly, the entire contents of these applications are incorporated herein by reference.

BACKGROUND OF THE INVENTION

The subject matter disclosed herein relates to a system for use in obtaining a magnetic resonance image (MRI) of a pediatric patient. More specifically, the assembly includes support structures both for patient comfort and stability as well as structures to position antenna arrays with respect to the patient.

As is known to those skilled in the art, obtaining MRIs of pediatric patients presents unique challenges. The quality of images obtained in MRI scanners is, in part, a function of the location of the antenna array with respect to the anatomical region being imaged. Currently, most imaging systems are of a rigid or fixed construction, requiring different coils to be used for patients of different sizes. Because pediatric patients are generally smaller in size and present greater variation in the size of patients than adults, coils are not always properly sized for the patient. Further, due to the expense of coils and due to the majority of MRI patients being adults, it may be cost prohibitive for some imaging centers to maintain pediatric imaging assemblies.

Current systems on the market are made of rigid non-formable construction. Such systems limit the use of non-uniform shapes that must fit inside the predefined contour of the coil. These systems may also include a rigid mechanical latching system to secure the coil in position, which requires a person skilled in the equipment to release the latch in order to gain access to the patient.

Thus, it would be desirable to provide a MRI imaging assembly adaptable to varying sizes of patients and easily accessible to enhance imaging of pediatric patients.

BRIEF DESCRIPTION OF THE INVENTION

The subject matter disclosed herein describes an imaging assembly which includes a patient support structure and at least one imaging coil. More specifically, the imaging assembly is configured to facilitate pediatric imaging.

The patient support structure includes a recessed portion configured to receive an imaging coil such that a desired anatomical region of the patient may be placed on the imaging coil. The patient support structure further includes an exoskeleton configured to open and close anterior to the anatomy to be imaged, providing, for example, easy access to the face of a patient. In addition, the imaging coils may be used independently of the patient support structure for other imaging applications. Thus, the customers overall cost for imaging solutions is reduced.

The patient support structure according to one embodiment of the current invention adapts to non-uniform shapes and can be configured for patients of varying sizes to improve patient comfort. The anterior opening exoskeleton accommodates medical incubation and ventilation and allows quick and easy access by medical professionals to patients in the event of an emergency.

The patient support structure according to one embodiment of the current invention allows patient set up for precise patient placement and improved comfort by allowing the technician to adjust and maneuver the patient along with any external elements a patient may require in stepped fashion. The pivotal connector is configured to be easily positioned to a desired position for imaging, and openings in the structure permit viewing to the opposite side of the coil. Thus, the technician is able to position and access the patient from the top, front, back and one side of the coil, allowing improved patient comfort and positioning for imaging. The patient support structure further provides an audible click when opening and an audible click when properly closed. This frictional interfering engagement is robust enough to hold the coil in position and light enough to allow the coil to be readily opened without the need for depressing or deactivating a mechanical latch.

The patient support structure includes an exoskeleton with a c-clip insert system. The c-clip system is designed to fit into the exoskeleton as a separate component, but optionally may be integrally formed with the exoskeleton. The c-clip may be configured to provide an increased or reduced radial torque for placing the exoskeleton into a full closed or full open position. The c-clip further provides multiple latch and hold positions, easy field repair, and disassembly for cleaning and sanitizing. The exoskeleton may be designed with one or more arms.

According to one embodiment of the invention, the c-clip arm includes multiple position locating teeth. Each tooth on the c-clip arm is designed to cooperate with a corresponding tooth on the c-clip cam. C-clip jaws are designed and positioned to provide a resilient force sufficient to hold an arm of the exoskeleton in an aligned position relative to a base of the exoskeleton when the locating tooth of the arm and the corresponding tooth of the cam are engaged. The c-clip arm is curved to cooperate with the exoskeleton arm in proper assembly. Locating holes on the c-clip engage bosses on the exoskeleton to provide for correct radial alignment between the c-clip and the exoskeleton. A spring activation slot on the c-clip allows variation in the force required to position the arm. Increasing the slot width or depth will reduce the load force required to position the clip. Thus, the c-clip may be manufactured to provide differing positioning forces as needed to meet customer demands.

A cooperating cam includes a stop position engaging the locating tooth of the c-clip. The locating tooth butts against the stop position to limit radial positioning. A radial alignment portion of the cam is designed with a minimum clearance or slight interference condition to maintain concentricity between the c-clip and the cam during radial movement of the c-clip arm. The cam further includes an orientation and anti-rotation feature such that the cam may be used on any face of the exoskeleton base, eliminating the need for left or right orientated cams. The cam may be positioned on the base such that the orientation feature sets the left side radial position independently of the right side radial position. Optionally, the cam orientation and anti-rotation feature can be designed with a spline-type center, allowing the cam to be positioned such that the open and closed position are left or right of center as needed.

According to one embodiment of the invention, a patient support assembly for use with a MRI scanner includes a first patient support structure defining a first recess, a first antenna array configured to be positioned within the first recess and to detect nuclear magnetic resonance (NMR) signals from a first anatomical region, a second patient support structure operative with the first patient support

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structure, and a second antenna array configured to be mounted to the second patient support structure and to detect NMR signals from a second anatomical region.

According to another aspect of the invention, the second patient support structure is mounted to the first patient support structure to align the second antenna array with the first antenna array to minimize interference between the first and second antenna arrays. The patient support assembly may also include a tray mounted to the first patient support structure, a first preamplifier module configured to be received by the tray and configured to receive each of the NMR signals from the first antenna array and to transmit the NMR signals to the MRI scanner, and a second preamplifier module configured to be received by a second recess in the first patient support structure and configured to receive each of the NMR signals from the second antenna array and to transmit the NMR signals to the MRI scanner.

According to still another aspect of the invention, the second patient support structure may include a first arm and a second arm. Each arm has a curved surface including a first edge and a second edge opposite the first edge, a first retaining channel extending along at least a portion of the first edge, and a second retaining channel extending along at least a portion of the second edge. Each of the first and second arms are pivotally movable between at least a first position and a second position, and the second antenna array slidably engages each of the first and second retaining channels of the first and second arms. The second patient support structure may include a base and configured to fit into a second recess defined in the first patient support, and each of the first and second arms may be pivotally connected to the base. Optionally, the first patient support structure includes a first pivotal mount configured to receive the first arm and a second pivotal mount configured to receive the second arm.

