

**Head motion** greatly distorts the blood-oxygenation level dependent (BOLD) signal that underlies both task-driven functional MRI (fMRI) activations and resting-state functional connectivity MRI (rs-fcMRI) [1-7]. For rs-fcMRI data it has been shown that systematic between-group differences in “micro-movements” (> 0.2 mm) significantly distort BOLD data. Unwanted head motion during MRI scanning is significantly greater in infants, children and populations with neuropsychiatric disorders.

**Frame censoring** or removing individual BOLD images (‘frames’) distorted by head movement can successfully correct motion-distorted fMRI data. Post-hoc frame censoring for frame-wise displacements (FD) of  $\geq 0.2$  effectively corrects for movement-distortion and has become the new gold standard for rs-fcMRI studies. Depending on age and disease-status data loss rates from frame censoring can be above 50%. The recognition that frame censoring is absolutely necessary for collecting unbiased rs-fcMRI data has massively increased the cost of such research. Therefore, our site has adopted a novel approach that greatly reduces rs-fcMRI costs by using real-time head motion information to guide data collection - **Frame-wise Integrated Real-time MRI Monitor (FIRMM)**.

**FIRMM** is a new software suite that computes head motion (FD) in real-time, using frame alignment algorithms optimized for speed. FIRMM’s graphical user interface (GUI) displays real-time motion (FD) in a graph and also continuously updates summary statistics about data quality metrics, namely how many usable BOLD images (FD < 0.2) have already been collected. The GUI is easy to use and protects against operator errors (Figure 1). The implementation of real-time motion monitoring now allows us to collect rs-fcMRI in a more efficient and cost effective manner.

**Pilot studies of FIRMM** have demonstrated its utility for reducing scan times and associated costs (citation). For example, a new publication that has analyzed FD data from a sample of 1134 children and adolescents with and without developmental psychopathologies (i.e. ADHD and/or ASD) have been examined with FIRMM and show improved efficiency for collecting quality data.

Frame censoring, FIRMM and an adaptive head-movement driven fMRI data collection paradigm now allow us to collect the right amount of movement-free data for each subject, simultaneously boosting subject retention and lowering costs.

## References

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