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Advanced Medical Imaging Technology
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Advanced Medical Imaging Technology

MRI Clinical Document Addendum

**Student Handbook
2026-2027**

***Last Revision: August 10, 2026
Implementation: August 24, 2026***

Magnetic Resonance Imaging Overview

Magnetic Resonance Imaging is a medical imaging specialty that utilizes magnetic fields and their properties in the diagnosis of disease and the analysis of human anatomy. Training in Magnetic Resonance Imaging is twelve consecutive months in duration and will be delivered through a combination of classroom lectures, labs, and clinical site placements. Students successfully completing the curriculum and earning a degree will have fulfilled requirements to sit for the nationally administered board examination.

Mission Statement - Magnetic Resonance Imaging

Consistent with the mission of the University, the Magnetic Resonance Imaging technology curriculum is dedicated to serving the professional education and experience-based learning needs of its students. It is the program's goal to supply each graduate with the necessary level of training and experience to adequately prepare for the national board examinations. All students who are dedicated to their studies and the betterment of humankind through medical imaging will find this a safe and inclusive environment for advancing their education.

MRI Program Goals & Outcomes

Goal 1 - Students will demonstrate critical thinking skills within their didactic and clinical education.

- Students will evaluate MR techniques, parameters and trade-offs in order to ensure high diagnostic images.
- Students will improve patient care through self-evaluation and critique.

Goal 2 - Students will demonstrate the ability to communicate effectively in a variety of professional settings.

- Students will demonstrate effective communication skills related to medical imaging.
- Students will demonstrate the ability to communicate through oral or written correspondence pertaining to healthcare.

Goal 3 - Students will demonstrate clinical competency.

- Students will demonstrate proper anatomical regions on MR images.
- Students will demonstrate proficiency in obtaining diagnostic MR images.

Goal 4 – Students will demonstrate professionalism within their didactic and clinical education.

- Students will function as professionals in their clinical healthcare setting.
- Students will demonstrate professional growth in their didactic and clinical education courses.

Program Accreditation Information

Magnetic Resonance Imaging Accreditation

Joint Review Committee on Education in Radiologic Technology (JRCERT)

JRCERT Contact Information

Address: 20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
Email: mail@jrcert.org

The JRCERT monitors performance measures of programs and makes this information available to the public. Successful completion of a JRCERT-accredited program assures you that you will be provided with the knowledge, skills, and professional values required for career success.

→ The MRI Program is currently accredited by the JRCERT. The most recent accreditation renewal was in 2025, the program was awarded an 8-year accreditation and is due to renew again in 2033. General program accreditation information and the current accreditation award letter can be found here:
<https://www.jrcert.org/programs/university-of-cincinnati/>

For additional JRCERT program requirements, JRCERT standards, and contact information please visit the following webpage: → <http://www.jrcert.org/programs-faculty/> → <https://www.jrcert.org/wp-content/uploads/2024/06/2021-Magnetic-Resonance-Standards.pdf> Program Accreditation Information

MRI Practice Standards

The practice of magnetic resonance is performed by a segment of health care professionals responsible for the use of radiofrequencies (RFs) within a magnetic field on humans and animals for diagnostic, therapeutic or research purposes. A magnetic resonance technologist performs magnetic resonance procedures at the request of and for interpretation by a licensed independent practitioner.

The complex nature of disease processes involves multiple imaging modalities. Although an interdisciplinary team of clinicians, magnetic resonance technologists and support staff plays a critical role in the delivery of health services, it is the magnetic resonance technologist who performs the magnetic resonance examination that creates the images needed for diagnosis.

Magnetic resonance integrates scientific knowledge, technical competence, and patient interaction skills to provide safe and accurate procedures with compassion. A magnetic resonance technologist recognizes patient conditions essential for the successful completion of the procedure.