According to yet another aspect of the invention, the second patient support structure may include a third and a fourth arm. Each of the third and fourth arms includes a curved surface having a first edge and a second edge opposite the first edge, a first retaining channel extending along at least a portion of the first edge, and a second retaining channel extending along at least a portion of the second edge. The third arm is pivotally connected to the first arm, and the fourth arm is pivotally connected to the second arm.

According to another aspect of the invention, the second patient support structure may include a first friction mount at a first end of the first arm such that the first arm is retained at a plurality of intermediate positions between the first and second positions, and a second friction mount at a first end of the second arm such that the second arm is retained at a plurality of intermediate positions between the first and second positions. The friction mount may be either a friction hinge or a spring clip. Each of the first and the second friction mounts may also include a means to positively retain the first and second arms, respectively, at the first and second positions.

According to another embodiment of the invention, a patient support assembly for use with a magnetic resonance image (MRI) scanner includes a first patient support structure having a lower surface, an upper surface opposite the lower surface, and a plurality of side surfaces extending between the lower and upper surfaces. The upper surface is curved to support a patient lying on the upper surface, and a recess is defined within a portion of the upper surface. A first antenna array is placed in the recess of the upper surface of the first patient support structure, where the first antenna

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array has a padded outer surface configured to engage the patient lying on the upper surface. A second patient support structure is mounted to the upper surface of the first patient support structure and movable between a first position and a second position to facilitate positioning the patient therein. A second antenna array is secured within and movable with the second patient support structure, where the second antenna array has a padded outer surface configured to engage the patient positioned within the second patient support structure.

According to another aspect of the invention, the first patient support assembly is configured to support a back of the patient, the first antenna array is configured to detect nuclear magnetic resonance signals (NMR) from at least a portion of the back of the patient, the second patient support assembly is configured to support a head of the patient, and the second antenna array is configured to detect nuclear magnetic resonance signals (NMR) from at least a portion of the head of the patient. The second patient support structure is mounted to the first patient support structure to align the second antenna array with the first antenna array to minimize interference between the first and second antenna arrays.

According to yet another aspect of the invention, the second patient support structure further includes a first arm and a second arm. Each of the first and second arms has a first end pivotally mounted proximate to the first patient support structure, a second end opposite the first end, and a curved surface extending between the first and second ends. Each of the first and second arms curve outward from each other defining, at least in part, a region to receive an anatomical region of the patient therebetween. The second end of the first arm and the second end of the second arm are spaced apart such that the second patient support structure is open to the anterior portion of the anatomical region positioned between the first and second arms. The second antenna array is mounted on a flexible substrate and is retained along the inner periphery of the first and second arms. A first end of the second antenna array extends beyond the second end of the first arm, and a second end of the second antenna array extends beyond the second end of the second arm. The first and second ends of the second antenna array are configured to overlap over the anterior portion of the anatomical region positioned between the first and second arms.

According to still another embodiment of the invention, an assembly to provide comfort and support for a patient while obtaining an MRI of at least a portion of the patient includes a first patient support means for supporting a first anatomical region of the patient, a first antenna array operatively mounted to the first patient support means to obtain an MRI of the first anatomical region, a second patient support means for supporting a second anatomical region of the patient, and a second antenna array operatively mounted to the second patient support means to obtain an MRI of the second anatomical region.

These and other objects, advantages, and features of the invention will become apparent to those skilled in the art from the detailed description and the accompanying drawings. It should be understood, however, that the detailed description and accompanying drawings, while indicating preferred embodiments of the present invention, are given by way of illustration and not of limitation. Many changes and modifications may be made within the scope of the

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present invention without departing from the spirit thereof, and the invention includes all such modifications.

BRIEF DESCRIPTION OF THE DRAWING(S)

Various exemplary embodiments of the subject matter disclosed herein are illustrated in the accompanying drawings in which like reference numerals represent like parts throughout, and in which:

FIG. 1 is a perspective view of the patient support assembly according to one embodiment of the invention;

FIG. 2 is an exploded view of the patient support assembly of FIG. 1;

FIG. 3 is a perspective view of the patient support assembly according to another embodiment of the invention;

FIG. 4 is an exploded view of the patient support assembly of FIG. 3;

FIG. 5 is a perspective view of a curved patient support structure used in the patient support structure of FIG. 1 shown in a home position;

FIG. 6 is front elevation view of the curved patient support structure of FIG. 5;

FIG. 7 is a top plan view of the curved patient support structure of FIG. 5;

FIG. 8 is a side elevation view of the curved patient support structure of FIG. 5;

FIG. 9 is a perspective view of the curved patient support structure used in the patient support structure of FIG. 1 shown in an open position;

FIG. 10 is a top plan view of the curved patient support structure of FIG. 9;

FIG. 11 is a side elevation view of the curved patient support structure of FIG. 9;

FIG. 12 is a front elevation view of a base of the curved patient support structure of FIG. 5;

FIG. 13 is a perspective view from the top, rear, and side of the curved patient support structure used in the patient support structure of FIG. 3 shown in a home position;

FIG. 14 is a perspective view from the top, front, and side of the curved patient support structure used in the patient support structure of FIG. 3 shown in a home position;

FIG. 15 is a top plan view of the curved patient support structure of FIG. 13;

FIG. 16 is a side elevation view of the curved patient support structure of FIG. 13;

FIG. 17 is front elevation view of the curved patient support structure of FIG. 13;

FIG. 18 is a perspective view from the end, side, and bottom of the curved patient support structure according to another embodiment of the invention;

FIG. 19 is a side view of the curved patient support structure of FIG. 18;

FIG. 20 is a bottom plan view of the curved patient support structure of FIG. 18;

FIG. 21 is a perspective view of the curved patient support structure according to another embodiment of the invention;

FIG. 22 is a top plan view of the curved patient support structure of FIG. 21;

FIG. 23 is a side elevation view of the curved patient support structure of FIG. 21;

FIG. 24 is front elevation view of the curved patient support structure of FIG. 21;

FIG. 25 is a perspective view of a curved patient support structure according to another embodiment of the invention;

FIG. 26 is a top plan view of the curved patient support structure of FIG. 25;

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FIG. 27 is a side elevation view of the curved patient support structure of FIG. 25;

FIG. 28 is front elevation view of the curved patient support structure of FIG. 25;

5 FIG. 29 is a front elevation view of one embodiment of a c-clip used in the curved patient support structure of FIG. 5;

FIG. 30 is a front elevation view of one embodiment of a cam used in cooperation with the c-clip of FIG. 29;

10 FIG. 31 is a front elevation view of another embodiment of a c-clip used in the curved patient support structure of FIG. 5;

