

Neuroscience and Cognitive Science Program (NACS)  
Maryland Neuroimaging Center (MNC)

Magnetic Resonance Imaging Laboratory  
Standard Operating Procedures

Version 1.6, February 2015

Maryland Neuroimaging Center  
University of Maryland  
Avrum Gudelsky Building, #795  
8077 Greenmead Drive  
College Park, MD 20742

## Table of Contents

Introduction	
Oversight of the Image Research Facility	3
MRI Facility Personnel	4
MNC Researcher	6
Facility Description	7
MNC Zoning and Access	12
Safety Procedures	13
Safety Screening for individuals entering Zone 4 (Magnet Room)	17
Emergency Procedures	19
Training for Operators of the MRI Instrument	21
<u>Appendices and Filename:</u>	
Appendix A:	
A-1: Documentation of Safety Training Level 1 MR Personal	22
A-2: Documentation of Safety Training Level 2 MR Personnel	23
A-3: Documentation of Operator Training of Siemens Magnetom	24
Appendix B: MNC Emergency Contacts	25
Appendix C: MR Safety Screening Protocol and Forms	26
Appendix D: Protocol for Ensuring MR Safety and Screening	28
Appendix E: Response Plans for Specific Emergencies	31
Appendix F: MNC Information Handout for Emergency (Fire/Rescue) Personnel	33
Appendix G: MNC Internal Operation Procedures	37
Appendix H: Incidental Findings	40

## Introduction

These are the Standard Operating Procedures (SOPs) for the Magnetic Resonance Imaging (MRI) facility at the Maryland Neuroimaging Center (MNC), which is part of the Neuroscience and Cognitive Science Program (NACS) at UMD. These SOPs were developed based on guidelines from the American College of Radiology (ACR)<sup>1,2</sup>. In some cases, ACR guidelines were used verbatim, and in other cases, paraphrased. Guidelines related to the specific characteristics and operations of the MNC MRI facility were developed in-house based on the intent of the ACR guidelines. Note that the MRI facility is one component of the MNC, which will include resources for multiple imaging techniques, including EEG and MEG.

These SOPs will be reviewed annually and updated as needed. Significant procedural updates related to safety and training must be made in consultation with UMD's Department of Environmental Safety, and approved by the Institutional Review Board. The MNC Director is Dr. Luiz Pessoa. Questions regarding facility operations, or these SOPs, should be directed to Dr. Pessoa or Sandy Collier, Manager, MNC.

MRI Facility Address and Phone Number Address:

Maryland Neuroimaging Center  
Avrum Gudelsky Building, #795  
University of Maryland  
8077 Greenmead Drive  
College Park, MD 20742  
301-405-2092 (Main Reception)

301-405-4125 (Sandy Collier)

301-405-2423 (Luiz Pessoa)

Fax: 301-314-0231

### **Oversight of the MNC is the responsibility of the MNC Director Dr. Luiz Pessoa.**

2.1 Role of the MNC Executive Committee: The MNC Executive Committee is responsible to help support the MNC Director as requested for the oversight of MNC operations, including facility operations, policy development and implementation, staff hiring and management, budgeting, and safety assurance and research compliance. The MNC Executive Committee reports to the Dean, College of Behavioral and Social Sciences.

<sup>1</sup> ACR White Paper on Magnetic Resonance (MR) Safety, Combined papers of 2002 and 2004, available at:

[http://www.acr.org/SecondaryMainMenuCategories/quality\\_safety/guidelines/WhitePaperonMRSafetyCombinedPapersof2002and2004Doc11.aspx](http://www.acr.org/SecondaryMainMenuCategories/quality_safety/guidelines/WhitePaperonMRSafetyCombinedPapersof2002and2004Doc11.aspx)

<sup>2</sup> ACR Guidance Document for Safe MR Practices: 2007, available at:

[http://www.acr.org/SecondaryMainMenuCategories/quality\\_safety/MRSafety/safe\\_mr07.aspx](http://www.acr.org/SecondaryMainMenuCategories/quality_safety/MRSafety/safe_mr07.aspx)

2.2 Role of the MNC Internal Advisory Board: The MNC Internal Advisory Board assists the MNC Director with respect to all MNC facility operations, policy development and implementation, staff hiring and management, and safety assurance. It also advises the MNC on its service to the university. Members of the MNC Internal Advisory Board are appointed by the MNC Director. There are no set terms of service, but individuals who are major users of the MNC or are chairs of department are likely to be appointed to the Board. This allows their needs and concerns within the facility to be well represented; in addition, their expertise can be used to shape and further the goals of the MNC. The MNC Internal Advisory Board Members and contact information are listed in Appendix A.

## **MRI Facility Personnel**

### Designation and Description of Magnetic Resonance (MR) Personnel and Non-MR Personnel

3.1 MNC Personnel include MR Personnel, who perform activities within the MNC (such as the MR physicist), and Non-MR Personnel, who perform other work associated with the MNC, such as an administrative assistant, as well as personnel whose research involves other techniques (e.g., MEG).

3.2 All MR Personnel must complete at least one MRI safety lecture or prerecorded presentation approved by the MNC Director. Attendance must be repeated annually and documented to confirm these ongoing safety certifications. These individuals are referred to as MR Personnel, of which there are two levels.

3.3 It is the responsibility of the MNC Director to determine which MR Personnel designations individuals may have.

3.4 A current list of MR Personnel, their levels, and the due date of their next safety training/update must be maintained within the MR facility at all times.

#### 3.5 Level 1 MR Personnel

3.5.1 Definition. Level 1 MR Personnel are individuals who have had MR safety training as approved by the MNC Executive Committee. The designation of Level 1 MR Personnel typically applies to undergraduate and graduate research assistants, post-doctoral fellows, and research assistants from individual laboratories.

3.5.2 Facility access allowance. Level 1 MR Personnel are permitted to be in Zones 1 and 2 of the MNC. Level 1 MR Personnel may have keycard access to Zone 1 and Zone 2 of the MNC facility and are permitted to be there alone. They are not permitted to be in Zone 3 unless they are under the supervision of a Level 2 MR personnel member.

3.5.3 Documentation of Level 1 MR Personnel qualification. Documentation of Level 1 MR Personnel qualification must be recorded on the appropriate form (see Appendix B), updated at least annually, and must be signed by the MNC Director. Records of documentation must be maintained within the MNC.

#### 3.6 Level 2 MR Personnel

3.6.1 Definition. Level 2 MR Personnel are individuals designated as sufficiently trained to be in the MNC MRI facility (i.e., Zones 3 and 4) on their own (except when a participant is being scanned, during which time two persons are required), and to supervise Level 1 MR Personnel and visitors in the MRI facility. They are also sufficiently trained to oversee the MR screening process and give final approval for an individual to enter the magnet room and undergo imaging. Generally, these are individuals with greater experience in the MR environment than Level 1 MR Personnel. These individuals must demonstrate knowledge of the broad aspects of MR safety issues, including, for example, issues related to the potential for thermal loading or burns, and direct neuromuscular excitation from rapidly changing gradients. They must also demonstrate specific knowledge regarding the safety procedures within the MNC.

3.6.2 Facility access allowance. Level 2 MR Personnel are permitted to be in the MRI facility alone and to supervise Level 1 MR Personnel when they are in Zone 3 or Zone 4 of the facility. Level 2 MR Personnel may be permitted keycard access Zone 3.

3.6.3 Documentation of Level 2 MR Personnel qualification. Documentation of Level 2 MR Personnel qualification must be recorded on the appropriate form (see Appendix B), updated annually, and must be signed by the MNC Director. Records of documentation must be maintained within the MNC.

### 3.7 MRI Operators

3.7.1 Definition. MRI Operators are those Level 2 MR Personnel who have undergone training to operate the Siemens 3T TIM Trio System and who have been approved as MRI facility Operators by a current MRI facility Operator, the MNC sub-committee on Safety and Compliance, and the MNC Director.

3.7.2 Facility access allowance. As Level 2 MR Personnel, MRI Operators are permitted to be in the MNC alone (except when a participant is being scanned, during which time two persons are required) and to supervise Level 1 MR Personnel when they are in the facility. Level 2 MR Personnel are permitted keycard access to the MNC.

3.7.3 Documentation of MRI Operator qualification. Documentation of MRI Operator qualification must be recorded on the appropriate form (see Appendix B), updated at least annually, and must be signed by the MNC Director. Records of documentation must be maintained within the MNC.

3.7.4 Training for MR Operators is described in Section 10.

## **MNC Researcher**

4.1.1 Definition. MNC Researchers are individuals who have had basic training concerning the use of the MNC facility as approved by the MNC Director. The designation of MNC Researcher typically applies to users of the MNC who use techniques other than MRI. These researchers need to have basic safety training so as to know general safety issues associated with the use of the MNC. But, because they are not engaged in MRI research, MNC Researchers are not required to have the type of knowledge required of Level 1 or Level 2 MR Personnel.

4.1.2 Facility access allowance. MNC Researchers are permitted to be in Zones 1 and 2 of the MNC. They are not permitted to be in Zone 3 unless they are under the supervision of a Level 2 MR personnel member.

4.2.3 Documentation of MNC Researcher qualification. Documentation of MNC Researcher qualification must be recorded on the appropriate form (see Appendix B), updated at least annually, and must be signed by the MNC Director. Records of documentation must be maintained within the MNC.

### **4.2 Non-MR Personnel**

4.2.1 Definition. Non-MR Personnel include individuals who are associated with the MNC but who do not work within the MNC itself. These include administrative assistants, research assistants, and others who work with the MNC, but have not undergone safety training. Non-MR Personnel must be escorted within the MNC by a Level 2 MR Personnel. These individuals will not enter the magnet room (room 1157A) without safety screening.