Magnetic resonance technologists must demonstrate an understanding of human anatomy, human physiology, pathology, pharmacology, and medical terminology. They must maintain a high degree of accuracy in positioning and magnetic resonance techniques. Magnetic resonance technologists must possess, use, and maintain knowledge about magnetic protection and safety. Magnetic resonance technologists independently perform or assist the licensed independent practitioner in the completion of diagnostic, therapeutic, interventional and fusion magnetic resonance procedures. Magnetic resonance technologists prepare, administer and document activities related to medications in accordance with state and federal regulations or lawful institutional policy.

The magnetic resonance technologist is the primary liaison between patients, licensed independent practitioners, and other members of the support team. Magnetic resonance technologists must remain sensitive to the needs of the patient through good communication, patient assessment, patient monitoring, and patient care skills. As members of the health care team, magnetic resonance technologists participate in quality improvement processes and continually assess their professional performance.

Magnetic resonance technologists think critically and use independent, professional, and ethical judgments in all aspects of their work. They engage in continuing education to include their area of practice to enhance patient care, public education, knowledge, and technical competence.

In the AMIT MRI program, all students will employ proper (non-ionizing) radiation and MR safety practices by comprehension of and adhering to the following Food and Drug Administration (FDA) specific absorption rate (SAR) limits when performing MR procedures on patients:

Whole body = 4 watts/kg for 15 minutes exposure average

Head = 3 watts/kg for 10 minutes exposure average

Head & Torso = 8 watts/kg for 5 minutes exposure average

Extremity = 12 watts/kg for 5 minutes exposure average

* The ASRT MRI Practice Standards complete document can be found:

<https://www.asrt.org/main/standards-regulations/practice-standards/practice-standards>



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Advanced Medical Imaging Technology (AMIT) Magnetic Resonance Imaging (MRI) Screening Questionnaire

This form is required to be completed by all AMIT MRI students.

The MR system is a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. Therefore, all individuals are required to fill out this form BEFORE entering the MR environment or MR system room. Be advised, the MR system magnet is ALWAYS on.

Last Name: _____ First Name: _____

Email Address: _____ Phone: _____

Have you had prior surgery or an operation of any kind?

- ☐ Yes
☐ No

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

Have you had an injury to the eye involving a metallic object (e.g. metallic slivers, foreign body)?

- ☐ Yes
☐ No

If yes, then please describe:

Have you ever been injured by a metallic object or foreign body?

- ☐ Yes
- ☐ No

If yes, then please describe:

WARNING:

Certain implants, devices, or objects may be hazardous to you in the MR environment or MR system room. Do not enter the MR environment or MR system room if you have any questions or concerns regarding an implant, device, or object.

Please indicate if you have any of the following:

- ☐ Aneurysm clip(s)
- ☐ Cardiac pacemaker
- ☐ Implanted cardioverter defibrillator (ICD)
- ☐ Electronic implant or device
- ☐ Magnetically activated implant or device
- ☐ Neurostimulation system
- ☐ Spinal cord stimulator

- ☐ Cochlear implant or implanted hearing aid
- ☐ Insulin infusion pump
- ☐ Implanted drug infusion device.
- ☐ Any type of prosthesis or implant
- ☐ Artificial or prosthetic limb
- ☐ Any metallic fragment or foreign body
- ☐ Any external or internal metallic object
- ☐ Hearing aid
- ☐ Other implant/device

Important Instructions:

Remove all metallic objects before entering the MR environment or MR system room including hearing aids, beeper, cell phone, keys, eyeglasses, hair pins, barrettes, jewelry (including body piercing jewelry), watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, nail clipper, steel-toed boots/shoes, and tools. Loose metallic objects are especially prohibited in the MR system room and MR environment.

Please consult with the Advanced Medical Imaging Technology (AMIT) program if you have any questions, or concerns, BEFORE you enter the MR system room or the AMIT program.

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form. It is my responsibility to notify the AMIT Program should any of the above answers change.

Print Name: _____

Signature: _____ Date: _____

MRI Student Supervision Policy – Student

All students are required to perform imaging procedures under the **direct supervision** of a qualified practitioner until the student achieves competency. After achieving competency, students are required to perform imaging procedures under **indirect supervision** of a qualified magnetic resonance technologist.