FIG. 32 is a front elevation view of one embodiment of a cam used in cooperation with the c-clip of FIG. 31;

15 FIG. 33 is a side elevation view of one embodiment of an arm used in the curved patient support structure of FIG. 5;

FIG. 34 is a cross-sectional view of the arm in FIG. 33 taken at 34-34;

FIG. 35 is a front elevation view the arm used in FIG. 33;

20 FIG. 36 is a partial cross-sectional view of the arm in FIG. 35 taken at 36-36;

FIG. 37 is a side elevation view of another embodiment of a curved patient support structure shown in an open position;

25 FIG. 38 is a perspective view of another embodiment of a curved patient support structure shown in an open position;

FIG. 39 is a bottom plan view of the curved patient support structure of FIG. 38;

FIG. 40 is a top plan view of a hinge used in the curved patient support structure of FIG. 38;

30 FIG. 41 is a side elevation view of the hinge of FIG. 40;

FIG. 42 is a cross-sectional view of the hinge of FIG. 41 taken at 42-42;

FIG. 43 is a front elevation view of the pin assembly for the hinge of FIG. 40;

35 FIG. 44 is a cross-sectional view of the pin assembly of FIG. 43 taken at 44-44;

FIG. 45 is a perspective view of another embodiment of an arm used in the curved patient support structure; and

40 FIG. 46 is a reversed perspective view of the arm of FIG. 45.

In describing the preferred embodiments of the invention which are illustrated in the drawings, specific terminology will be resorted to for the sake of clarity. However, it is not intended that the invention be limited to the specific terms so selected and it is understood that each specific term includes all technical equivalents which operate in a similar manner to accomplish a similar purpose. For example, the word "connected," "attached," or terms similar thereto are often used. They are not limited to direct connection but include connection through other elements where such connection is recognized as being equivalent by those skilled in the art.

DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS

The various features and advantageous details of the subject matter disclosed herein are explained more fully with reference to the non-limiting embodiments described in detail in the following description.

Turning initially to FIGS. 1 and 2, one embodiment of a patient support assembly 10 includes at least one patient stabilization structure used to position a patient within a MRI scanner. According to the illustrated embodiment, a first patient support 30 includes a top surface 32, a bottom surface 34, and multiple side walls 36, a front wall 38, and a rear wall 40 joining the top surface 32 and the bottom surface 34. The first patient support 30 may be a single

molded assembly or, optionally, may include two or more components joined to form the first patient support 30.

The top surface 32 includes a first recess 31 configured to receive a first antenna array 12. The antenna array 12 may be, for example, an antenna array as provided by applicant and described in U.S. Pat. Pub. No. 2010/0315085, herein incorporated by reference. The depth of the first recess 31 is equal to or greater than the thickness of the first antenna array 12 such that a top surface 11 of the first antenna array 12 is at or below the top surface 32 of the first patient support 30. The walls of the recess 31 extending above the antenna array 12 may help position and/or retain a pediatric patient on the first patient support 30. For example, the top surface 32 of each wall may be formed to support the arms of a patient. A first channel 33 is in communication with the recess 31 and is configured to receive a cable 13 extending from the first antenna array 12 to the MRI scanner. A first preamplifier module 22 may be connected in series between the first antenna array 12 and the MRI scanner. Optionally, preamplifier circuits may be incorporated into the antenna array 12 and the cable 13 may be connected directly to the MRI scanner. The first preamplifier module 22 is supported within a cavity 45 of a tray 44 mounted to a side 36 of the first patient support 30. Optionally, the tray 44 may be integrally formed with the first patient support 30 and the cavity 45 may be another recessed portion of the first patient support 30. According to still another embodiment, if the electronic circuits of the first preamplifier module 22 are incorporated into the first antenna array 12, the tray 44 may be eliminated.

The top surface 32 includes a second recess 35 configured to receive a second patient support 50. The second patient support 50 may be used to support the head of a pediatric patient, and is also referred to herein as the head support 50. Optionally, the second patient support 50 may be used to support, for example, arms or legs of adult patients. The head support 50 is configured to support a second antenna array 14. A second channel 37 is in communication with the second recess 35 and is configured to receive a cable extending from the second antenna array 14 to the MRI scanner. A second preamplifier module 24 may be connected in series between the second antenna array 14 and the MRI scanner. Optionally, preamplifier circuits may be incorporated into the second antenna array 14 and the cable may be connected directly to the MRI scanner. If the second preamplifier module 24 is included, a third recess 39 may be formed in the first patient support 30 and configured to receive the second preamplifier module 24. If the cable from the second antenna array 14 is connected directly to the MRI scanner, the third recess 39 may be eliminated.

The spatial relationship of the first recess 31 with respect to the second recess 35 is configured to provide improved image quality if both the first and second antenna arrays, 12 and 14 respectively, are used. Adjacent or overlapping antennas in the antenna arrays, 12 and 14, can cause coupling between the coils, degrading image quality. However, if the arrays, 12 and 14, are oriented properly with respect to each other, the coupling can be reduced or eliminated, providing improved image quality. Consequently, the first and second recesses, 31 and 35, are configured such that the first and second antenna arrays, 12 and 14, are oriented in a preferred alignment to minimize coupling between the arrays.

Referring next to FIGS. 3 and 4, another embodiment of a patient support assembly 10 includes at least one patient stabilization structure used to position a patient within a MRI scanner. According to the illustrated embodiment, a

first patient support 30 includes a top surface 32, a bottom surface 34, and multiple side walls 36, a front wall 38, and a rear wall 40 joining the top surface 32 and the bottom surface 34. The first patient support 30 may be a single molded assembly or, optionally, may include two or more components joined to form the first patient support 30.

The top surface 32 includes a first recess 31 configured to receive a first antenna array 12. The depth of the first recess 31 is equal to or greater than the thickness of the first antenna array 12 such that a top surface 11 of the first antenna array 12 is at or below the top surface 32 of the first patient support 30. A first channel 33 is in communication with the recess 31 and is configured to receive a cable 13 extending from the first antenna array 12 to the MRI scanner.

The walls of the recess 31 extending above the antenna array 12 may help position and/or retain a pediatric patient on the first patient support 30. For example, the top surface 32 of each wall may be formed to support the arms of a patient. Optionally, it may be desirable to more firmly retain a patient to the support assembly 10 to prevent movement during imaging. A strip of material 41 made up of one side of a hook and loop fastener may be adhered along each side 36 of the patient support assembly 10. One or more straps (not shown) made up of the other side of the hook and loop fastener may engage the strip of material 41 along one side 36 of the patient support assembly 10, extend over the patient, and engage the strip of material 41 along the other side 36 of the patient support assembly 10.

