

 <b>University Health™</b>	<b>Policy #: Rad Proc 14. 4. 1</b>
<b>SUBJECT: MRI – Screening Unresponsive or Unreliable Patients</b>	<b>Effective: 10/1/2013</b> <b>Revised: 2/2015: 2/2017</b>
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**PURPOSE:** Screening of patient for whom an MR procedure is deemed clinically necessary, but who are unconscious or unresponsive, who cannot provide their own reliable histories regarding prior possible exposure to surgery, trauma, or metallic foreign objects, and for whom such histories cannot be reliably obtained from others.

**POLICY:**

When possible, the procedure should be postponed until a reliable history can be obtained. If the MR procedure cannot wait until a reliable history can be obtained.

1. MR medical director or designated Radiologist shall physically examine the patient. All area of scars or deformities that might be automatically indicative of an implant, such as on chest or spine region, and whose origins are unknown should be subject to plain-film radiography (if plain films, CT, or MR studies of the area have not been obtained during current admission). The investigation is specifically aimed at discovering embedded or implanted metallic foreign objects.
2. All patients should undergo plain films of the skull or orbits and chest to exclude metallic foreign objects (if recently obtained plain films, CT or MR studies of the area are not available).
3. After careful evaluation of the plain films the MR medical director or designated Radiologist will make the final decision of whether to scan the patient or not.
4. The decision to scan the patient must be clearly documented on the medical record.
5. Monitoring patients in the MR scanner is sometimes necessary. The potential for thermal injury from excessive RF power deposition exist. Sedated, anesthetized, or unconscious patients may not be able to express symptoms of such injury. Patients who require ECG monitoring and are unconscious should be examined after each imaging sequence, with potential repositioning of the ECG leads and any other electrically conductive material that touches the patient during the scan. If the pulse oximeter also monitors the heart rate, then EXG leads may not be necessary.