

## **Subject Screening**

Although MR research is safe for most volunteers, there are certain subjects that MRI may pose unnecessary risk. Most contraindications that would rule out a subject involve metallic implants and foreign bodies. However, there are several other concerns of which investigators should be aware.

**\*\*\*NOTE\*\*\*** If **ANY** question exists regarding a subject's MR compatibility you **MUST** contact Terry Sackett or the subject **MUST NOT BE SCANNED!**

### **Screening and consent forms:**

In addition to screening subjects thoroughly before scheduling them for an MRI, everyone must fill out and sign all appropriate Consent and Screening Forms prior to entering the magnet room. In the rare case of a person accompanying the subject in the magnet room, the visitor must fill out and sign a screening form prior to entering the scan room.

### **Contraindications:**

- ⇒ Cardiac pacemaker
- ⇒ Surgical aneurysm clips
- ⇒ Neurostimulator
- ⇒ Implanted pumps
- ⇒ Metal fragments in the body or eyes
- ⇒ Injury to eyes involving metal
- ⇒ Pregnancy
- ⇒ Skin patches such as contraceptive and nicotine (rule out if subject can not remove patch; foil WILL heat up)
- ⇒ Colored contact lenses should not be worn in scanner (there can be metal in the coloring)
- ⇒ Certain cochlear or inner ear implants
- ⇒ Permanent eyeliner
- ⇒ Hair or skin products with iron oxide or glitter
- ⇒ Weight over 550 lbs, also consider body habitus

## **Conditions that might rule out a subject:**

- ⇒ Metal rods, plates or screws in body or mouth
- ⇒ Previous surgery (if metal left in body)
- ⇒ Hearing aid (remove before scanning)
- ⇒ Dentures (remove before scanning)
- ⇒ Prosthetic heart valve
- ⇒ Braces (causes severe artifact)
- ⇒ Hair extensions (most are connected with wire, causes severe artifact)
- ⇒ Tattoos (ink can contain metal)

## **Other considerations:**

- ⇒ Claustrophobia
- ⇒ Physical discomfort (body habitus, back or neck pain)
- ⇒ Movement disorders (ticks, restless legs, etc.)
- ⇒ Vision/hearing problems
- ⇒ Problems using response devices

**\*\*\*\*\*NOTE\*\*\*\*\*** If you have any doubts whether a subject is MRI compatible, **DO NOT SCAN!** Contact Terry Sackett for clearance.

## Dartmouth Brain Imaging Center 3T MRI Subject Information and Safety Screening Sheet

Subject Name \_\_\_\_\_ DartmouthID# \_\_\_\_\_

Birth Date \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_

Subject Email \_\_\_\_\_ Phone # \_\_\_\_\_

Gender \_\_\_\_\_ Ethnicity \_\_\_\_\_

Have you ever been a machinist, welder or metal worker?	Y	N
- If yes, did you wear safety glasses at all times?	Y	N
Have you ever had a piece of metal in your eyes?	Y	N
Do you have a pacemaker or pacemaker wires?	Y	N
Do you have an aneurysm clip?	Y	N
Do you have a neurostimulator (tens-unit)?	Y	N
Do you have any shrapnel in your body?	Y	N
Is there a chance you could be pregnant?	Y	N
Are you claustrophobic?	Y	N
Are you wearing colored contacts?	Y	N
Do you have dentures, braces or a non-removable retainer?	Y	N
Are you wearing a skin patch (Nicotine, contraceptive, etc.)?	Y	N
Do you have a hearing aid?	Y	N
Have you had a fractured bone treated with metal rods, plates, or screws?	Y	N
Have you had any major surgery?	Y	N
- If yes, please describe _____		

***If ANY of the above are answered yes, the study should not be performed until it is reviewed by the imaging center technologist.***

Subject cleared to be scanned by Terry Sackett RT(R)(CT)(MR): Y N

Investigator Initials: \_\_\_\_\_

### DO NOT ENTER THE SCAN ROOM WITH ANY OF THESE ITEMS

Skin Patches (Nicotine, contraceptive, etc.) Credit/Bank Cards Pens/Pencils Hairpins/Barrettes Jewelry/Piercings/Subcutaneous Accessories Keys Wigs/Hairpiece/Extensions Underwire Bra Clothing with silver or gold threading (e.g. Lululemon silverescent)	Belts/Buckles Wallet/Money Clips Coins Safety Pins Watch Pocket Knife Eyeliner Tattoo Magnetic nail polish Hair or skin products with iron oxide or glitter Please inform the researcher of any tattoos
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**\*\*\*\* ALL VOLUNTEERS MUST WEAR HEARING PROTECTION DURING ALL SCANS \*\*\*\***

Subject Signature \_\_\_\_\_

Investigator Signature \_\_\_\_\_