

**SUBJECT: MRI SAFETY: HISTORY/SCREENING**

I. Policy

Prior to entering the MRI environment all patients, visitors, caregivers, and non-radiology hospital personnel are screened using the MR Safety Checklist (attached) which is completed and signed by that individual and then reviewed and signed by the technologist prior to performing an MR examination. Patient's completed checklist is then placed in their permanent medical record. For those patients not capable of completing the form, the referring physician or staff knowledgeable of the patient's health history will complete and sign the form.

All persons entering the magnetic field will be knowledgeable of the safety issues in the environment. MRI technologists are responsible for maintaining environmental safety in the magnetic field and authorized to control entry into the field. Safety Education is required for staff who provide patient care in the magnetic environment.

II. Procedures for all persons entering MRI field

1. Main door of MRI scan rooms will remain locked at all times. MRI staff will unlock only when allowing entry of patient/staff.
2. "MRI Safety Checklist" and "Important Information ---MRI Suite" brochure will be read and completed by all non MRI persons.
3. Patients and family members going into the room will complete the Safety Checklist, the information will be reviewed by the MRI technologist prior to gaining entry into the magnet room.

III. Non-Radiology Staff Requirements:

1. All non Radiology staff or equipment service personnel must fill out a VCUHS MRI Safety Check list. (Non-patient screening forms will be keep in MRI for one month, unless they answered they may be pregnant, advise about entry and keep for one year.)
2. Doctors and nurses must remove lab coats and stethoscopes.
3. Faculty and residents required to watch MRI safety video. Document attendance, filed in personnel record. Annual review and new hire view during orientation.
4. Schedule a yearly MRI safety in-service with the nurse anesthetists and anesthesiologists. Document attendance, filed in personnel record. Annual review and new hire view during orientation.

IV. Radiology Staff/Physicians/Residents:

1. All Radiology MRI Techs and Radiology Nurses must watch the MRI safety video. Document attendance with post-test, filed in the personnel record. Annual review and new hire view during orientation.

2. Radiology staff or MRI technologists will remove all non-MRI compatible O2 tanks from O2 tank rack each morning near MRI suites.
3. Doctors and nurses must remove lab coats and stethoscopes.
4. Radiology physicians and Radiology residents are required to watch MRI safety video. Document attendance with post-test filed in the personnel record. Annual review and new hire view during orientation.

V. Purpose

To ensure that all persons who enter the magnetic field are screened for safety risk factors and that patient safety screening is documented in the patient's medical record.

VI. Responsibility

Completing Screening Checklist:	(OutPatient) Patient, Family, referring physician and MRI Technologist (InPatient) Patient, Family, Staff (nurse/physician) and MRI Technologist
Final Clearance:	Radiologist