4.2.2 Facility access allowance. Non-MR Personnel are not permitted to be in the MNC alone or to have keycard access to the MNC.

4.2.3 Documentation is not required for Non-MR Personnel.

## Facility Description

5.1 The MNC is located in the Avrum Gudelsky Building #795 off of Greenmead Drive, on the University of Maryland College Park Campus. It consists of a total of approximately 6000 sq feet including office suites, workspace, and conference rooms. It will also include a behavioral testing suite, EEG test suite, MEG facility, and training and classroom space.

5.2 There are four key-card accessible doors in the MNC. One set at the front door to the building. One set at the entrance from the main reception area to corridor 1198, Zone 1. One at the entrance to the corridor that houses the MR Reception area, corridor 1197 and the fourth at the entrance to room 1157. Zone 3 and Zone 4 houses rooms 1157 (control room) and 1157a (MRI machine). This part of the MNC has key-card accessible locked entrances from the MNC hallway (corridor 1197). This latter doorway is at the end of a ramped corridor (Room 1198), part of Zone 2, which has several doors into other parts of the MNC. Key card-access to this part of the MNC is possible for Level 2 MR Personnel. The room descriptions for this restricted access part of the MNC appear below:

Suite 1161 is the MR Facility Reception area including (Zone 2):

- Room 1161A: Dressing/Changing room
- Room 1161B: Mock Scanner Room
- Room 1161C: Interview and Testing/Training Room
- Room 1161D: Waiting Room
- Room 1161E: Storage Closet
- Room 1159: Restroom
- Room 1153: MRI equipment room.

Suite 1157 includes (Zone 3 and 4):

The Control room for the MRI scanner is 1157, Zone 3. Room 1157A holds the MRI instrument room (Siemens 3 Tesla MRI scanner), Zone 4.

5.3 The MR Physicist has an office in 1104C. The MR Technologist has an office in 1104E. The Manager has an office in 1104A. These are in zone 1.

5.4 Room 1107 is the Neuroimaging Data Analysis Lab which consists of a data analysis meeting space. This room is in Zone 1.

5.5 Room 1111 is home to the MNC faculty. This room is in Zone 1.

5.6 Suite 1115 (1115, 1115a and 1115b) is the Behavioral Testing/EEG suite. This area will house the EEG system. MNC facility users who acquire EEG data will have access to this room, as approved by the MNC Director and the Safety and Compliance Committee. This room is in Zone 1.

5.7 Room 1120 is the Center for Advanced Study of Language (CASL) Lab. This space is restricted to CASL personnel only. This room is in Zone 2.

5.8 Schematic diagrams of the MNC: The location of the facility in the Avrum Gudelsky Building, #795, and the layout of the MNCs MR Suite and other components are illustrated on the next page:

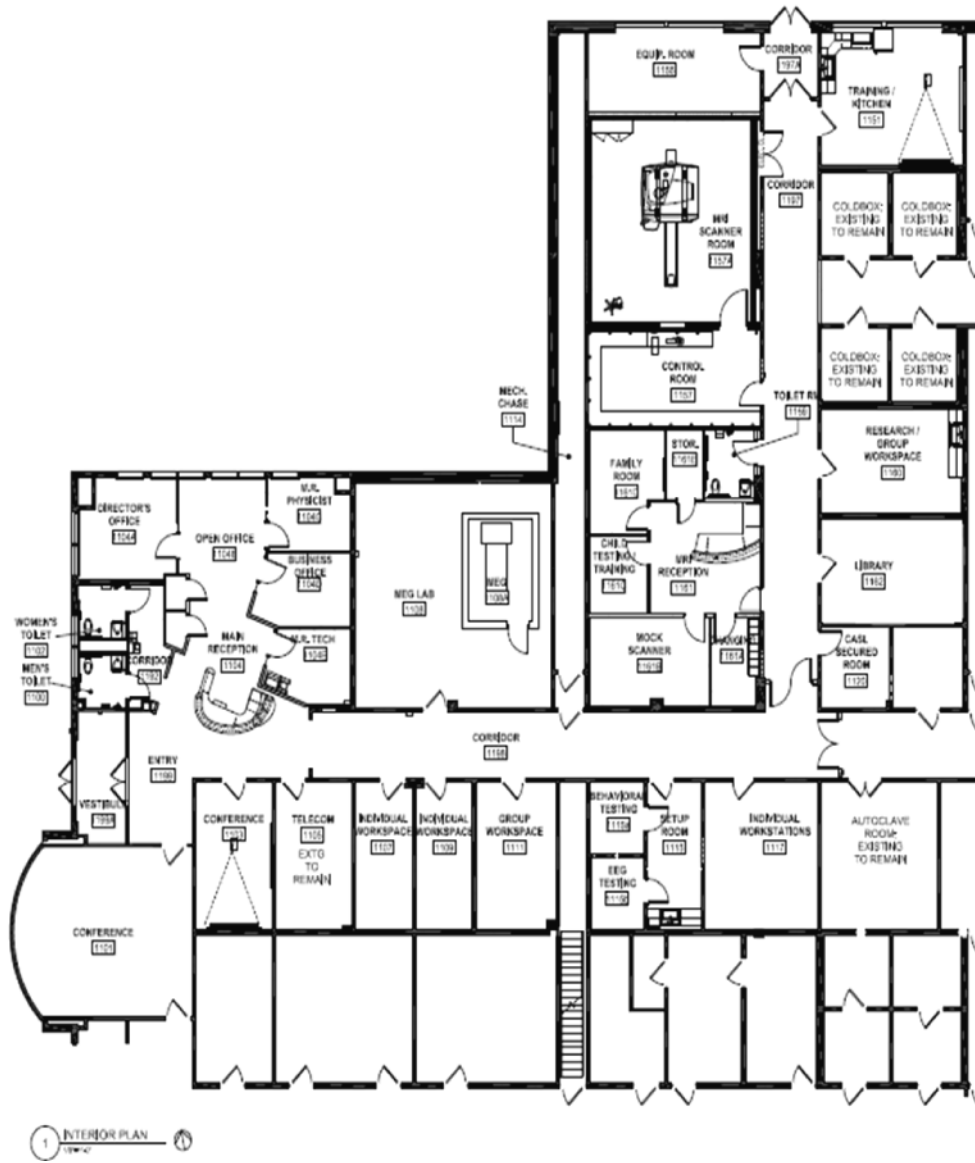
View of Outside of Avrum Gudelsky Building, #795 & Maryland Neuroimaging Center is left half of Building







# The Maryland Neuroimaging Center





## **MNC Zoning and Access**

- 6.1 Zoning. For the purpose of safety, the MNC is considered to have four zones (as specified by the ACR guidelines).
- 6.1.1 Zone 1 is the Main Reception and front office area of the MNC including entry 1199 and rooms 1104A-1104E. Zone 1 includes corridor 1198 directly outside the Main Reception and Front office area of the MNC and includes rooms 1107 (data analysis room), 1108 (MEG lab), 1109 (MR technologist office), 1111 (MNC faculty office), 1117 (individual workspace), and the EEG/ Behavioral testing lab in rooms 1115, 1115a, and 1115b.
- 6.1.2 Zone 2 begins at corridor 1197 and includes the MR Reception area 1161 -1161E and the restroom 1159, training room 1151, lab rooms 1160 and 1164, library 1162, and the CASL Room, 1120
- 6.1.3 Zone 3 is the control room 1157 and the equipment room 1153.
- 6.1.4 Zone 4 is Room 1157a MRI magnet room.
- 6.2 Unescorted access: To have unescorted access to Zone 3, individuals must be Level 2 MR personnel. To have unescorted access to Zone 2, individuals must be Level 1 MR personnel or certified MNC Researchers.
- 6.2.1 MNC Rooms 1157, 1157A and 1153 are physically restricted from general public access using door locks which can be accessed by keycard or a key. The outer door is spring-loaded and closes automatically after entry.
- 6.2.2 The only individuals with unrestricted access by key to the MNC are: the MNC Director, the MRI Physicist, the MNC Manager, and MR technologist.
- 6.2.3 Level 2 MRI personnel may have keycard access to the entire MNC MRI facility, except for room 1153 (the equipment room).

## Safety Procedures

(Developed based on ACR White Papers 2002, 2004 & MR Safety Guidelines 2007)

### 7.1 Pregnancy-Related Issues

In keeping with current ACR guidelines, pregnant MR personnel are permitted to continue working in all areas of the MNC throughout their pregnancies. Acceptable activities include, but are not limited to, positioning individuals within the scanner, imaging, entering Zone 4 in the case of an emergency. Pregnant MR personnel should NOT be present within Zone 4 while imaging is in progress.

7.1.1 ACR guidelines permit pregnant women to undergo MR imaging. However, pregnant women will NOT undergo imaging at the MNC.

### 7.2 Safety concerns related to children

7.2.1 Although permitted by ACR guidelines, children who are research volunteers will not be sedated for MRI at the MNC.

7.2.2 Children should be either gowned before entering Zone 4, or their pockets should be checked by MR personnel, either manually or with a metal detector, prior to entering Zone 4. Prior to bringing personal objects such as stuffed toys into Zone 4, these objects must be checked for ferromagnetic content with the metal detector.

7.2.3 Because children may be unreliable historians, children must be screened in conjunction with their parents or guardians. Some older children may have tattoos or ferromagnetic jewelry or makeup that their parents do not know about, and therefore, to get reliable reports of these objects they should be questioned separately from parents. As a rough guideline, children aged 10–17 will be screened both with their parents or guardians and separately to ensure an accurate account of safety prior to entering Zone 4. Children younger than 10 years old will be screened with their parents or guardians.

### 7.3 Auditory considerations

7.3.1 Research participants, patients, and anyone accompanying these individuals in Zone 4 during imaging must wear hearing protection. These must be in place prior to initiating any MR sequences.

