



Alberta Children's Hospital – Application for and Verification of Level 1 Training

Applicant: _____

- Trainee
- Staff
- Faculty

Department: _____

Email: _____

I wish to apply to be trained so that I can access the 3T GE MR Diagnostic Scanner at the Alberta Children's Hospital (**Level 1**). I understand that this training and the resulting scanner access is a privilege that can be revoked by the Centre or by AHS for failure to follow appropriate policy and safety procedures. I understand that I will need to complete annual retraining in order for this approval to remain valid. I understand that this training does not allow me to scan without an approved scanner operator also being present.

Applicant: _____

Signature/Date: _____

As Supervisor, I support the application of _____ for Level 1 training. I understand and agree to the risks associated with this individual upon successful completion of training.

Supervisor: _____

Signature/Date: _____

Upon successful completion of Level 1 Training and final approval by Perry Radau or Signe Bray, the original forms are to be provided to Cathy Wall (cathy.wall@ahs.ca) in the Diagnostic Imaging department.



Level 1 – 3T MR Orientation Checklist

Applicant: _____ **Supervisor:** _____

Instructor: _____ **Date:** _____

RUNNING A STUDY

- Procedures for scheduling / booking
- How to screen a volunteer
- How to consent a volunteer
- How to prepare a gown or screen clothing for a volunteer
- “Experimenter” and “Operator” responsibilities during a scan session
- Procedures for patient privacy
- Incidental finding policy

ORIENTATION

- Orientation to scan suite (coils, table, phantoms)
- Regulations for moving equipment in the room
- Orientation to fMRI equipment (projector, Lumina, trigger cable, glasses)

SAFETY

- Watch safety video
- Become familiar with the BIG RED buttons
- Review the ‘Patient Event’ flowchart
- Code calling orientation
- Docking and undocking the table

TROUBLESHOOTING

- Know who to contact in event of equipment malfunction
- Advanced troubleshooting is the responsibility of Level-2 personnel / MRI Tech

When you have obtained final approval for completion of this checklist, you will be given access to the 3T scanner.

Applicant Signature: _____ **Date:** _____

Final Approval (Approver/Date): _____