The top surface 32 includes a second recess 35 configured to receive a second patient support 50. The second patient support 50 may be used to support the head of a pediatric patient, and is also referred to herein as the head support 50. Optionally, the second patient support 50 may be used to support, for example, arms or legs of adult patients. When the second patient support 50 is used to support the head of a patient, a contoured pad 47 may be inserted within the second patient support 50 to provide comfort and support for patient's head during the procedure. The head support 50 is configured to support a second antenna array 14. A riser 49 may be placed between the pivot mounts 160 to which a first end 72 of each arm 70 is mounted. The riser 49 helps position the contoured pad 47 at a desired height to support the patient's head and defines the second channel 37 which is in communication with the second recess 35 and is configured to receive a cable extending from the second antenna array 14 to the MRI scanner. The riser 49 includes an opening 48 along an upper surface 46 configured to receive the spine of the antenna array 14.

Referring next to FIGS. 5-12, the head support 50 includes a base 52 and two arms 70. The base 52 is configured generally to connect each arm 70 to the first patient support 30. According to one embodiment of the invention, the base 52 includes a front wall 54, a rear wall 56, and a central member 58 extending between the front wall 54 and the rear wall 56. The central member 58 is joined to the front wall 54 and the rear wall 56 between a top edge 61 and a bottom edge 62 of each wall, 54 and 56, and extends generally between each side 63 of the front wall 54 and the rear wall 56. The central member 58 is generally planar with a channel 51 extending longitudinally along a center line 53 of the central member 58 between the front wall 54 and the rear wall 56.

The channel 51 is configured to receive a spine of the second antenna array 14. The channel 51 has a width, W, and extends from the front wall 54 toward the rear wall 56 for a length, L, suitable to receive the spine of the second antenna array 14. The cable connecting the second antenna array 14

to the second preamplifier module 24 extends out the front of the head support 50 and is routed to the second preamplifier module 24.

The front wall 54 includes a notch 55 extending from the top edge 61 of the front wall 54 to the depth of the channel 51 and for a width, W, of the channel 51. The channel preferably slopes from the front to the rear of the head support 50 complementary to the shape of the spine of the antenna array 14. The rear wall 56 may similarly include a notch 57 having a width, W, of the channel 51 and extending from a depth less than the depth of the notch in the front wall 54 and preferably above the height of the central member 58. Optionally, the channel 51 may be reversed such that the deepest portion of the channel extends out the rear wall 56 and slopes upward toward the front wall 54. As still another option, the channel 51 may have a substantially uniform depth and may accept the spine of the antenna array 14 in either orientation.

The base 52 further includes a plurality of ribs 60 extending laterally across the width of the central member 58. The ribs 60 protrude down from the central member 58 such that the bottom edges 62 of the front wall 54, rear wall 56, and each rib 60 extend a generally uniform distance below the central member 58 and are complementarily formed to a profile of the recess 35 in the first patient support 30.

Referring next to FIGS. 13-17, another embodiment of the base 52 and head support 50 is illustrated. The base 52 includes a front wall 54, a rear wall 56, and a central member 58 extending between the front wall 54 and the rear wall 56. A raised portion 65 extends longitudinally along the middle of the central member 58 between the front wall 54 and the rear wall 56 and is configured to support the riser 49. The raised portion 65, in combination with the riser 49, positions the second antenna array 14 and the contoured pad 47 generally in alignment with the first antenna array 12 to provide comfort and support for a patient extending between the first and second antenna arrays, 12 and 14. The base 52 is configured to mount within the second recess 35 of the first patient support 30. Any suitable alignment method may be used to position the base 52 within the second recess 35, including, but not limited to, tabs, posts or a recess complementary to the outer periphery of the base 52. A first and second pivot mount 160 extends along each side of the raised portion 65 and, in cooperation with a pivoting assembly 100, connects each arm 70 to the base 52. Optionally, the base 52 may be integrally formed with the first patient support 30.

Referring next to FIGS. 18-20, another embodiment of the base 52 is illustrated. The base 52 includes a first end 150 and a second end 150 opposite the first end 150. A generally planar upper surface 152 extends between each of the first and second ends 150. Side portions 154 extend from each of the first and second ends 150 along a portion of the upper surface 152 but not to the center line of the upper surface 152, defining a space between the two side portions 154. Each side portion 154 extends a sufficient distance along the upper surface 152 such that the pivoting assembly 100 may connect each arm 70 to the base 52 at each side portion 154. Optionally, it is contemplated, that a solid side surface may extend between each 150 of the base 52. A cavity 153, generally open to a lower surface, is defined within the base 52 by the upper surface 152, first and second ends 150 and each side portion 154. A handle 156 is mounted to the interior side of the upper surface 152 and extends into the cavity 153. As illustrated, the handle 156 forms a "T" shape; however, it is contemplated that the handle 156 may be of any suitable shape. The handle 156 is preferably contained

within the cavity 153 such that the base 52 may be placed within the second recess 35 of the first patient support. Optionally, the handle 156 may extend beyond the cavity 153 and the second recess 35 may be configured to receive the portion of the handle 156 extending beyond the cavity 153.

Referring next to FIGS. 21-24, still another embodiment of the base 52 is illustrated. It is contemplated that the second support structure 50 may be used separately to support other anatomical regions, for example, arms or legs of adult patients during imaging. The base 52 is similar to the base 52 illustrated in FIGS. 13-17 except it has a wider footprint. The lower surface of the base 52 includes at least a first and a second generally planar surface 67. Optionally, the generally planar surface 67 may extend across the entire lower surface of the base 52, as shown in FIG. 24. Each of the first and second surfaces 67 extend out beyond the pivot mounts 160 to provide stability to the second support structure 50 as each arm 70 is moved to an open position. The planar lower surface 67 may be set directly on a table of the MRI scanner and the entire support structure 50 may be positioned on the table as needed to accommodate the desired anatomical region to be imaged.

A pivoting assembly 100 connects each arm 70 to the base 52. According to one embodiment of the invention, a first pivoting assembly 100 connects the arm 70 to the front wall 54 and a second pivoting assembly 100 connects the arm 70 to the rear wall 56 of the base 52. Both arms 70 connect to the base 52 proximate to the top edge 61 of the front and rear walls, 54 and 56 respectively. The first arm 70 is connected proximate to a first side 63 and the second arm 70 is connected proximate to the second side 63 of the base 52.