### 7.4 Thermal issues

7.4.1 General issues: The body temperature increases if the participant absorbs more energy per unit of time than can be dissipated through thermoregulation (increased perspiration and blood flow). During the MR examination, patients may experience heat sensations on the skin and may begin to perspire. Their pulse rates may increase as well. The effects vary from patient to patient. The intensity of these effects depends on the measurement program selected. Following the examination, the body will cool off and the pulse rate will return to normal. The increase in core body temperature is usually well below 1 degree during the course of the MR examination if the Specific Absorption Rate limits are maintained.

#### 7.4.2 Specific Absorption Rate (SAR)

7.4.2.1 Definition: A quantity that describes how much electromagnetic energy is absorbed by the body over time, typically expressed in units of watts per kilogram. SAR depends upon the pulse sequence and the size, geometry, and conductivity of the absorbing object.

7.4.2.2 Possible adverse effects: A high local SAR may result in RF burns. A high SAR evenly distributed across the entire body exerts stress on the patients' cardiovascular and thermoregulation system.

7.4.2.3 Protection against risk: SAR is limited in MRI studies to minimize body temperature increases. Accurately determining SAR is difficult; it depends upon heat conduction and body geometry as well as upon the blood flow changes. The Siemens 3T system requires the participant's weight and birth date to be input when setting up the participant. It uses those two measures to calculate an appropriate SAR. If the SAR is too high for a given set of user-specified parameters, a message appears on the computer interface of the system indicating that it will not allow the image sequence with those parameters. As further protection against risk, participants should be asked about their comfort level during the session.

#### 7.4.3 Individuals with electrically conductive materials

7.4.3.1 Individuals with electrically conductive materials in their bodies, such as wires, leads, or implants will not be imaged in the MRI scanner due to thermal or voltage dangers relating to the presence of a strong, rapidly varying magnetic field.

7.4.4 Individuals with tattoos that have ferromagnetic properties may be imaged as long as care is taken to keep the affected area thermally insulated (using pads, ice packs, etc). It is also advisable to keep the affected area as far as possible from the inner walls of the MRI scanner bore. Individuals whose tattoos are less than 48 hours old should not be scanned as it may cause the tattoo edges to run, although this presents no additional physical danger to the person in the magnet.

#### 7.4.5 Conductive Loops

7.4.5.1 Description: Having one's hands or legs in contact can form an electrical current loop. Skin to skin contact from hands to legs or touching knees together is another form of a conductive loop.

7.4.5.2 Possible adverse events: Although unlikely, local burns could result from this type of body position. The most general result is a feeling of discomfort. In some instances the subject may feel as though their arms or legs have "fallen asleep" or have a tingling sensation. This sensation will go away and is not permanent.

##### 7.4.5.3 Protection against risk:

7.4.5.3.1 Avoid conductive loops problem by placing individuals on the patient bed in positions that do not form conductive loops. Furthermore, this issue must be described to the participant so that if he/she shifts positions on the patient bed, conductive loops are not created. Specifically, individuals must be instructed not to cross their arms or legs while in the magnet.

7.4.5.3.2 In addition, participants should be informed about the potential of local burns and tingling sensations to occur, and to alert the MR operator in such instances.

7.5.6 Drug delivery patches and pads: Some drug delivery patches contain metallic foil, thus increasing the risk of thermal injury. If the patch is in the volume of excitation of the transmitting RF coil, the individual must not undergo MR imaging at the MNC. If the drug delivery patch is outside of the volume of excitation of the coil, the individual can undergo imaging with an ice pack applied directly to the patch. The individual should be instructed to let the MR personnel know immediately if the patch begins to warm.

## 7.6 Cryogen-Related Issues

7.6.1 If anyone is in the magnet room while a quench occurs, OPEN the magnet room door immediately for ventilation or the participant has the potential to suffocate.

7.6.2 In the event of a system quench, it is imperative that all personnel, research participants, and patients be evacuated from Zone 4, the magnet room, as quickly and safely as is feasible. Site access should be immediately restricted until the arrival of Siemens equipment service personnel.

7.6.3 The sudden appearance of white clouds or fog around or above the MRI scanner indicates that cryogenic gases have vented partially or completely in the magnet room. Police, fire, and other emergency personnel should be restricted from entering the room with their axes, oxygen tanks, etc., until it can be confirmed that the magnetic field has dissipated. There may still be a considerable residual static magnetic field despite a quench or partial quench of the magnet.

## 7.7 Claustrophobia and anxiety

7.7.1 Individuals undergoing MR imaging will be screened for known claustrophobia and anxiety about undergoing imaging. If these individuals wish to undergo MR imaging, they will first be offered an opportunity to practice in the simulated MR environment (mock scanner). All individuals undergoing imaging are advised that they may speak to the MR personnel throughout the imaging session, or squeeze the handheld squeeze bulb to indicate that they need attention or wish to be removed from the magnet and patient bed.

## 7.8 Contrast Agent Safety

7.8.1 No contrast agents will be used within the MNC.

7.9 Firefighter, police, and security safety considerations: For the safety of these emergency personnel who are responding to an emergency call at the MNC, a Level 2 MR personnel should be on site if possible, prior to the arrival of the emergency responders to ensure that they do not have free access to Zone 4.

7.9.1 The MNC Director (or a Member of the MNC Operations sub-committee on Safety and Compliance, such as the MR physicist) is responsible for prospectively educating the local fire marshals, firefighter association, police, and security personnel about the potential hazards of responding to emergencies in the MR suite. It should be stressed that even in a fire or other emergency, the magnetic fields may be present and fully operational. Therefore, emergency personnel with air tanks, axes, crowbars, or other firefighting equipment, as well as guns, etc., cannot be given free access to Zone 4. Such access might prove catastrophic or even lethal to those responding or others in the vicinity.

7.9.2 In addition to training, emergency personnel will also be provided with documents providing information about the facility and safety issues (see Appendix F).

7.9.3 The MNC has an MR-safe fire extinguisher that is located in the control room (1157) just outside the MRI room. Also for fire safety, there is a smoke detector system and a sprinkler system that will be automatically activated in case of smoke or fire, respectively.

7.9.4 If there is a fire requiring firefighters or other emergency personnel to enter the MR facility with non-MR safe equipment, either Zone 4 must remain locked or off limits, or a decision to quench the magnet should be very seriously considered. This decision should be made if needed to protect the health and lives of the responders and other persons present. Should a planned quench be performed, Level 2 MR personnel must ensure that all emergency personnel and unscreened individuals continue to be restricted from Zone 4 until the static field is no longer detectable or at least sufficiently attenuated such that it no longer present hazardous conditions to persons with ferromagnetic objects, such as axes or oxygen tanks.

#### 7.10 Power outage considerations.

7.10.1 In the event of power outage, Level 2 MR Personnel must be able to release the scanner table so that it can be mechanically pulled out if the emergency power system fails to initiate.

7.10.2 Because power outages have implications for several aspects of system function, they should be reported to the MRI Physicist or the MNC Director as soon as possible. If a power outage lasts longer than 30 seconds, any ongoing scans will be stopped immediately so that the scanner can be safely shut down during the remaining time. The MRI scanner is connected to an Uninterrupted Power Supply unit (UPS) located in the equipment room 1153. The UPS can provide up to 15 minutes of emergency power during normal scanner operation. It can prevent scanner malfunction during brown-outs, voltage spikes, and very short power outages.



## **Safety Screening for individuals entering Zone 4 (Magnet Room)**

8.1 The Screening Protocol and IRB approved screening forms are included as Appendix D.

8.2 The purpose of safety screening is to ensure that no one enters the magnet room with ferromagnetic objects, either in their bodies, on their bodies, or as part of any materials or equipment that is being brought into the magnet room. Safety screening of ALL individuals entering the magnet room is a cornerstone of keeping the MRI environment safe.

8.3 A formal screening protocol is in place for the MNC, and was developed with the guidance of ACR materials. The procedure and documentation forms are approved by the Institutional Review Board (IRB).

8.4 In keeping with the recommendations of the ACR, the magnetic safety screening is essentially the same for all individuals entering Zone 4. Individuals undergoing imaging must answer additional questions, such as height and weight. Such questions are relevant to safety issues, such as specific absorption rate (SAR), or to the presence of objects that may affect the quality of the images or the participant's comfort during imaging.

8.5 MNC staff and all MR personnel must undergo MR Safety Screening as part of their employment process and/or prior to beginning research training or work in Zone 4. MR personnel are not required to be screened prior to each and every entry into Zone 4. However, MR personnel must immediately report to the MNC Director any trauma, procedure, or surgery they undergo during employment in which a ferromagnetic metallic object or device may have been introduced within or onto them. At such a time, the employee will be re-screened to determine if any safety issues prevent him/her from safely working in Zone 4.

8.6 Completed screening forms are stored in a locked file cabinet within Zone 3 of the MNC. Forms are returned to the PI upon completion of the MR portion or the study to be included in the PI's records for the study.

8.7 Research participants must be fully safety screened prior to entering Zone 4 at every session, which includes administration of the MR Safety Questionnaire and screening for ferromagnetic personal belongings and devices on them or in them, such as watches, jewelry, pagers, and cell phones.

8.7.1 Metal detectors are not to be used as a substitute for careful screening by MR personnel, but may be used in the screening process.

8.7.2 Any individual undergoing MR imaging must remove all readily removable metallic personal belongings and devices on them, such as watches, jewelry, pagers, cell phones, body piercings (if removable), and cosmetics containing metallic particles. It is recommended that clothing items that may contain metallic fasteners, hooks, zippers, loose metallic components, or metallic threads be also removed or screened with a metal detector prior to entering Zone 4 to ensure that they are not ferromagnetic. Research participants and patients may wear site-supplied scrubs or a gown.

