

Advanced Imaging Research Center MRI Worker Safety Questionnaire

Name: _____ Date: _____ Badge Number: _____
 Email: _____ Institution: _____ (EIN): _____
 P.I.: _____ Department: _____

An MRI instrument produces a strong magnetic field that is ALWAYS ON. This strong magnetic field has the potential to harm individuals with certain medical implants and/or conditions. The introduction of certain metallic objects into the magnet area also has the potential to harm individuals and equipment. The purpose of this screening form is to identify people at increased risk for exposure to static magnetic fields. Please review the questions below and answer them completely. If you do not understand any question, please ask for assistance.

1. Do you have a pacemaker, wires, stents, defibrillator, or implanted heart valves? Yes ☐ No ☐ Don't Know ☐
2. Have you ever had any head surgery requiring aneurysm clips? Yes ☐ No ☐ Don't Know ☐
3. Have you ever had ANY other surgeries? Yes ☐ No ☐ Don't Know ☐
 If YES,
 - A. Do you have any metal pin, joint, prosthesis or metallic objects in, or attached to, your body? Yes ☐ No ☐ Don't Know ☐
 - B. Do you have any type of electric device (stimulator or pump) implanted in your body? Yes ☐ No ☐ Don't Know ☐
5. Have you ever been exposed to metal fragments that could be lodged in your eyes or body? Yes ☐ No ☐ Don't Know ☐
6. Do you have a hearing aid, middle/inner ear prosthesis or dentures? Yes ☐ No ☐ Don't Know ☐
7. Are you pregnant, or is it possible that you might be pregnant? Yes ☐ No ☐ Don't Know ☐
8. Is there any other item or device you believe could affect you working in a strong magnetic field environment? Yes ☐ No ☐ Don't Know ☐
7. Do you have any concern working with MRI? If yes, please describe: Yes ☐ No ☐ Don't Know ☐
8. Do you require un-escorted access to the AIRC? 3T BRB ☐ 7T BRB ☐ 12T BRB ☐ ONPRC 3T ☐
9. Do you plan on operating an MRI scanner within the AIRC? Yes ☐ No ☐
10. Do you require access to the AIRC calendars? 3T BRB ☐ 7T BRB ☐ 12T BRB ☐ ONPRC 3T ☐

I understand that I am NOT to enter any AIRC magnet area without AIRC approval. I will NOT bring any metallic objects into the MRI area. I will remove my wallet, watch, jewelry, electronics, and other materials from my person before I enter the MRI area. If I am the responsible operator, I will maintain control of the MRI area at all times and will NOT allow individuals access without AIRC approval.

User Signature

AIRC Staff Signature