JRCERT standard 5.4 provides further guidance in “qualified magnetic resonance technologist.” Students are only allowed to work under direct and indirect supervision from ARRT MR registered technologists. Under no circumstances should students be supervised, either indirectly or directly, by a technologist who is not registered by the ARRT in magnetic resonance imaging. If a student should be in a clinical area without an ARRT MR registered technologist due to clinical instructor or qualified personnel absence, they should contact the program director immediately for clinical reassignment.

Direct supervision is defined as student supervision provided by a qualified magnetic resonance technologist who reviews the procedure in relation to the student’s achievement, evaluates the condition of the patient in relation to the student’s knowledge, is physically present during the conduct of the procedure, and reviews and approves the procedure and/or image.

Indirect supervision is defined as student supervision provided by a qualified magnetic resonance technologist who is immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified magnetic resonance technologist adjacent to the room or location where a magnetic resonance procedure is being performed. This availability applies to all areas where magnetic resonance equipment is in use on patients.

All students are required to perform imaging procedures under the **direct supervision** of a qualified practitioner until the student achieves competency. After achieving competency, students are required to perform imaging procedures under **indirect supervision** of a qualified magnetic resonance technologist.

I have read and understand the information in this policy.

To be signed within your Trajecsyst account.

MRI Student Supervision Policy – Clinical Site

All students are required to perform imaging procedures under the **direct supervision** of a qualified practitioner until the student achieves competency. After achieving competency, students are required to perform imaging procedures under **indirect supervision** of a qualified magnetic resonance technologist.

JRCERT standard 5.4 provides further guidance in “qualified magnetic resonance technologist.” Students are only allowed to work under direct and indirect supervision from ARRT MR registered technologists. Under no circumstances should students be supervised, either indirectly or directly, by a technologist who is not registered by the ARRT in magnetic resonance imaging. If a student should be in a clinical area without an ARRT MR registered technologist due to clinical instructor or qualified personnel absence, they should contact the program director immediately for clinical reassignment.

Direct supervision is defined as student supervision provided by a qualified magnetic resonance technologist who reviews the procedure in relation to the student’s achievement, evaluates the condition of the patient in relation to the student’s knowledge, is physically present during the conduct of the procedure, and reviews and approves the procedure and/or image.

Indirect supervision is defined as student supervision provided by a qualified magnetic resonance technologist who is immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified magnetic resonance technologist adjacent to the room or location where a magnetic resonance procedure is being performed. This availability applies to all areas where magnetic resonance equipment is in use on patients.

All students are required to perform imaging procedures under the **direct supervision** of a qualified practitioner until the student achieves competency. After achieving competency, students are required to perform imaging procedures under **indirect supervision** of a qualified magnetic resonance technologist.

I have read and understand the information in this policy. As a technologist/clinical setting instructor, I take responsibility for enforcing and monitoring these supervision requirements.

I am a registered ARRT(MR) technologist - Yes No

Clinical Instructor Name and Signature

Date

Clinical Setting Location

Trajecsys

The Trajecsys platform is the official method for students to document clinical attendance and clinical progression. The following items will be documented within Trajecsys during the entire academic year.

- Clinical Rotation Schedule
- Clinical Attendance/Time Sheets
- Conference Attendance/Time Sheets
- MRI Supervision Policy (Student & Clinical Sites)
- MRI ARRT Clinical Competency Completion Policy
- Clinical Site Orientation Checklist
- Clinical Competency Tracking (Logs & Evaluations)
- Student Mid-Rotation Assessment
- Student Performance Evaluations
- Student Evaluations of MRI Clinical Site & Clinical Preceptor

Students will refer to their directed practice syllabi and the clinical coordinator for the number of hours and number of competencies required during any semester. The student shall meet with the clinical coordinator when needed to review clinical hours or competencies. These meetings may NOT be during class time and will be scheduled with the clinical coordinator directly. While the program makes every effort to share received documentation with students, **it is the student's responsibility to maintain a copy of all records relating to clinical activities.**

- Each student will maintain their clinical time In Trajecsys each clinical day.
- Students will be signed in AND out by supervising technologists present at the time the student comes in/leaves for the day.
- Each student must use their own Trajecsys account to document their own time each day. Students attending the same clinical site rotation may not complete one-time record collectively.
- Each student must submit a time exception within Trajecsys to document all absences.
- Any deficit in clinical time or competencies must be addressed before the end of the semester. Students failing to address clinical deficits with the clinical coordinator in a timely manner will receive an incomplete (I) for the semester and will be at risk of grade reduction and/or dismissal from the program. Receiving a grade of an incomplete during the summer semester will result in board examination eligibility delays and/or program dismissal.