8.7.3 All individuals whose screening reveals a history of potential ferromagnetic foreign object penetration must undergo further investigation prior to being admitted into Zone 4. Examples of acceptable methods of screening include patient history, plain X-ray films, prior CT or MR studies of the questioned anatomical area, or access to written documentation of the type of implant or foreign object that may be present. After positive identification has been made as to the type of implant or foreign object that is within the patient, MR compatibility must be assessed using product labeling or Shellock MR Safety guidelines. Decisions based on published MR compatibility or safety

claims must recognize that all such claims apply to specifically tested static field and static gradient field strengths.

8.7.4 Under no circumstances will individuals be admitted into Zone 4 of the MNC if they have aneurysm clips, cardiac pacemakers, diaphragmatic pace makers, auto-defibrillators, deep brain stimulators, or other electromechanically activated devices.

8.7.5 Research participants and patients as well as their escorts must complete an MR safety-screening questionnaire prior to entry into Zone 4. All escorts who remain in the facility beyond the arrival with the patient or research participant must undergo this screening in case they need to enter into Zone 4.

8.7.6 There is potential for thermal injury from excessive RF power deposition. If a person undergoing MR imaging is in contact with electrically conductive material, such as a tattoo with metal particles in it, cold compresses or ice packs can be placed on the affected body area during imaging.

8.7.7 Final decisions regarding whether a given participant or patient can undergo MRI in the MNC must be made by Level 2 MR personnel following criteria for acceptability predetermined by the MNC Director, and approved by the Institutional Review Board. The Level 2 MR personnel confirms this decision by signature on the participant's MR screening form.

8.7.8 If any Level 2 MR Personnel who screens a participant finds that additional considerations are necessary before approving the participant to enter the magnet room or undergo imaging, the case must be brought to MR Physicist or MNC Director who will make the final determination (with additional information from the potential participant or consultation with other experts as needed) about whether the participant is eligible for MR imaging in the MNC.

8.8 Device and object screening: Before an object or device is introduced into Zone 4, these objects must be tested for detectable ferromagnetic attractive forces. To do so, Level 2 MR personnel in the facility must use a strong handheld magnet (greater than or equal to 1000 G). This will allow testing for detectable ferromagnetic attractive forces. All portable metallic or partially metallic objects that are to be brought into Zone 4 must be properly identified and appropriately labeled utilizing the current FDA labeling criteria developed by ASTM (American Society for Testing and Materials) International (<http://www.astm.org>) (see the figure below).



U.S. Food and Drug Administration labeling criteria (developed by ASTM [American Society for Testing and Materials] International) for portable objects taken into Zone 4. The square green “MR safe” label (left) is for objects that typically do not have metallic components and that are unaffected in the presence of a large magnetic field. The triangular yellow label (middle) is for objects with an “MR-conditional” rating, and the round red label (right) is for “not MR-safe” objects. Under no circumstances should objects labeled with the red “Not MR-safe” be brought into Zone 4

## Emergency Procedures

9.1 Emergency procedures must be visibly posted in the MNC, reviewed and updated as needed, and must be incorporated into safety training for all MNC Researchers and MR personnel. The current version of the posted emergency procedures is in Appendix E.

9.2 The major risk in the facility is related to individuals entering the MRI facility who are unfamiliar with the MRI environment and its hazards. MR personnel working in the facility must be constantly vigilant of who is entering the control room and magnet rooms. Especially in emergency situations, MR personnel must ensure that no one without proper training or screening enters the Zone 4 of the MNC (magnet room), and that those individuals who do enter have removed all ferrous material from their persons.

9.3 ALL personnel who will use the MNC must have up-to-date safety training as specified in the requirements for MR personnel. This includes basic safety training for personnel who use facilities at MNC other than MRI (MNC Researchers). These individuals must also be fully aware of the current procedures for both medical emergencies and facility emergencies.

9.3.1. Operators and level 2 personnel should participate the emergency drills organized by MNC.

9.4 There is a participant-operated squeeze bulb on the MR patient table that must be given to all research participants while they are in the scanner. Squeezing this bulb activates an audible alarm to the control room, signaling the MR personnel of any problems or discomfort the participant or patient may be experiencing. Additionally, there is a video camera mounted on one end of the magnet, providing a view in the control room of the participant or patient. There is also an intercom system in place between the control room and the magnet room so that the participant and MR personnel may communicate verbally.

9.5 The MNC is equipped with a First Aid kit, which is mounted on the South wall of the control room (Room 1157). Note that the First Aid Kit itself and its contents are not MR-safe.

9.6 As part of the Zone 3 and Zone 4 restrictions, the MNC has readily accessible, clearly marked, MR-safe fire extinguisher available. Additionally, there is a smoke detector system and a sprinkler system that will be automatically activated in case of smoke or fire, respectively.

9.7 During imaging activities involving research participants, there must be at least two MR personnel present (one of whom must be Level 2 certified) for the duration that a participant is in Zone 4. This policy is in place to facilitate responses to emergencies.

9.7.1 A typical scenario would be that in addition to the participant and the MRI operator, at least one additional MR-trained person would be present in the control room or elsewhere in Zone 3 or Zone 4. Thus, in case of an emergency involving the participant or patient, one MR personnel will be available to attend to the participant or patient while the other can contact emergency personnel and meet and guide them safely within the facility.

9.7.2 In the event of younger children undergoing MR imaging (Zone 4), there should be an additional person (total of 3 MR personnel) present to oversee the needs and safety of a parent(s), relative(s) or other adult(s) accompanying the child.

9.7.3 The only exception to the rule of having at least two MR personnel present when imaging is if (1) a volunteer who is at least Level 1 MR certified is being imaged, and (2) imaging is not part of IRB approved research. Such a situation would occur, for example, when testing equipment or pulse sequences in the MRI or scanning standard inanimate objects (phantoms) for the purpose of scanner calibration or testing. Only in this case is it acceptable for an MRI operator to conduct imaging without additional MR personnel within the MNC.

## 9.8 Specific Emergencies and Responses

9.8.1 The following specific emergencies and responses are addressed in Appendix E: Distressed or injured individual, and facility emergencies not involving people.

9.8.1.1 In case of emergency, there are several MNC personnel designated as emergency contacts; these are listed in Appendix C. In case of emergency, at least one of these individuals should be contacted immediately.

9.8.1.2 In case of alarms sounding inside or heard from outside of the MNC, or other facility emergencies, there must be contact information for at least three responsible MNC personnel posted in visible locations within the MNC. In addition, individuals from the BSOS Dean's Office, Campus Police, Department of Environmental Safety, Facilities Management, Housekeeping and Physical Plant must be given this information to keep on file. Finally, this information should also be placed in the building's KNOX box for the use of emergency personnel.

9.8.1.3 If an MR Personnel or another person notices smoke or fire, campus 911 should be called or on a wireless device dial #3333. MNC emergency contacts should be notified immediately.

9.8.1.4 If an MR Personnel or another person notices water leaks, Physical Plant should be notified, and MNC Personnel should be notified.

9.8.1.5 If there is a potentially life-threatening situation, such as fire or smoke, MNC Researchers, MR Personnel and research participants, patients, and their escorts must be removed immediately from the MNC and should be escorted to a safe location outside of the building.

9.8.1.6 If it is safe and feasible, MR personnel should accompany emergency personnel into the MNC. MR personnel should take all possible steps to ensure the safety of all emergency personnel in Zone 4 (magnet room). If it is necessary for non-MR safe equipment to be introduced into the magnet room, a quench of the magnet should be very seriously considered.

9.8.2. In case of emergency, all personnel should follow the instructions of operator or Level 2 who have taken the emergency drills in MNC.

## **Training for Operators of the MRI Instrument**

10.1 MRI operator trainees must be certified Level 2 MR personnel before beginning training to be an operator. Training of MRI operators must be approved by the MNC Director and MR Physicist. Certification of MRI operators must be approved by the MNC Director. This approval is documented on the form included in Appendix B.

10.2 MRI operator trainees undergo training with a certified MNC Operator. The MNC Operator training is taught by the MR Physicist and includes 8-12 hours of presentations, demonstrations and hands on training. Following the Operator Training Course the training progresses through three phases.

10.2.1 Observer phase: Trainees observe the training Operator for a minimum of 4 hours of imaging. This phase of training is meant to familiarize the trainee with operating procedures. Trainees move on the next phase at the discretion of the training Operator.

10.2.2 Assistant phase. The trainee assists the training Operator for a minimum of 10 hours of imaging, with the training Operator taking the lead. This phase of training is meant to give the trainee hands-on experience with the operating procedures, and allow them to gradually begin to perform the duties of a certified Operator. Trainees move on to the next phase at the discretion of the training Operator and MR Physicist or MNC Director.

10.2.3 Probation phase. Trainees operate the MRI device under the supervision of the training Operator for a minimum of 10 hours of imaging. This phase allows the trainee to build confidence in their ability to perform operating procedures, and develops the level of skill and responsibility necessary to be certified Operators. Trainees perform all operating procedures during imaging, using the training Operator as an information resource only. Trainees may apply for certification from the MR Physicist or MNC Director at the joint discretion of the training Operator and the Safety and Compliance sub-committee (see Appendix A).

