

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

SAFETY TRAINING CHECKLIST: LEVEL 2 MRI PERSONNEL

Name: _____ **Date:** _____

Investigator/Supervisor: _____

1. MRI Safety

- | | |
|--|--|
| <input type="checkbox"/> Zone Locations & Entry Requirements | <input type="checkbox"/> MR Environment Screening Form |
| <input type="checkbox"/> 5 Gauss Safety Line (Zone III) | <input type="checkbox"/> General Safety |

2. Walk-Thru

- | | |
|--|---|
| <p>a. Patient Prep Area</p> <ul style="list-style-type: none"><input type="checkbox"/> Code Blue Procedure<input type="checkbox"/> Crash Cart, AED, Ambu Bag<input type="checkbox"/> Link Release Button, Code Script<input type="checkbox"/> MRI-Safe Stretcher, Backboard <p>b. Control Rooms</p> <ul style="list-style-type: none"><input type="checkbox"/> MRI-Safe Fire Extinguishers<input type="checkbox"/> Scanner Consoles<input type="checkbox"/> Scanner Start-up & Shutdown<input type="checkbox"/> 3T/7T Procedures & Equipment <p>c. Equipment Room</p> <ul style="list-style-type: none"><input type="checkbox"/> 3T: Chiller, RF Amp Reset<input type="checkbox"/> 7T: RRI Shim PSU, Siemens GPA<input type="checkbox"/> Storage Areas | <p>d. Scanner Rooms</p> <ul style="list-style-type: none"><input type="checkbox"/> Coils & Coil Handling<input type="checkbox"/> Equipment & Equipment Handling<input type="checkbox"/> Manual Bed Release<input type="checkbox"/> Patient Safety Equipment (squeeze ball, intercom, bore camera, physiological monitoring equipment, etc.)<input type="checkbox"/> Phantoms <p>e. Other:</p> <ul style="list-style-type: none"><input type="checkbox"/> Peripheral Equipment: Trigger Box, Video Projector, Power Injector (<i>if applicable</i>)<input type="checkbox"/> Button Locations: Electrical shutdown, Quench, Door airlocks<input type="checkbox"/> Linens, Laundry, Keys, Earplugs |
|--|---|

3. Emergency Procedures

- Code Blue
- Fire
- Emergency Quench
- Black/Brown Out

4. Level 2 MRI Personnel

- Responsibilities & Activity Limitations
- Screening Procedures
- Facility Access Restrictions
- Visitor Guidelines & Supervision

5. Contact Information

- a. **CFMM Facility Manager:** Joe Gati x24231 jgati@robarts.ca
- b. **3T:** Kim Krueger x24263 kkrueger@robarts.ca
Oksana Opalevych x25204 oopalevych@robarts.ca
Scanner Console x24433
- c. **7T:** Joe Gati x24231 jgati@robarts.ca
Scanner Console x24477
- d. **Robarts Security:** x24041 security@robarts.ca
- e. **UWO Campus Police / Fire: 911**

Training Completed By:

Name of Trainer

Signature of Trainer

Signature of Trainee

Date