Referring also to FIGS. 12, and 29-32, one embodiment of the pivoting assembly 100 includes a clip 110, a cam 140, and a mounting boss 170. The clip 110 has an elongated body, having a first end 112, a second end 114, a thickness, and a width, Wc, greater than the thickness. A pair of arcuate members 120, or jaws, extend from the first end 112. Each arcuate member 120 first curves outward in a direction opposite from the other arcuate member 120 and then curves back inward toward the opposing arcuate member 120. According to one embodiment, each of the arcuate members 120 are symmetrical about a center line 130 extending axially from the first end 112 of the clip. The arcuate members 120 define an opening 122 therebetween configured to receive the cam 140. Each arcuate member 120 has an outer periphery 125 and an inner periphery 124. The inner periphery 124 includes one or more tabs 127 or recesses 128 configured to engage a complementary feature on the cam 140 and to define at least one desired spatial relationship between the cam 140 and the clip 110.

The clip 110 further includes a slot 132 in communication with the opening 122 defined by the arcuate members 120. The slot 132 extends from the opening 122 into the body of the clip 110. The slot 132 may be straight or curved and preferably extends along the center line 130 of the clip. The slot 132 permits the arcuate members 120 to be deflected apart and return to an unbiased position as the clip 110 is rotated about the cam 140. The force required to deflect the arcuate members 120 apart is a function of the length and width of the slot 132.

The clip 110 includes at least one locating hole 134 extending through the clip 110 proximate to the second end 114 of the clip 110. According to one embodiment of the invention, two locating holes 134 spaced apart along the length of the clip 110 are configured to receive a complementary boss 76 protruding from one of the arms 70. Two

locating holes 134 prevent rotation of the arm 70 with respect to the clip 110. Optionally, a single locating hole 134 having a non-circular periphery may be used to both align the clip 110 to the arm 70 and prevent rotation. As still another option, the clip 110 may include one or more bosses which engage holes in the arm 70.

The cam 140 is designed to have an outer periphery 142 complementary to the opening 122 defined by the arcuate members 120 of the clip 110. The outer periphery 142 includes one or more tabs 144 or recesses 146 configured to engage the tabs 127 or recesses 128 of the inner periphery 124 of the opening 122 in the clip 110. One of the tabs 144 and/or recesses 146 defines a home position. A complementary tab 127 or recess 128 on the clip 110 engaging the tab 144 or recess 146 that defines the home position causes the arm 70 to be aligned in a preferred relationship to the base 52 to reduce image artifacts resulting from overlapping loops in the antenna array 14.

The cam 140 is mounted in a fixed relationship to the base 52 of the head support 50. An opening 148 in the cam 140 engages the boss 170 protruding from the base 52. Optionally, the cam 140 may have a boss which engages an opening in the base 52. The opening 148 is non-circular to prevent rotation of the cam 140 with respect to the base 52. The opening 148 may also be non-symmetric such that the orientation of the boss 170 defines the angular orientation of the cam 140 to the base 52.

Referring next to FIGS. 38-39, a pivoting assembly connects each arm 70 along a side edge of the central member 58. Referring also to FIGS. 40-44, the pivoting assembly is a hinge 200 having a first leaf 202 and a second leaf 204. Each of the first leaf 202 and the second leaf 204 include at least one mounting hole 205 configured to receive a securing member, such as a screw or a bolt, to mount the respective leaf to either the arm 70 or the base 52. Each of the first leaf 202 and the second leaf 204 include at least one barrel section 206 connected along an edge of the leaf, 202 or 204. Each barrel section 206 is generally cylindrical, has a hollow interior 208, and is uniform in size to the other barrel sections 206. The first leaf 202 and the second leaf 204 are positioned adjacent to each other such that the barrel sections 206 on the first leaf 202 align with the barrel sections 206 on the second leaf 204, defining a chamber 210 having a first end 211 and a second end 212 into which a central assembly 220 may be inserted.

The central assembly 220 is configured to provide a variable resistance to pivoting the hinge 200. The assembly 220 includes a first insert 230 and a second insert 240 which define a first end 232 and a second end 242, respectively, of the assembly 220. Each insert, 230 and 240, has a generally smooth outer periphery having a diameter configured to slidably engage the chamber 210 defined by the barrel sections 206. The first end 232 of the assembly 220 extends generally to the first end 211 of the chamber 210 and the second end 242 of the assembly 220 extends generally to the second end 212 of the chamber 210.

The first insert 230 includes a generally cylindrical cavity 235 extending through at least a portion of the first insert 230. A first end 234 of the first insert 230, proximate to the first end 211 of the chamber 210, may be a wall and define a stop for a pin 250 inserted into the central assembly 220. Optionally, a flange or other protrusion may extend into the cavity 235 to define the stop. The first insert 230 extends for a distance from the first end 211 into the chamber 210. The thickness of a wall of the first insert 230 is defined by the diameter of the outer periphery and the diameter of the cylindrical cavity 235.

The second insert 240 includes a generally cylindrical cavity 245 extending through the second insert 240. A first end 244 of the second insert 240 is proximate to the second end 212 of the chamber 210, and the second insert 240 extends for a distance from the second end 212 into the chamber 210. A gap 216 is defined within the chamber 210 between the first insert 230 and the second insert 240. At least a portion 241 of the cavity 245 is threaded. The thickness of a wall of the second insert 240 is defined by the diameter of the outer periphery and the diameter of the cylindrical cavity 245 and is preferably the same thickness as the wall of the first insert 230.

The pin 250 is configured to engage both the first insert 230 and the second insert 240. A first end 252 of the pin 250 slidably engages the cavity 235 of the first insert 230, and a threaded portion 256 of the pin 250, proximate to a second end 254 of the pin 250, engages the threaded portion 241 of the second insert 240. The second end 254 of the pin 250 includes a recess 255 configured to accept a tool, for example a screw driver or box-head wrench, to rotate the pin 250. As the pin 250 is rotated, the threaded portion 256 causes the pin 250 to move axially within the first and second inserts, 230 and 240 respectively. The pin 250 includes a flange 258 extending around the periphery of the pin 250. The flange 258 has a thickness equal to or less than the thickness of the second insert 240 and is configured to engage the end of the second insert 240 within the chamber 210. Multiple washers 260 and o-rings 270 are alternately disposed along the outer periphery of the pin 250 to substantially fill the gap 216 between the first insert 230 and the second insert 240.