Appendix A-1

Documentation of Safety Training for Level 1 MR Personnel  
Maryland Neuroimaging Center  
University of Maryland, College Park

Name: \_\_\_\_\_

Department: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Office Address: \_\_\_\_\_

UMD Position (circle): Faculty Post Doc Grad Student Staff Other: \_\_\_\_\_

Non-UMD Position (please describe): \_\_\_\_\_

Name of MNC Principal Investigator with whom your MRI research is associated: \_\_\_\_\_

Name of Safety Trainer: \_\_\_\_\_

Read Version \_\_\_\_ (insert version #) of the MNC Standard Operating Procedures (SOPs)

Viewed MR Safety Video \_\_\_\_

Attended MNC MR safety training lecture and tour \_\_\_\_

Passed Test for Level 1 MR personnel \_\_\_\_

I agree to comply with the MNC SOPs during the course of my work at the Maryland Neuroimaging Center

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby confirm that this individual has completed the requirements to work as a Level 1 MR personnel at the Maryland Neuroimaging Center. I will provide adequate supervision and any additional training necessary to ensure that all safety procedures are observed during the course of his/her work.

MNC Safety Committee Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Appendix A-2

Documentation of Safety Training for Level 2 MR Personnel  
Maryland Neuroimaging Center  
University of Maryland, College Park

Name: \_\_\_\_\_

Department: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Office Address: \_\_\_\_\_

UMD Position (circle): Faculty Post Doc Grad Student Staff Other: \_\_\_\_\_

Non-UMD Position (please describe): \_\_\_\_\_

Name of MNC Principal Investigator with whom your MRI research is associated: \_\_\_\_\_

Name of Safety Trainer: \_\_\_\_\_

Read Version \_\_\_\_ (insert version #) of the MNC Standard Operating Procedures (SOPs)

Viewed MR Safety Video \_\_\_\_

Attended MNC MR safety training lecture and tour \_\_\_\_

Passed Test for Level 2 MR Personnel \_\_\_\_

I agree to comply with the MNC SOPs during the course of my work at the Maryland Neuroimaging Center

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby confirm that this individual has completed the requirements to work as a Level 2 MR personnel at the Maryland Neuroimaging Center. I will provide adequate supervision and any additional training necessary to ensure that all safety procedures are observed during the course of his/her work.

MNC Safety Committee Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix A-3**

Documentation of Operator Training for the Siemens Magnetom TIM Trio  
Maryland Neuroimaging Center, University of Maryland, College Park

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Office Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

MNC Operator (supervisor) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Safety committee designee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree to comply with the MNC SOPs during the course of my work at the Maryland Neuroimaging Center.

Trainee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby confirm that this individual has completed the requirements to operate the Siemens Magnetom TIM Trio at the Maryland Neuroimaging Center. I will provide adequate supervision and any additional training necessary to ensure that this individual's operator skills are up to date with any changes in hardware or software in the imaging system.

MNC Safety Committee Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Appendix B**

### **MNC Emergency Contacts (in contact order)**

Sandy Collier, 301-405-4125, [collier@umd.edu](mailto:collier@umd.edu), cell 304-671-1176

Dr. Wang Zhan, 301-405-3035 or 301-405-2590, [wang.zhan@gmail.com](mailto:wang.zhan@gmail.com), cell 443-858-4213

Jennifer Stark 301-405-2590, [starkja@umd.edu](mailto:starkja@umd.edu), cell 443-529-4371

Dr. Luiz Pessoa, 301-405-2423, [pessoa.mri@gmail.com](mailto:pessoa.mri@gmail.com), cell 812-340-9249

**MARYLAND NEUROIMAGING CENTER  
MRI SAFETY SCREENING FORM**  
*Revised 2/2015*

**Appendix C**

**MNC Appendix D SOP Version 1.6 MR Safety Screening – RESEARCH VOLUNTEERS**

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Last name, First name, Middle Initial

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male Female

Address \_\_\_\_\_ Telephone (home) (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

City \_\_\_\_\_ Telephone (work) (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

1. Have you had a prior MRI at this facility? No Yes

If yes, please indicate most recent date: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Have you had a prior MRI elsewhere? No Yes

If yes, please indicate most recent date: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

3. Have you experienced any problem related to a previous MRI examination or MR procedure? No Yes

If yes, please describe: \_\_\_\_\_

4. Have you had prior surgery or an operation (e.g., arthroscopy, endoscopy, etc.) of any kind? No Yes

If yes, please indicate the date and type of surgery:

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Type of surgery \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Type of surgery \_\_\_\_\_

5. Have you had an injury to the eye involving a metallic object or fragment (e.g., metallic slivers, shavings, foreign body, etc.)? No Yes

If yes, please describe: \_\_\_\_\_

6. Have you ever done any welding, grinding or cutting of metal? No Yes

If yes, did you always wear safety protection for your eyes? No Yes

7. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)? No Yes

If yes, please describe: \_\_\_\_\_

8. Have you been diagnosed with epilepsy? No Yes


9. Do you have any metallic dental work? (braces, retainer, implants, dental plates) No Yes

**For female participants:**

9. Date of last menstrual period: \_\_\_\_/\_\_\_\_/\_\_\_\_

10. Are you pregnant or experiencing a late menstrual period? No Yes

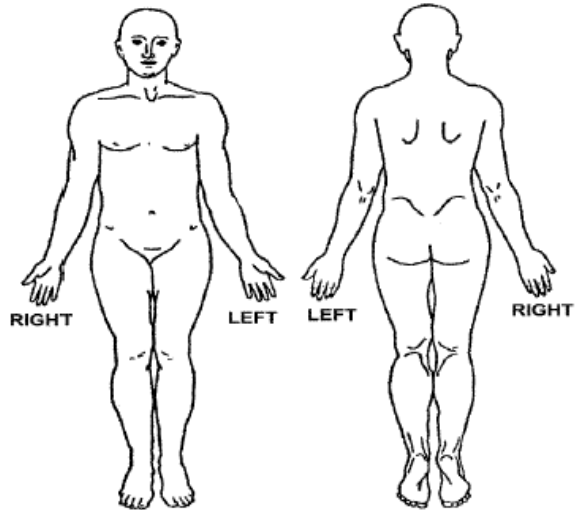
**Appendix C**

	<p><b>WARNING:</b> Certain implants, devices, or objects may be hazardous to you and/or may interfere with the MR procedure (i.e., MRI, MR angiography, functional MRI, MR spectroscopy). <u>Do not enter</u> the MR system room or MR environment if you have any question or concern regarding an implant, device, or object. Consult the MRI Technologist or Radiologist <b>BEFORE</b> entering the MR system room. The MR system magnet is <b>ALWAYS</b> on.</p>
---	--

**Please indicate if you have any of the following:**

- |  |                             |  |
|--|-----------------------------|--|
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Aneurysm Clip(s)                               |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Cardiac pacemaker                              |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Implanted cardioverter defibrillator (ICD)     |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Electronic implant or device                   |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Neurostimulation system                        |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Spinal cord stimulator                         |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Internal electrodes or wires                   |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Bone growth/bone fusion stimulator             |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Cochlear, otologic, or other ear implant       |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Insulin or other infusion pump                 |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Implanted drug infusion device                 |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Any type of prosthesis (eye, penile, etc.)     |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Heart valve prosthesis                         |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Eyelid spring or wire                          |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Artificial or prosthetic limb                  |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Metallic stent, filter, or coil                |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Shunt (spinal or intraventricular)             |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Vascular access port and/or catheter           |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Radiation seeds or implants                    |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Swan-Ganz or thermodilution catheter           |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Medication patch (Nicotine, Nitroglycerine)    |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Any metallic fragment or foreign body          |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Wire mesh implant                              |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Tissue expander (e.g., breast)                 |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Surgical staples, slips, or metallic sutures   |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Joint replacement (hip, knee, etc.)            |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Bone/joint pin, screw, nail, wire, place, etc. |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | IUD, diaphragm, or pessary                     |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Dentures or partial plates                     |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Tattoo or permanent makeup                     |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Body piercing jewelery                         |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Hearing aid                                    |
| <i>(Remove before entering MR system room)</i> |                             |  |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Other implant <input type="text"/>             |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Breathing problem or motion disorder           |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Claustrophobia                                 |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Wig or hairpiece                               |
| <input type="checkbox"/> Yes                   | <input type="checkbox"/> No | Cosmetic/Colored Contacts                      |

Please mark on the figure(s) below the location of any implant or metal inside of or on your body.



**IMPORTANT INSTRUCTIONS**

Before entering the MR environment or MR system room, you must remove all metallic objects including hearing aids, dentures, partial plates, keys, beeper, cell phone, eyeglasses, hair pins, barrettes, jewelry, body piercing jewelry, watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, nail clipper, tools, clothing with metal fasteners, & clothing with metallic threads.

Please consult the MRI Technologist or Radiologist if you have any question or concern **BEFORE** you enter the MR system room.

**NOTE: You may be advised or required to wear earplugs or other hearing protection during the MR procedure to prevent possible problems or hazards related to acoustic noise.**

I attest that the above information is correct to the best of my knowledge. I read and understand the contents of this form and had the opportunity to ask questions regarding the information on this form and regarding the MR procedure that I am about to undergo.

Signature of Person Completing Form: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Form Completed By:  Patient  Relative \_\_\_\_\_  
Print Name Relationship to patient

Form Information Reviewed By:  MRI Tech  Level 2 Grad Student  Level 2 RA  Other \_\_\_\_\_

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

## Appendix D

### Protocol for Ensuring Magnet Room and MR Imaging Safety Step by Step Procedures and Screening Form Maryland Neuroimaging Center

#### Protocol-Steps for Screening:

Screening begins with providing information regarding the safety issues within the magnet room and the importance of accurate and complete responses to the screening questions so that we can determine the safety of having the individual in the magnet room. Here's a sample script for what could be said in this process: *"The MRI machine has a very strong magnet. The magnet is so strong that it creates a forceful pull throughout the entire magnet room. Since many metal objects are magnetic, it is dangerous to bring metal objects into the magnet room. The magnet can pull some metal objects through the air into the magnet, injuring anyone in the way. Some individuals have metal in their bodies. If they enter the magnet room, the metal object inside their body may move or heat up and possibly injure the person. Thus, to ensure your safety while you are in our MRI facility, I will need to ask you safety questions. You must answer these questions completely and honestly if you wish to go into the magnet room. However, you may choose not to answer these questions and not to enter the magnet room. If you are uncertain of how to answer any of my questions, please be sure to let me know."*

After the above information is provided verbally to the person being screened, the appropriate paper questionnaire will be given to the person, which they must fill out fully. Note: Fill out questionnaire in its entirety each time the person undergoes MR imaging.