AMIT MRI Student Clinical Site Orientation Checklist

This form is to be completed by the Supervising Technologist on the first day of clinical rotation to ensure MRI student technologist has been formally orientated on the items listed below.

Upon completion, MRI student technologist will submit this form to AMIT MRI program faculty.

- ☐ MRI safety procedures
- ☐ Quench/Emergency stop/O² sensor alarm procedures
- ☐ Fire safety and procedures
- ☐ Evacuation procedures
- ☐ Chemical spill/hazard procedures
- ☐ HIPAA training
- ☐ Emergency Overhead Code training
- ☐ Cardiac/Respiratory Code training and procedures
- ☐ Electrical hazard procedures
- ☐ Standard precautions
- ☐ Venipuncture (if applicable)

_____ Clinical Site

_____ Supervising Technologist (Print & Signature)

_____ Student Technologist Signature (Print & Signature)

_____ DATE

MRI ARRT Clinical Competency Completion Policy

Demonstration of clinical competence means the student has performed the procedure(s) independently, consistently, and effectively during their formal education. Competent performance of these fundamental activities, in conjunction with mastery of the knowledge and cognitive skills covered by the MRI examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings.

General Performance Considerations

1. Patient Diversity
 - a. Variations in patient characteristics such as age, gender, and medical condition.
2. Patient Care Simulated Performance (CPR, Venipuncture, ECG)
 - a. Competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor, and affective skills required for performing the procedures on patients.
 - b. Skills required to competently perform the simulated task will generalize or transfer to patient scanning. The student must evaluate related images.
3. Elements of Competence
 - a. Program director, clinical coordinator, or clinical site preceptor must observe the student performing the procedure independently, consistently, and effectively.

Magnetic Resonance Imaging Specific Requirements

Candidates must demonstrate competence in the following areas:

- 7 mandatory general patient care procedures
 - o Procedures should be performed on patients whenever possible, but simulation is acceptable following the above guidelines regarding simulation.
- 8 mandatory MRI safety requirements
 - o Student must demonstrate competence
- 17 mandatory MRI imaging procedures
 - o Procedures MUST be completed on actual patients following above guidelines for demonstrating competence.
- 12 of 32 elective MRI imaging procedures
 - o Procedures should be performed on patients; however, up to 5 of the elective procedures may be performed on volunteers (provided site approves of scanning volunteers, and there is a policy to protect the volunteer and the site). All volunteer scans must be limited to the summer semester completion.
- 7 mandatory MRI quality control procedures
 - o Student must demonstrate competence

*See the MRI Student Competency Evaluation Form for specific details regarding what students must demonstrate independently to complete a scan for competency completion verification.

Magnetic Resonance Imaging Clinical Experience Requirement Procedures Verification Form

Category & Procedure M- Mandatory (17 w/ 3 scans) *- Elective (12 w/ 3 scans) QC- (7 w/ 3 repetitions) MRI Safety- (8 completed once) Patient Care- (7 completed once)	Date Performed	Time	Facility Name	Technologist Initials
Routine Brain (M)				
Routine Brain (M)				
Routine Brain (M)				
Routine Brain (M)				
Routine Brain (M)				
Internal Auditory Canal (M)				
Internal Auditory Canal (M)				
Internal Auditory Canal (M)				
Internal Auditory Canal (M)				
Internal Auditory Canal (M)				
Pituitary (M)				
Pituitary (M)				
Pituitary (M)				
Pituitary (M)				
Pituitary (M)				
Orbits *				
Orbits *				
Orbits *				
Orbits *				
Orbits *				
Cranial Nerves (non IACS) *				