Referring next to FIGS. 33-36, each arm 70 is preferably symmetric about a center line 75 such that the same arm 70 may be mounted to either side of the base 52 by rotating the arm 70 about the center line 75 to reverse its orientation. In a first embodiment of the invention, the arm 70 includes a first curved member 78 and a second curved member 80, each curved member, 78 and 80, extending from a first end 72 to a second end 74 of the arm 70. A front face 82 of the arm 70 is joined to a first curved side face 84 of the arm 70 along a front edge 83 to generally define the first curved member 78. A rear face 86 of the arm 70 is joined to a second curved side face 88 of the arm 70 along a rear edge 87 to generally define the second curved member 80.

Each of the front and rear faces, 82 and 86 respectively, extends beyond the respective side face, 84 and 88, at the first end 72 of the arm 70 and is configured to receive the clip 110 of the pivoting assembly 100. The portion of each of the front and rear faces, 82 and 86 respectively, proximate to the first end 72 is curved complementary to the arcuate members 120 of the clip 110. A mounting hole 90 extends through each of the front and rear faces, 82 and 86 respectively, within the curved portion to receive a fastener, for example, a screw or a bolt, which positively retains the arm 70 to the mounting boss 170 of the pivoting assembly 100. At least one boss 76 protrudes from the interior surface of each of the front and rear faces, 82 and 86 respectively, toward the other of the front and rear faces to engage each of the locating holes 134 in the clip 110.

The interior surface of the front and rear faces, 82 and 86 respectively, further includes a curved retaining surface, 92 and 94 respectively. Each curved retaining surfaces, 92 and 94, is spaced apart from the first or second curved side face, 84 or 88 respectively, defining a channel, 93 and 95, configured to receive the second antenna array 14.

Each arm 70 further includes at least one support member 96 extending between the first curved member 78 and the

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second curved member **80**. In one embodiment of the invention, a first support member **96** extends between the curved members, **78** and **80**, proximate to the first end **72** of the arm **70** and a second support member **96** extends between the curved members, **78** and **80**, proximate to the second end **74** of the arm **70**. A space **97** defined by interior edges of each of the support members **96** and the curved members, **78** and **80**, provides a line of sight and permits access to a patient through the arm **70**.

Another embodiment of the arm **70** is illustrated in FIGS. **45-46**. Each arm **70** is preferably symmetric about a center line **75** such that the same arm **70** may be mounted to either side of the base **52** by rotating the arm **70** about the center line **75** to reverse its orientation. The arm **70** includes a central curved member **79** joined to a front face **82** along a front edge **83** and joined to a rear face **86** along a rear edge **87**. Each of the front face **82**, central curved member **79**, and rear face, **86** extend from the second end **74** of the arm **70**. Each of the front face **82** and rear face **86** extend to the first end **72** of the arm **70** with the central curved member **79** extending along only a portion of the distance between the second and first ends, **74**, **72**. The width of each of the front and rear face **82**, **86** is preferably equal to or greater than the width of a pickup assembly on the antenna array **14**, thereby defining a channel **77** between the front face **82**, central curved member **79**, and the rear face **86** configured to receive the pickup assemblies of the second antenna array **14**. Each of the front face **82** and rear face **86** also includes a mounting hole **90**, extending through each face, **82** and **86**, to receive a fastener, for example, a screw or a bolt, which positively retains the arm **70** to one of the pivot mounts **160**. Proximate the second end **74** of the arm, a recess **71** may be included to receive one side of a hook and loop fastener. A strap (not shown) made up of the other side of the hook and loop fastener may engage the fastener on one arm **70** and extend over the antenna array **14** to engage the fastener on the other arm **70**.

A pair of retention members **400** extend from each of the front face **82** and the rear face **86** proximate to the second end **74** of the arm. Each retention member **400** includes a first surface **402** connected to either the front face **82** or the rear face **86** along at least a portion of the interior edge **401** of the face. The first surface **402** extends away from each respective face **82**, **86** to an outer surface **404** of the retention member **400**. The outer surface **404** extends between the first surface **402** and a second surface **406** which is generally parallel to the first surface, forming a channel **405** defined by the first surface **402**, outer surface **404**, and second surface **406**. Each of the first surface **402**, outer surface **404**, second surface **406**, and the channel **405** defined therein are generally curved, corresponding to the curvature of the central member **79** of the arm **70**. Each retention member **400** is configured to receive a portion of the second antenna array **14** therein.

A pair of washers **420**, **430** may be inserted between the interior surface of each of the front **82** and rear face **86** where they engage the pivot mount **160**. A boss **415** on the interior surface is positioned such that the mounting hole **90** extends therethrough. The boss is preferably has a non-circular periphery and is complementary to an inner periphery **422**, **432** of each washer **420**, **432** respectively. The non-circular periphery prevents rotation of the washers **420**, **432** as the arm **70** is moved between a first position and a second position. According to one embodiment of the invention, the first washer **420** may be made of viton and the second washer **430** may be made of nylon. Optionally, other materials may be used. As a fastener connects each arm **70** to the

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pivot mount **160**, the washers **420**, **430** are compressed generating a resistance in rotation of the arm **70** about the pivot.

According to another embodiment of the invention, shown in FIGS. **38-39**, each of the hinges **200** connects the arm **70** along a side edge of the central member **58**. A first hinge **200** connects the first side face **84** to the central member **58** proximate to one of the front wall **54** and the rear wall **56** and, a second hinge **200** connects the second side face **88** to the central member **58** proximate to the other of the front wall **54** and the rear wall **56**. The portion of each of the front and rear faces, **82** and **86** respectively, proximate to the first end **72** extends generally contiguous with the respective side face, **84** and **88**.

Referring next to FIGS. **37-38**, the second end of one of the arms **70** may be configured to receive a clip **110** or a hinge **200**. A second arm **70** may then be connected on each side of the head support **50**, providing a second pivot point for each arm. The combination of two arms **70** on each side permits a larger coil array **14** to be used with the head support **50**.

Referring next to FIGS. **25-28**, still another embodiment of the patient support structure **300**, which is configured to hold an antenna array **14** around a shoulder, is illustrated. The patient support structure **300** includes a first arm **302** and a second arm **304** connected by friction hinges **200** to a base **52**. The base **52** includes a channel **51** configured to receive the spine of an antenna array **14**, thereby positioning the antenna array **14** on the shoulder. The first arm **302** is configured to extend down the chest of the patient and the second arm **304** is configured to extend down the back of the patient. Each arm **302,304** holding the antenna array **14** against the patient.