A Level 2 MR personnel conducts the screening interview. The interviewer will go through each question one-by-one to ensure that there are no safety concerns before the person enters the magnet room (Zone 4). Level 2 MR personnel are safety trained, understand the rationale for each question and are able to answer questions and address safety concerns of people entering the magnet room. Therefore, this interview cannot be performed by Level 1 MR personnel.

An important part of the interview process is to ensure that all metallic personal items are removed from the person prior to entering the magnet room. These include jewelry (wristwatches, earrings, etc.), bobby pins, barrettes, hearing aids, shoes, wallet, and credit cards.

Once the interview is complete, both the Level 2 MR personnel interviewer and the person being screened must sign and date the questionnaire. The questionnaire will then be filed in the locked file cabinet located in the MNC.

If a Level 2 MR Personnel who screens a participant finds that additional considerations are necessary before approving the participant to enter the magnet room or undergo imaging, the case must be brought to the MR Technologist or MR Physicist who will make the final determination about whether the participant is eligible for MR imaging in the MNC (using additional information from the potential participant, additional consultation with experts, etc., as needed).

#### Key Points for Safety in the Magnet Environment:

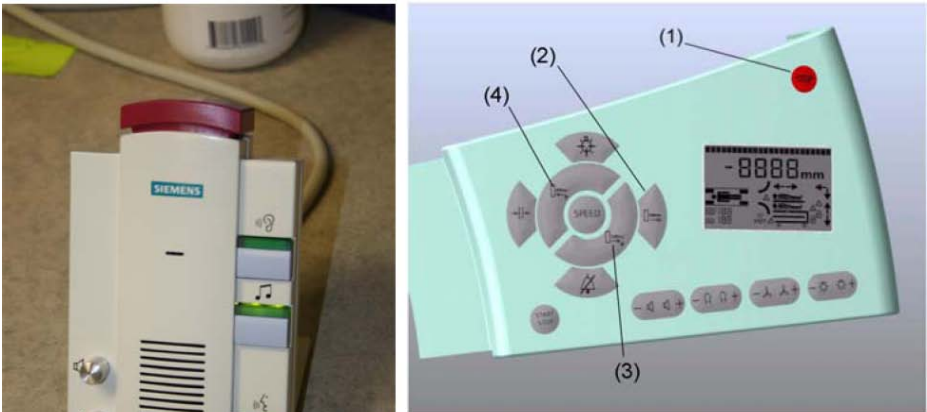
Be vigilant of who is entering the control and magnet rooms.

Individuals unfamiliar with the magnetic resonance environment and its hazards are at the greatest safety risk.

Everyone entering the magnet room, including emergency responders, must be fully screened and must remove all ferrous material from their person.

Safety training is required of ALL personnel who will use the neuroimaging facility.

Three (3) Types of Emergency Buttons for Different Purposes  
Intercom MR Control Panel



(1) Table Stop button  
 (2) Home Position button  
 (3) Table Movement Down/Outward button  
 (4) Table Movement Up/Inward button

1. The Table Stop Button Press the Table Stop button immediately in case of accidents or risk of injury due to table movements (points of injury through crushing/bruising). If a table stop button is hit, the table comes to an immediate stop.

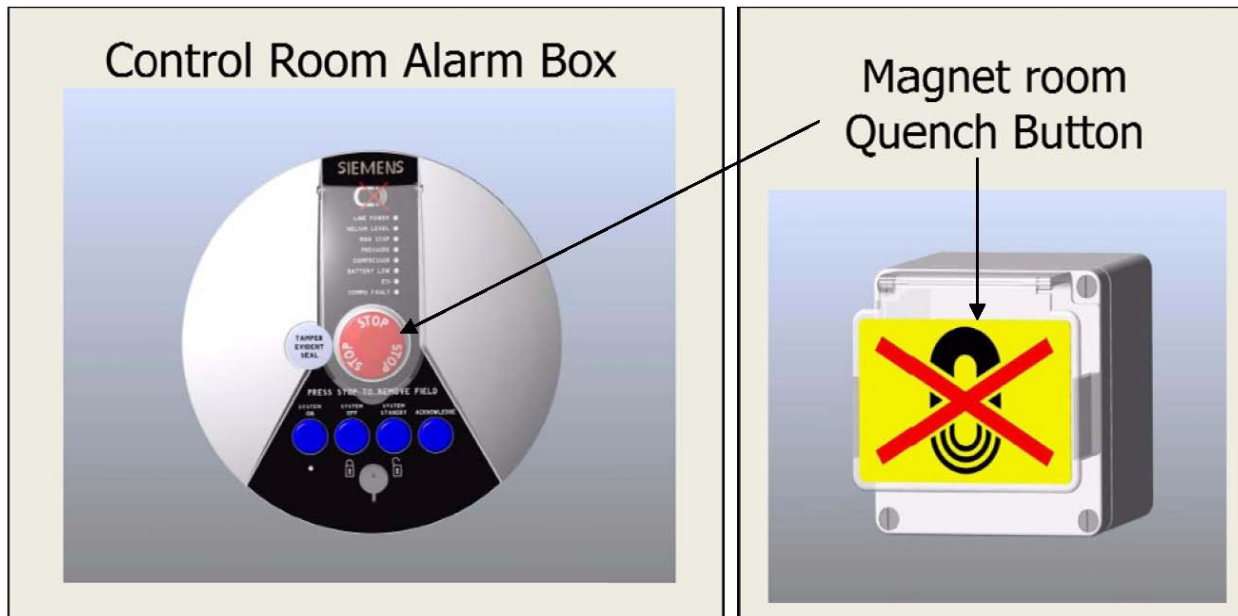
In the control room Press the red button on the top of the Intercom Console to stop the patient table movement. If it occurs in the middle of an exam, the scan is also stopped. Imaging can also be stopped using the scanner software.  
 In the MRI instrument room Press the red button in the MR control panel.

1.1. To resume normal table operation, press the Table Movement Up/Inward button and then press the Table Movement Down/Outward button. This will cancel the Table Stop. The fastest way to move the subject out of the bore is pressing the Home Position button in the MR control panel. In case of power failure or defective motorized drive, the table can be manually pulled out of the magnet bore. To do so, locate the red arrow on the patient table, pull the unlocking handle outward and upward to the end stop. The tabletop is mechanically decoupled from the motorized drive unit. Pull the tabletop out of the magnet using the handle at the foot end.



2. The Emergency Power Off (EPO) Button (3 locations, room 1157, 1157A, 1153)  
 • Press the EPO button to:

- Stop all electronics associated with the MRI, including the control room computer;
- Release the brake on the patient table.
- Two locations of the EEPO buttons
  - Control Room: On the north wall, to the right of the console.
  - Magnet Room: On the north wall, from inside the room, it is to the right of the door.



### 3. The Quench Button

Quenching the magnet is a LAST RESORT: it is dangerous if not done properly.

BEFORE initiating a quench, attempt to remove a person from the magnet without quenching — this is a safer alternative than an unnecessary quench.

If you determine that quenching the magnet is the safest option, press the QUENCH button to bring down the magnetic field VERY RAPIDLY.

If a person is in the magnet room OPEN THE DOOR BEFORE QUENCH.

### 4. The room must be ventilated or persons inside will suffocate rapidly!

If NO ONE is in the magnet room, quench with the DOOR CLOSED.

CALL 911 as soon as is possible, and Siemens service 1-888-7436 (1-888-SIEM), Functional Location #341879

DO NOT leave the scene. There is no danger as long as there is adequate ventilation.

Even after the magnet has quenched, there may still be a considerable static magnetic field. Precautions must be taken for all MNC and emergency personnel entering the magnet room.

## Appendix E

### Response Plans for Specific Emergencies

● Distressed Subject: Subject indicates distress by pressing the squeeze bulb or verbally conveying distress OR facility staff notice distress and determine that the subject must be removed rapidly from the scanner.

○ Possible scenarios include panic attack, claustrophobia, general fear or extreme discomfort, or a medical emergency.

Follow these steps:

1. Stop imaging immediately by pressing the red button on the console.
2. Use the intercom to reassure the participant that you are coming in to remove them.
3. Remove the participant from the magnet room.
4. Talk with the subject in the waiting room and assess whether emergency personnel are needed; if so, call 911. Tell them the situation and give the address: Avrum Gudelsky Building, #795, University of Maryland, College Park, MD 20742.
5. If first aid is needed, use the First Aid kit mounted on the south wall in the control room.
6. Monitor all emergency personnel to ensure their safety and to prevent them from introducing equipment or medical instruments, which may present safety risks, into the magnet room.

● Person Trapped in or Injured by Projectile in the Magnet: Follow these steps:

1. Stop imaging immediately by pressing the red button on the console.
2. Use the intercom to reassure the participant that you are coming in to attend to them.
3. Assess whether removing the person from the magnet could lead to severe loss of blood. For example, if a person is impaled by scissors near an artery or area of large blood supply, such as in the neck, femoral region, or heart, DO NOT REMOVE THE IMPALING OBJECT as more blood loss may occur. Instead, leave the person in a stable position and let emergency responders decide the most appropriate action. Or, for example, if a person has been impaled by scissors in a hand or other extremity, consider removing the impaling object by prying it off the magnet (more than one person may be needed), and then administer first aid. If a person is trapped in the magnet or against the magnet by a ferromagnetic object, attempt to pry it off of the magnet.

