Purpose: The purpose of this policy is to inform the student on MRI Safety information.

Policy:

Magnetic Resonance Imaging (MRI) is a diagnostic tool that utilizes a powerful magnet and radio waves to generate images of the body. All students enrolled in the Radiography Program have the choice to observe in an MRI rotation.

The magnet used in MRI is always turned on and certain implanted devices are considered incompatible with this technology. Implanted devices like pacemakers, neurostimulators and some infusion pumps should not be exposed to the magnetic field. All students considering a career in medical imaging should be aware of the potential hazards of exposure to the MRI scanner and the need for careful metal screening. For safety reasons, all students will receive basic MRI safety training prior to entering clinical practicum. Additional information can be found at www.mrisafety.com.

MRI Metal Screening Form
Students who choose to rotate through MRI must complete an MRI Screening Form prior to beginning their scheduled MRI clinical rotation. Students that choose to participate in an MRI rotation, may be asked by a clinical facility if they have a history of metal implants. Certain implanted devices are contraindicated and should not be exposed to the magnetic field. Examples of these devices include:

- Pacemakers
- Neuro stimulators/Biostimulators
- Implanted Infusion Pumps/Pain pumps
- Aneurysm Clips
- Certain Stents, Coils and Filters
- Metallic Foreign Bodies
- Intraorbital Metallic Foreign Bodies

MRI Screening Policy
1. Students who choose to rotate through MRI must complete an MRI Screening Form prior to beginning their scheduled MRI clinical rotation.
2. Students who answer “yes” to any of the questions on the MRI Screening Form may be required to undergo additional screening to ensure their safety.
3. Additional screening may consist of further questions, documentation of metal implants, or making sure metal in the eyes was removed.
Please check the circle next to each statement you agree with:

- I have read the MRI Safety Policy, understand the policy and have been given the opportunity to ask questions.
- I understand that the MRI rotation is not a required rotation of the program.
- I have been counseled by program faculty about the dangers associated with the magnetic field used in MRI and understand the importance of metal screening.

Student Printed Name: ________________________________________________________
Student Signature: ____________________________________________________________
Date: _______________________________________________________________________
Faculty Signature: ____________________________________________________________