In operation, the modularity of the patient support assembly **10** permits the assembly to be configured for imaging the back of a patient, the head of a patient, or both simultaneously. The first antenna array **12** is placed within the first recess **31** if back and/or spine imaging is desired and the head support **50** and second antenna array **14** is placed in the second recess **35** if head imaging is desired. If included, the corresponding preamplifier modules, **22** or **24**, are also inserted into the patient support assembly **10**, and a patient may be placed on the assembly **10** for imaging. Each of the antenna arrays, **12** or **14**, is configured to detect nuclear magnetic resonance (NMR) signals resulting from the magnetic field generated by the MRI scanner. The NMR signals are transferred from each antenna array, **12** or **14**, via the connecting cable to the corresponding preamplifier module, **22** or **24**, and subsequently to the MRI scanner to generate a desired image. Optionally, if the electronic circuits of the preamplifier modules, **22** and **24**, are incorporated into the respective antenna arrays, **12** and **14**, the connecting cables may be configured to interface directly with the MRI scanner.

If a patient's head is to be imaged, the arms **70** of the head support **50** may be rotated outward to an open position, see FIG. **9**, in order to receive the patient. This permits easy placement and alignment of the patient within the head support **50**, particularly if the patient requires medical incubation and ventilation. Once the patient has been positioned, the arms **70** may be rotated back to the home position, see FIG. **5**, to perform the imaging.

Rotation between the home position and the open position, or optionally, other angular positions, is facilitated by the pivoting assembly **100**. According to a first embodiment of the invention, one of the tabs **127** or recesses **128** on the clip **110**, along with a corresponding tab **144** or recess **146**

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on the cam **140**, defines the home position. For example, a tab **127** on the clip **110** engages a recess **146** on the cam **140** to positively retain the clip **110**, and consequently the arm **70** connected to the clip **110** in the home position. Rotating the arm **70** from the home position requires the arcuate members **120** on the clip **110** to be biased apart from each other such that the space between the ends of the arcuate members **120** is sufficient to permit the tab **127** to disengage from the recess **146**. Once the tab **127** has disengaged from the recess **146**, the arcuate members **120** return to an unbiased state to permit rotation of the arm **70**. Optionally, the cam **140** may be configured to such that the arcuate members **120** remain in a biased state requiring some force to rotate the arm **70**.

The arm **70** is then rotated to the open position. The open position may be defined by a second recess **146** on the cam **140**. The tab **127** may consequently engage the second recess **146** and positively retain the arm **70** in the open position. Optionally, multiple tabs **127** positioned along the inner periphery of the arcuate members **120** may define multiple angular positions at which the arms **70** may be aligned. As still another option, a stop **145** may protrude from the outer periphery of the cam **140**. The arm **70** is then permitted to rotate until the tab **127** on the clip **110** engages the stop **145** on the cam **140**.

According to another embodiment of the invention, the arm **70** may include a stop member **440** along the inner surface of each of the front face **82** and rear face **86** proximate to the first end **72** of the arm **70**. The stop member **440** includes a first end **442** which engages a complementary stop member mounted, for example and the face of the pivot mount **160**. Optionally, the first end **442** may engage the raised portion **65** of the base **52**, restricting further rotation toward the center of the patient support **50**, defining the home position. The stop member **440** also includes a second end **444** which engages a complementary stop member mounted, for example and the face of the pivot mount **160**. Optionally, the second end **444** engages the upper surface of the base **52**, restricting further rotation away from the center of the patient support **50**, defining the open position.

After positioning the patient, the arm **70** may be returned to the home position by reversing the steps described above. When the arm **70** returns to the home position, the arcuate members **120** on the clip **110** must again be biased apart from each other such that the space between the ends of the arcuate members **120** is sufficient to permit the tab **127** to engage the recess **146**. The action of the arcuate members **120** provides both a tactile sensation to the operator as well as an audible click such that the operator is aware that the arm **70** is in the home position. Similarly, the tactile sensation and/or the audible click may indicate alignment of the arm **70** in any of the other desired positions corresponding to the recesses **146** on the cam **140**. The force required to pivot the arm **70** may be varied by adjusting the length and/or width of the slot **132** in the clip **110** according to the requirements of each application.

According to another embodiment of the present invention, the hinge **200** permits torque adjustment for pivoting the arm **70** about the base **52**. The torque adjustment is achieved by inserting a tool into the recess **255** on the pin **250** and rotating the pin **250** into the first insert **230**. As the pin **250** is rotated, the threaded portion **256** of the pin **250** engages the threaded portion **241** of the second insert **240** to cause the pin **250** to move axially toward the first insert **230**. The flange **258** applies a force to the washers **260** and o-rings **270** located in the gap **216** between the first insert **230** and the second insert **240**. This force causes the o-ring **270** volume to displace toward the inner periphery of the

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chamber **210**. The increased interference between the o-rings **270** and the chamber **210** result in an increased torque to rotate the arm **70**. The radial torque can be adjusted by the end user or set to a preferred force during assembly.

It should be understood that the invention is not limited in its application to the details of construction and arrangements of the components set forth herein. The invention is capable of other embodiments and of being practiced or carried out in various ways. Variations and modifications of the foregoing are within the scope of the present invention. It also being understood that the invention disclosed and defined herein extends to all alternative combinations of two or more of the individual features mentioned or evident from the text and/or drawings. All of these different combinations constitute various alternative aspects of the present invention. The embodiments described herein explain the best modes known for practicing the invention and will enable others skilled in the art to utilize the invention.

We claim:

1. A patient support assembly for use with a magnetic resonance image (MRI) scanner, comprising:

a first patient support structure including:

a lower surface,

an upper surface opposite the lower surface, and

a plurality of side surfaces extending between the lower and upper surfaces, wherein the upper surface is curved to support a patient lying on the upper surface and wherein a recess is defined within a portion of the upper surface;

a first antenna array placed in the recess of the upper surface of the first patient support structure, the first antenna array having a padded outer surface configured to engage the patient lying on the upper surface;

a second patient support structure mounted to the upper surface of the first patient support structure and, movable between a first position and a second position to facilitate positioning the patient therein; and

a second antenna array secured within and movable with the second patient support structure, the second antenna array having a padded outer surface configured to engage the patient positioned within the second patient support structure.

2. The patient support assembly of claim 1 wherein: the first patient support assembly is configured to support a back of the patient,

the first antenna array is configured to detect nuclear magnetic resonance signals (NMR) from at least a portion of the back of the patient,

the second patient support assembly is configured to support a head of the patient, and

the second antenna array is configured to detect nuclear magnetic resonance signals (NMR) from at least a portion of the head of the patient.

3. The patient support assembly of claim 1 wherein the second patient support structure is mounted to the first patient support structure to align the second antenna array with the first antenna array to minimize interference between the first and second antenna arrays.