If a person is trapped by the magnet or against the magnet, it may be necessary to quench the magnet so that the person can be removed. OPEN THE MAGNET ROOM DOOR FIRST!!

4. If the subject can be safely removed from the magnet environment without further injury, escort the subject to the control room and assess whether emergency personnel are needed. If so, call campus 911 or #3333 on a wireless device. Explain the situation and give them the address: Avrum Gudelsky Building, #795, University of Maryland, College Park, MD 20742.
5. If first aid is needed, use the First Aid kit mounted on the south wall in the control room.
6. If emergency personnel are called, monitor them to ensure their safety and to prevent them from introducing equipment or medical instruments, which may present safety risks, into the magnet room.
7. If the subject CANNOT be safely removed from the magnet without inciting further injury, contact emergency services by calling 911. Explain the situation and give them the address: Avrum Gudelsky Building, #795, University of Maryland, College Park, 20742.

-  
8. Stay in constant contact with the subject over the intercom system or by having another safety screened individual stand in the room with them. When emergency personnel arrive they MUST be safety screened and made to remove all ferrous objects on their person. Failure to do so may cause injury to the responding emergency personnel, other individuals present in the MRI room, and may cause further injury to the subject trapped in the MRI!

9. The MRI safe gurney is located in the MRI Instrument room and can be used as a way to safely transport subjects out of the MRI environment.

10. Call Siemens service at: 1-888-7436 (1-888-SIEM), Functional Location #341879

Facility emergencies: Staff member or other person notices fire, water leaks, foreign objects in magnet with or without subject present, but no one is in grave danger.

Call campus 911 if there is a fire.

Remove subject if one is present.

Attempt to contact someone from the MNC Emergency Contact List

Call Siemens service at: 1-888-7436 (1-888-SIEM), Functional Location #341879



-

## **Appendix F**

### **INFORMATIONAL HANDOUT FOR EMERGENCY PERSONNEL (MARYLAND NEUORIMAGING CENTER)**

Located in the Avrum Gudelsky Building, #795, University of Maryland, College Park, 20742.

This document contains information for safety and emergency personnel (police, fire, EMT) about the MRI (magnetic resonance imaging) magnet in the University of Maryland, MNC located in the Avrum Gudelsky Building, #795, College Park, MD, 20742.

The MNC is located on the left side of the Avrum Gudelsky Building, #795, attached is a drawing showing the relative location of the facility within the building.

The MNC is composed of several rooms, see attached floor plan.

These several rooms and their uses are:

Room 1161C: Interview and screening area.

Room 1161A and 1159: Dressing room and restroom.

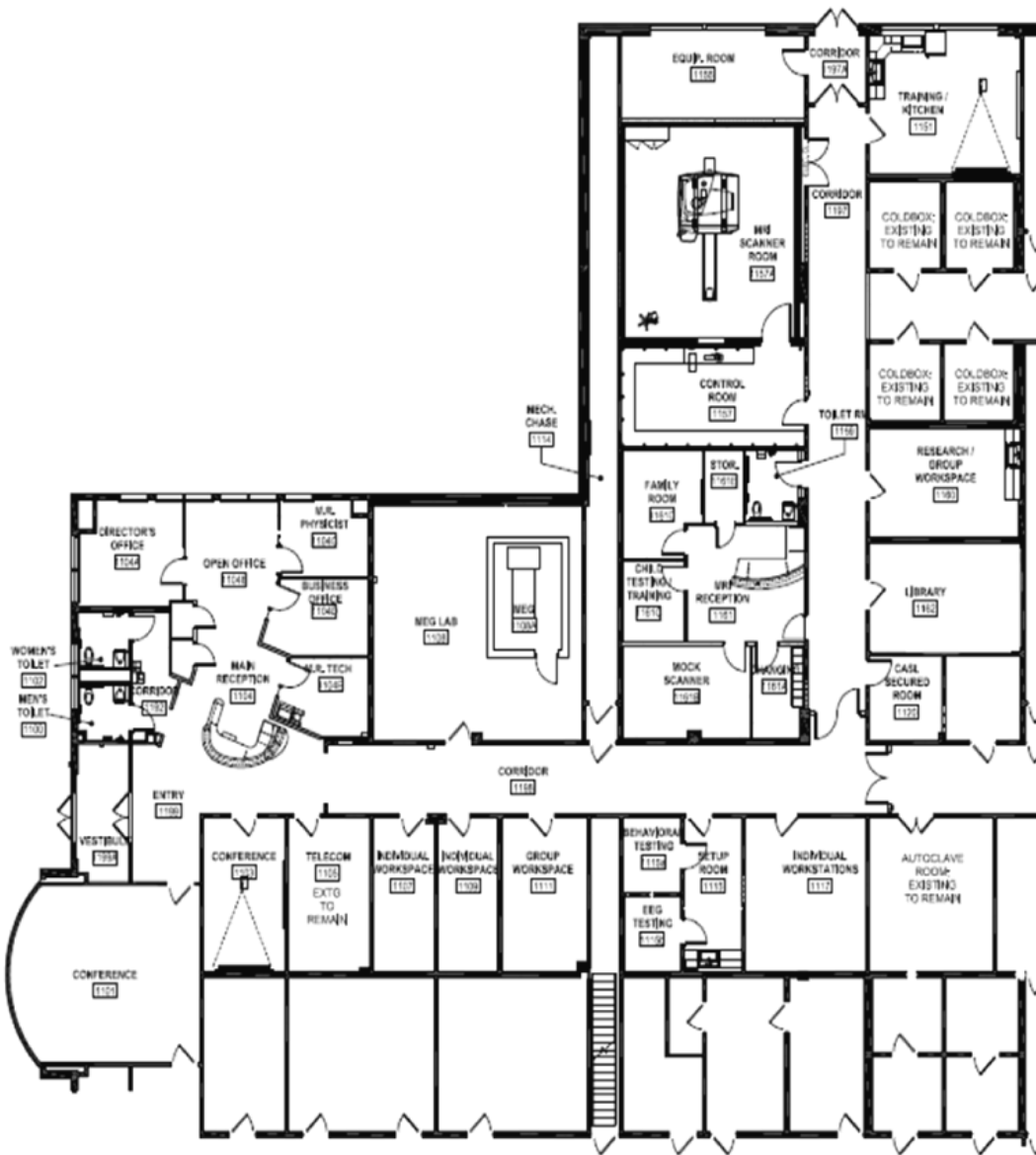
Room 1161B: The Mock MRI scanner instrument and control room.

Room 1157: Control room for MRI Scanner

Room 1157a: MRI Scanner Equipment Room

Room 1153: Equipment Room

*See next page for floor plan.*



1 INTERIOR PLAN

## Appendix F

Maryland Neuroimaging Center  
Informational Handout for Emergency Personnel

SOP Version 1.6

Room 1157A: The MRI magnet/scanner room.

Room 1157: The MRI control room.

Room 1153: The MRI equipment room.

Room 1115: EEG/TMS Lab

Room 1107: Neuroimaging Data Analysis Lab

Suite 1161 and Rooms 1157, 1157A and 1153, of the MNC house the MRI facility. This part of the MNC has key-card accessible locked entrances from the hallway. This latter doorway is at the end of a hallway which has several doors into other parts of the MNC. Key card-access to this part of the MNC is possible for Level 2 MR Personnel.

Suite 1161 houses the Mock MRI Scanner, MR Reception, Waiting Room, Changing Room and Interview and Testing room.

Room 1107 is the Neuroimaging Data Analysis Lab which consists of a data analysis meeting space which is accessible from the corridor 1198.

Suite 1115 is the EEG/Behavioral Laboratory. This area houses the EEG system. MNC facility users who acquire EEG data have been given access to this room by the MNC Director and the Safety and Compliance Committee. The MRI-compatible EEG system is also stored in this lab on a cart which can be wheeled into the MNCs MRI control room.

Only one room in the MNC suites requires special consideration/action by emergency personnel. Room 1157A which contains the MRI magnet itself has special risks and safety precautions associate with it.

Floor plan of the MNC, arrows indicate one entrance to the MRI facility.

The MRI is a very strong magnet. This magnet is so strong that it creates a magnetic pull throughout the entire room. The magnet can actually cause some metal objects to fly through the air toward the magnet, with the potential to injure anyone in the path of the flying object. Also, if an individual who has any metal object in their body enters the magnet room it is possible for that metal object inside the body to move and possibly injure the person. **TTHE MAGNET IS ALWAYS ON!** No person, safety/emergency personnel or other, should enter the MRI magnet room if they have any of the following medical/surgical conditions:

- have a pacemaker or defibrillator,
- have a stint,
- have an aneurism clip
- have been injured by a metallic object that was not removed
- have a cochlear (ear) or middle ear implant
- have had surgery involving a metallic implant (e.g. knee or hip replacement)
- have dental braces or dentures containing metal
- have body piercing (e.g. navel ring, ear rings, etc.)
- have a deep brain stimulator implant.

-

**None of the following items should be on or be worn by any person entering the MRI magnet room:**

jewelry (e.g. wristwatch, rings, necklace, etc.)  
hair accessories (e.g. bobby pins, barettes, hair elastic, etc.)  
wallet, credit cards  
any medical objects (e.g. hearing aid, etc.)

Emergency and safety personnel should be especially mindful that absolutely no medical equipment, tools or weapons should ever enter the MRI magnet room:

ladders containing any metal  
fire extinguishers  
fire axe  
weapons  
non MR safe gurney  
metal medical instruments  
tools (e.g. wrench, pliers, hammer, etc.)

