(A) Policy Statement

It is the policy of the MRI Department to screen patients for any possible metal objects in their body, either by accidental or medically necessary means.

(B) Purpose of Policy

To protect against any harm coming to patients during the MRI procedure.

(C) Procedure

1. Prior to the MRI procedure, all patients must complete the Screening Form.
   a. Inpatients: With their nurse present, and asking the questions. If the patient is unable to complete the form, the legal guardian along with the patient’s nurse will complete the form. The form is then faxed to the MRI department for review by the MRI staff prior to sending for the patient. The MRI staff will repeat the questions on the screening form to the patient, if they are able to answer. Any discrepancies in the answers will be followed up by the tech, and resolved prior to the scan, per Policy 3364-135-064-MRI Contraindications.
   b. Outpatients: The MRI coordinator/tech will interview all outpatients scheduled for an MRI, and read the questions to the patient. If they answer ‘yes’ to any questions, follow up will occur by securing specific information about the implant. See Policy 3364-135-064-MRI Contraindications.
   c. Inpatients and Outpatients: All patients will pass through the metal detector prior to entering the Magnet room. If detector alerts to the presence of any metal, further steps will be taken to identify the source.

2. All patients will change into hospital issued gowns and/or pants prior to entering the Magnet Room.