

ROBARTS RESEARCH INSTITUTE
CENTRE FOR FUNCTIONAL AND METABOLIC MAPPING:
3T/7T MRI FACILITY

Standard Operating Procedure Signature Sheet

Name: _____ **Date:** _____
Please Print *dd/mm/yy*

Investigator/Supervisor: _____

I have read and understood the SOP's listed below, and I agree to follow all policies and/or procedures outlined therein.

SOP#	SOP Name	Signature
100-01	MRI Facility Access Approval Policy	_____
110-01	MRI Facility Visitor Approval Policy	_____
115-01	Screening Volunteers for MR Procedures	_____
120-01	Safety and Operator Training	_____
130-01	New Protocols and Ethics	_____
200-01	General Safety	_____
210-01	Emergency Code Blue	_____
220-01	Emergency Fire	_____
230-01	Emergency Quench	_____
300-01	General Experimental	_____
310-01	3T MRI System Startup	_____
315-01	7T MRI System Startup	_____
320-01	3T MRI System Shutdown	_____
325-01	7T MRI System Shutdown	_____
330-01	3T MRI Black/Brown Out	_____
340-01	MRI Equipment Handling and Procedures	_____
350-01	Gradient Coil Change Over	_____
400-01	System Billing Guide and Standard Rates	_____
410-01	MRI Data Handling	_____
500-01	MRI Decontamination	_____
Appendix	Magnetic Resonance Environment Screening Form	_____