## MRRF Wayne State University

## Part V MR Safety Exam

## TOPIC TOUR MATERIAL REVIEWED BY DATE Patient Handling Procedures $\bullet$ Screening/Safety $\_$ • Review Screening Form \_\_\_ • Review Consent Form \_\_\_ • Review Permission Form \_\_\_ • Monitoring Equipment EKG\_ Blood Pressure \_ Pulse Oximeter \_\_\_\_ • Emergencies \_\_\_ • Code Procedures \_\_\_ TOPIC TRAINING MATERIAL REVIEWED BY DATE Scanning Procedures • Coil Selection/Set up \_\_\_\_ • Positioning \_\_\_\_ • Pulse Sequence Selection \_\_\_\_ • Imaging Options Selection \_\_\_\_ Scanner Startup/Shutdown \_\_\_\_\_ • Record Keeping/Documentation \_\_\_ Archiving/Deletion of Data \_\_\_\_\_\_ TOPIC Training/Tour Materials REVIEWED BY DATE Filming Procedures - Processor Startup/Shutdown $\_$ • Laser Camera Startup/Shutdown \_\_\_\_\_ • Filming Software \_\_\_ • Developing Films \_\_\_\_ Description of Training Accomplishments\* No. of Hrs. Reviewed By Date • Sequence Experience \_

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Sequence Design (IDEA)	
bequeine Besign (IBBI)	
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Reconstruction (ICE)	
Reconstruction (ICE)	<del></del>
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Detiont/Volunteen Hendling	-
Patient/Volunteer Handling	<del></del>
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Other molds confees soils ato	-
Other molds, surface coils, etc	<del></del>
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Goals	
* A total of at least 20 hours on the system is re	equired.
Documentation of Approval	
	:
	is approved to operate the
(Investigator's Name)	
magnet system indicated below located at the WSU MR Research Facility in Harper University Hospital	
Approval given by	<del>.</del>
Date:	
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