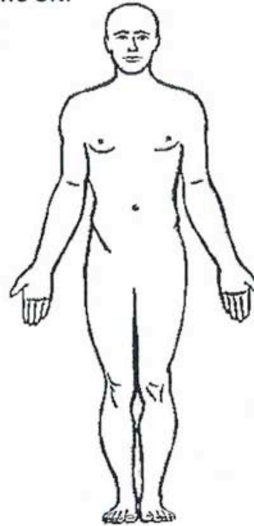
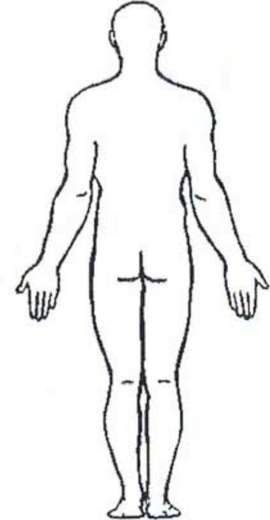
OUTPATIENTRADIOLOGY

Focused on Care, Driven by Excellence

Warning: Certain implants, devices, or objects may be hazardous to you and/or may interfere with the MR procedure. DO NOT ENTER the MR system room or MR environment if you have any question or concerning an implant, device or object. Consult the MRI technologist or radiologist BEFORE entering the MR system room. **The MR system is ALWAYS ON.**

Yes	No	Item
☐ Yes	☐ No	Aneurysm clip(s)
☐ Yes	☐ No	Cardiac pacemaker
☐ Yes	☐ No	Implanted cardioverter defibrillator
☐ Yes	☐ No	Electronic implant or device
☐ Yes	☐ No	Magnetically-activated implant or device
☐ Yes	☐ No	Neurostimulation system
☐ Yes	☐ No	Spinal cord stimulator
☐ Yes	☐ No	Internal electrodes or wires
☐ Yes	☐ No	Bone growth/bone fusion stimulator
☐ Yes	☐ No	Cochlear, otologic or other ear implant
☐ Yes	☐ No	Insulin or other infusion pump
☐ Yes	☐ No	Implanted drug infusion device
☐ Yes	☐ No	Any type of prosthesis (eye, penile, etc.)
☐ Yes	☐ No	Eyelid spring or wire
☐ Yes	☐ No	Artificial or prosthetic limb
☐ Yes	☐ No	Metallic stent, filter or coil
☐ Yes	☐ No	Shunt (spinal or intraventicular)
☐ Yes	☐ No	Vascular access port and/or catheter
☐ Yes	☐ No	Swan-Ganz or thermodilution catheter
☐ Yes	☐ No	Medication patch (nicotine, nitroglycerine)
☐ Yes	☐ No	Any metallic fragment or foreign
☐ Yes	☐ No	Tissue expander (e.g. breast)
☐ Yes	☐ No	Dentures or partial plates
☐ Yes	☐ No	Tattoo or permanent makeup
☐ Yes	☐ No	Body piercing jewelry
☐ Yes	☐ No	Hearing aid
☐ Yes	☐ No	Other implant____________________
☐ Yes	☐ No	Breathing problem or motion disorder
☐ Yes	☐ No	Claustrophobia





IMPORTANT INSTRUCTIONS

Please mark on the figure below the location of any implant or metal inside of or on your body.

Before entering the MR environment or MR system room, you must remove ALL metallic objects including hearing aids, dentures, partial plates, keys, beeper, cell phone, eyeglasses, hair pins, barrettes, jewelry, body piercing jewelry, watch, safety pins, paperclips, money clip, credit cards, bank cards magnetic strip cards, coins, pens, pocket knife, nail clipper, tools, clothing with metal fasteners, and clothing with metallic threads. **Please consult MRI Technologist if you have any question or concern BEFORE you enter the MR system room.**

Note: You may be advised or required to wear earplugs or other hearing protection during the MR procedure to prevent possible problems or hazards related to acoustic noise.

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form.

Signature of person completing form: ______________________________ Date: ______________________

Form completed by: ___patient ___relative ___other If other, relationship to patient: ______________________

Form information reviewed by: ______________________________ Signature: ______________________