4. The patient support assembly of claim 1 wherein the second patient support, structure further comprises

a first arm having a first end pivotally mounted proximate to the first patient support structure, a second end opposite the first end, and a curved surface extending between the first and second ends; and

a second arm having a first end pivotally mounted proximate to the first patient support structure, a second end opposite the first end, and a curved surface extending

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between the first and second ends, wherein each of the first and second arms curve outward from each other defining, at least in part, a region to receive an anatomical region of the patient therebetween and wherein the second end of the first arm and the second end of the second arm are spaced apart such that the second patient support structure is open to an anterior portion of an anatomical region of the patient positioned between the first and second arms.

5. The patient support assembly of claim 4 wherein: the second antenna array is mounted on a flexible substrate, the second antenna array is retained along an inner periphery of the first and, second arms; a first end of the second antenna array extends beyond the second end of the first arm; and a second end of the second antenna array extends beyond the second end of the second arm, wherein the first and second ends of the second antenna array are configured to overlap over the anterior portion of the anatomical region positioned between the first and second arms.

6. The patient support assembly of claim 4 wherein the second patient support structure further comprises: a first friction mount pivotally mounting the first end of the first arm such that the first arm is retained at a plurality of intermediate positions between the first and second positions; and a second friction mount pivotally mounting the first end of the second arm such that the second arm is retained at a plurality of intermediate positions between the first and second positions.

7. The patient support assembly of claim 4 wherein the second patient support structure further comprises: a third arm having a first end pivotally connected to the second end of the first arm, a second end opposite the first end, and a curved surface extending between the first and second ends; and a fourth arm having a first end pivotally connected to the second end of the second arm, a second end opposite the first end, and a curved surface extending between the first and second ends.

8. A patient support assembly for use with a magnetic resonance image (MRI) scanner, comprising: a first patient support structure removably mounted to an imaging table for the MRI scanner, the first patient support structure including an upper surface configured to support a patient lying on the upper surface; a second patient support structure mounted to the upper surface of the first patient support structure, wherein the second patient support structure is movable between a first position and a second position to facilitate positioning the patient therein; and an antenna array retained by the second patient support structure, wherein: the antenna array slidably engages the second patient support structure as the second patient support structure moves between the first position and the second position, the second patient support structure opens the antenna array for positioning a patient within the antenna array in the first position, the second patient support structure positions the antenna array proximate an anatomical region of the patient for imaging in the second position; and the antenna array has a padded outer surface configured to engage the patient positioned within the second patient support structure.

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9. The patient support assembly of claim 8 wherein: the upper surface of the first patient support structure includes a recess defined within a portion of the upper surface, the antenna array is a first antenna array, the patient support assembly further comprises a second antenna array placed in the recess of the upper surface of the first patient support structure, and the second antenna array has a padded outer surface configured to engage the patient lying on the upper surface.

10. The patient support assembly of claim 8, wherein the second patient support structure includes a plurality of retaining channels, wherein each retaining channel engages the antenna array, allowing the antenna array to slide along the second patient support structure.

11. The patient support assembly of claim 10 wherein the second patient support structure includes: a first arm movable between the first position and the second position, wherein the first arm has: a first side, a second side opposite the first side, a first retaining channel, selected from the plurality of retaining channels, the first retaining channel mounted along the first side, and a second retaining channel, selected from the plurality of retaining channels, the second retaining channel mounted along the second side; and a second arm movable between the first position and the second position, wherein the second arm has: a first side, a second side opposite the first side, a first retaining channel, selected from the plurality of retaining channels, the first retaining channel mounted along the first side, and a second retaining channel, selected from the plurality of retaining channels, the second retaining channel mounted along the second side.

12. The patient support assembly of claim 11 wherein: the first arm of the second patient support structure includes a friction mount at a first end of the first arm such that the first arm is retained at a plurality of intermediate positions between the first and second positions; and the second arm of the second patient support structure includes a friction mount at a first end of the second arm such that the second arm is retained at a plurality of intermediate positions between the first and second positions.

13. The patient support assembly of claim 12 wherein the friction mount is selected from one of a friction hinge and a spring clip.

14. The patient support assembly of claim 12 wherein the second patient support structure further comprises: a third arm having a first end pivotally connected to a second end of the first arm, a second end opposite the first end, and a curved surface extending between the first and second ends; and a fourth arm having a first end pivotally connected to a second end of the second arm, a second end opposite the first end, and a curved surface extending between the first and second ends.

15. A patient support assembly for use with a magnetic resonance image (MRI) scanner, comprising: a first patient support structure removably mounted to an imaging table, for the MRI scanner, the first patient support structure including an upper surface configured

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to support a patient lying on the upper surface and a recess defined within a portion of the upper surface;
a second patient support structure including:
a base configured to be inserted into the recess of the first patient support structure,
a first arm pivotally connected to the base, and
a second arm pivotally connected to the base, wherein:
the first and second arms each move between a first position and a second position,
in the first position, the first and second arms are pivoted apart to facilitate positioning of the patient within the second patient support structure, and
in the second position, the first and second arms are pivoted toward the anatomy of the patient within the second patient support structure; and
an antenna array retained by the second patient support structure, wherein the antenna array slidably engages the first area and the second arm of the second patient support structure as the first arm and second arm are moved between the first position and the second position.

16. The patient support assembly of claim 15 wherein:
the antenna array is a first antenna array,
the recess in the upper surface of the first patient support structure is a first recess,
the upper surface of the first patient support structure includes a second recess defined within the upper surface, and

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the patient support assembly further comprises a second antenna array placed the second recess of the upper surface of the first patient support structure.

17. The patient support assembly of claim 16 wherein the second patient support structure is mounted to the first patient support structure to align the second antenna array with the first antenna array to minimize interference between the first and second antenna arrays.

18. The patient support assembly of claim 15 wherein:
the first arm of the second patient support structure includes a friction mount at a first end of the first arm such that the first arm is retained at a plurality of intermediate positions between the first and second positions; and
the second arm of the second, patient support structure includes a friction mount at a first end of the second arm such that the second arm is retained at a plurality of intermediate positions between the first and second positions.

19. The patient support assembly of claim 18 wherein the friction mount is selected from one of a friction hinge and a spring clip.

20. The patient support assembly of claim 15 wherein:
the antenna array includes a spine positioned between the first arm and the second ann when the antenna array is mounted on the second patient support structure, and
the base further includes a channel configuredconfigured, to receive the spine of the antenna array.

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