The magnet room (1157A) is locked and entry can only be gained by entering a code into a keypad on the control room (room 1157). Except in cases of extreme urgency, it is advisable to contact one of the emergency contact personnel listed below to escort emergency personnel into the magnet room.

Jennifer Stark 301-405-2590, [starkja@umd.edu](mailto:starkja@umd.edu), cell 443-529-4371  
Dr. Wang Zhan, 301-405-3035 or 301-405-2590, [wang.zhan@gmail.com](mailto:wang.zhan@gmail.com), cell 443-858-4213  
Sandy Collier, 301-405-4125, [collier@umd.edu](mailto:collier@umd.edu), cell 304-671-1176  
Dr. Luiz Pessoa, 301-405-2423, [pessoa.mri@gmail.com](mailto:pessoa.mri@gmail.com), cell 812-340-9249

If an accident occurs, for instance someone may be pinned against the magnet by a metal object, the following emergency procedures should be used. The worst case would be that additional personnel enter the room to aid the victim of the accident without first screening themselves for metal objects, thus causing further accidents. Assess the level of urgency involving the victim and act based on the following guidelines.

a) If there is no serious injury to the victim, remove the victim from the magnet room.

b) If the victim is pinned by a metal object, enlist the aid of several individuals to help remove the object (all personnel entering the magnet room should be free of metallic objects).

c) If the victim has sustained a life-threatening injury from a metallic projectile and remains pinned to the magnet, then the magnet can be shut down (or "quenched"). Quenching a magnet is a VERY serious response and should ONLY be performed in the case of serious bodily injury to a victim due to projectile ferromagnetic objects. A quench button is located on the wall beside the door to the magnet room and is labeled with a black magnet on a yellow background with a red X through it (see attached picture). Importantly, a quench results in the emission of large amounts of helium, which can cause cryogen burns. The release of helium also quickly displaces the air from the room, resulting in a deadly low oxygen environment if there is no ventilation (if magnet door is closed).

The MNC suite is equipped with fire detection equipment, fire pull stations, fire strobes and ceiling-mounted sprinklers.

## Appendix G

# Imaging Research Facility Internal Operating Procedures

## Safety Training Course

The MNC SOPs require that all MR personnel update their safety training annually. The MNC Operations Committee sub-committee on Safety and Compliance (referred to as "Safety Committee" in the following text) holds a Safety Training Course at the beginning each academic semester. Other MR personnel can also be designated by the Safety Committee to offer a course to a small group of experimenters.

The Safety Committee training course consists of four steps.

- 1) Read the SOPs. This step is required of all personnel who are updating their training, or who are new trainees. Reading should be completed before attending the training lecture. SOPs can be found on the MNC Website online course site under resources.
- 2) Watch the Siemens safety video. This step is required only of new trainees. The video will be shown during the first 25 minutes of the training session. Personnel updating their training may arrive at 25 minutes past the start time, and skip the video step.
- 3) Attend a safety lecture given by an MNC Safety Committee member or their designee. This step is required of all personnel. The lecture will follow the presentation of the safety video. A question and answer period will follow.
- 4) Attend a tour of the MNC given by an MNC Safety Committee member or their designee in which emergency equipment is pointed out. This step is required of all personnel. The tour will follow the lecture. When these steps are performed for a smaller group, they do not need to follow directly one after the other. However, it is important that the steps be followed in the order shown.

## Appendix G

### **Operator Training**

[Italicized sections are copied and repeated from SOPs]

*MRI operator trainees must be certified Level 1 MR personnel. Before certification as an MRI Operator, the trainee must be certified as a Level 2 MR personnel. Training of MRI operators must be approved by the MNC Operations Committee sub-committee on Safety and Compliance (Safety Committee).*

Operator training is usually reserved for only a few individuals. The MNC employs Operators during its operating hours. Because these Operators use the technology every day, they are efficient, understand how all of the equipment in the MNC is used, and are vigilant with regard to safety procedures. It is recommended that most users take advantage of the MNC Operators as a resource, allowing the user to focus on running their experiment, increasing the chances of success.

However, because we are a research and teaching facility, we believe that Operator training should be available to MNC users. For instance, new core faculty and research scientists may wish to undergo Operator training. Also, in cooperation with the Safety Committee, PIs may nominate individuals from their research groups, whom they feel are ready for the responsibilities associated with being an Operator. These individuals are usually nominated for two reasons, 1) because training provides an educational experience, and/or 2) to facilitate collection of research data.

Although the final decision about each individual's qualifications to be a certified Operator is largely subjective, the Safety Committee has generated some objective guidelines for selecting nominees.

1) Undergraduates may undergo Operator training as an educational experience only. Undergraduates will only be allowed to advance to the probationary trainee phase, and will not be certified MR Operators or Level 2 Personnel.

2) Graduate students may undergo Operator training. The purpose of training graduates is twofold, 1) for the educational experience that it offers, and 2) to allow them to collect data for their dissertation outside the normal operating hours of the facility.

3) Non-core faculty, research scientists, post-docs, full-time research assistants, lab technicians, and lab managers may undergo Operator training.

4) It is suggested that nomination be restricted to individuals who either have extensive previous experience with MR environments, or that the PI has worked with in a research setting for an extended period, such that the PI is able to reliably gauge the nominee's ability. It is helpful if nominees have interacted with members of the MNC staff and/or the Safety Committee prior to nomination.

5) Full-time MNC Operators are hired by the MNC Director and the MNC Operations Committee.

*Certification of MRI operators must be approved by the MNC Director. This approval is documented on the form included in Appendix B.*

*MRI operator trainees undergo intensive personal training with a certified Level 2 MNC Operator. Training progresses through three phases.*

Minimum times are purposefully low. Trainees who have extensive previous experience with MRI may only require the minimum times for each phase. For trainees with no previous experience those times may have to be doubled, for instance. The training Operator should be a full-time MNC Operator.

*Observer phase: Trainees observe the training Operator for a minimum of 4 hours of imaging. This phase of training is meant to familiarize the trainee with operating procedures. Trainees who are not Level 2 MR personnel do not conduct safety screening during this phase. Trainees move on to the next phase at the discretion of the training Operator.*

Trainees should observe all actions of the training Operator. The training Operator should explain their actions as they are performed. This is especially important when putting subjects in the MRI device.

*2) Assistant phase. The trainee assists the training Operator for a minimum of 10 hours of imaging, with the training Operator taking the lead. This phase of training is meant to give the trainee hands-on experience with the operating procedures, and allow them to gradually begin to perform the duties of a certified Operator. Trainees who are not Level 2 personnel may conduct safety screening at this phase, but only under the supervision of the training Operator. Trainees move on to the next phase at the discretion of the training Operator and the Safety Committee.*

Trainees should gain hands-on experience with every action required of an Operator. During this phase, the trainee must become confident with their ability to operate the console, to put subjects in the MRI device, and to multitask during the execution of an experimental protocol.

*3) Probation phase. Trainees operate the MRI device under the supervision of the training Operator for a minimum of 10 hours of imaging. This phase allows the trainee to build confidence in their ability to perform operating procedures, and develops the level of skill and responsibility necessary to be certified Operators. Trainees perform all operating procedures during imaging, using the training Operator as an information resource, only. Trainees who are not Level 2 MR personnel may conduct safety screening, but must have the form inspected and signed by the training Operator. Trainees may apply for certification from the MNC Director at the joint discretion of the training Operator and the Safety Committee (see Appendix A).*

Trainees effectively perform all of the tasks expected of an Operator, but with supervision (i.e., the training Operator is in the MNC suite). During this phase, the trainee gains independence; therefore, the training Operator should be sure to allow the trainee to attempt to handle problems on their own. To apply for certification, trainees should show knowledge for all the tasks and actions required of an Operator, show evidence of an ability to put subjects and patients at ease during imaging, and show thorough knowledge of the safety procedures. Before certification, trainees must be certified as Level 2 MR personnel, and must show thorough knowledge for the subject safety screening questionnaire protocol.

#### Imaging Outside Standard Operating Hours

The MNC is a shared facility; therefore, changes to the equipment made by one user affect many users. For this reason, and for reasons of safety, if a user is operating outside of standard operating hours (i.e., outside of the hours when an MNC Operator is available), and there is a problem with the MRI device or any other equipment, the Operator should NOT attempt to fix the problem. Instead, they should report the problem to the MNC staff, so that they may attend to it. If the problem has the potential to damage the equipment, then they should contact the MR Physicist or MR Technologist immediately. Contact information is posted in the MNC manual found in the control room and can also be found in the SOPs (see Appendix A). If a problem occurs with the MRI device or the equipment that does not prevent the user from completing their imaging session, the problem should still be reported to the MNC staff. This will allow the staff to effectively track problems with the equipment and keep them working better for everyone.

-  
**Appendix H**

## Incidental Anomalous Findings

The approved language to be used in consent forms is below:

*The MNC is not a medical facility, does not do clinical work, and an MRI scan at the MNC is not a medical test. It is designed to address research questions and it is not the kind of scan that can be used for any clinical purpose. In fact, if there is an unusual finding in the scan, the MRI technician, or the researcher may not even detect it. However, if the technician or researcher sees something in the scan that appears unusual, the scan could be sent without any personal identifiers to a certified neuroradiologist at the Radiology Department at the University of Maryland Medical School for further review. If the neuroradiologist concurs that this unusual finding should be investigated further by a physician, you will be notified by the principle investigator leading the study.*

The PI is responsible for communicating about the general nature of the unusual finding with the MNC Director and Dr. Zhan at MNC. The PI is also responsible for reporting to research participant. Dr. Zhan's contact information is below:

Dr. Wang Zhan, [wang.zhan@gmail.com](mailto:wang.zhan@gmail.com), phone: 301-405-3035 or 301-405-2590

MR Physicist

Maryland Neuroimaging Center