Cranial Nerves (non IACS) *				
Cranial Nerves (non IACS) *				
Cranial Nerves (non IACS) *				
Cranial Nerves (non IACS) *				
Vascular Head (MRA) (M)				
Vascular Head (MRA) (M)				
Vascular Head (MRA) (M)				
Vascular Head (MRA) (M)				
Vascular Head (MRA) (M)				
Vascular Head (MRV) *				
Vascular Head (MRV) *				
Vascular Head (MRV) *				
Vascular Head (MRV) *				
Vascular Head (MRV) *				
Brain Perfusion *				
Brain Perfusion *				
Brain Perfusion *				
Brain Perfusion *				
Brain Perfusion *				
Brain Spectroscopy *				
Brain Spectroscopy *				
Brain Spectroscopy *				
Brain Spectroscopy *				
Brain Spectroscopy *				
Soft Tissue Neck *				
Soft Tissue Neck *				
Soft Tissue Neck *				
Soft Tissue Neck *				

Soft Tissue Neck *				
Vascular Neck (MRA) (M)				
Vascular Neck (MRA) (M)				
Vascular Neck (MRA) (M)				
Vascular Neck (MRA) (M)				
Vascular Neck (MRA) (M)				
Cervical (M)				
Cervical (M)				
Cervical (M)				
Cervical (M)				
Cervical (M)				
Thoracic (M)				
Thoracic (M)				
Thoracic (M)				
Thoracic (M)				
Thoracic (M)				
Lumbar (M)				
Lumbar (M)				
Lumbar (M)				
Lumbar (M)				
Lumbar (M)				
Spinal Trauma *				
Spinal Trauma *				
Spinal Trauma *				
Spinal Trauma *				
Spinal Trauma *				
Total Spine (Large FOV) *				

Total Spine (Large FOV) *				
Total Spine (Large FOV) *				
Total Spine (Large FOV) *				
Total Spine (Large FOV) *				
Sacrum/Coccyx *				
Sacrum/Coccyx *				
Sacrum/Coccyx *				
Sacrum/Coccyx *				
Sacrum/Coccyx *				
Sacroiliac (SI) Joint *				
Sacroiliac (SI) Joint *				
Sacroiliac (SI) Joint *				
Sacroiliac (SI) Joint *				
Sacroiliac (SI) Joint *				
Chest (Non-Cardiac) *				
Chest (Non-Cardiac) *				
Chest (Non-Cardiac) *				
Chest (Non-Cardiac) *				
Chest (Non-Cardiac) *				
Breast *				
Breast *				
Breast *				
Breast *				
Breast *				
Vascular Thorax *				
Vascular Thorax *				

Vascular Thorax *				
Vascular Thorax *				
Vascular Thorax *				
Brachial Plexus *				
Brachial Plexus *				
Brachial Plexus *				
Brachial Plexus *				
Brachial Plexus *				
Liver (M)				
Liver (M)				
Liver (M)				
Liver (M)				
Liver (M)				
Pancreas *				
Pancreas *				
Pancreas *				
Pancreas *				
Pancreas *				
MRCP (M)				
MRCP (M)				
MRCP (M)				
MRCP (M)				
MRCP (M)				
Adrenals *				
Adrenals *				
Adrenals *				
Adrenals *				
Adrenals *				

Kidneys *				
Kidneys *				
Kidneys *				
Kidneys *				
Kidneys *				
Enterography *				
Enterography *				
Enterography *				
Enterography *				
Enterography *				
Vascular Abdomen *				
Vascular Abdomen *				
Vascular Abdomen *				
Vascular Abdomen *				
Vascular Abdomen *				
Female Soft Tissue Pelvis *				
Female Soft Tissue Pelvis *				
Female Soft Tissue Pelvis *				
Female Soft Tissue Pelvis *				
Female Soft Tissue Pelvis *				
Male Soft Tissue Pelvis *				
Male Soft Tissue Pelvis *				
Male Soft Tissue Pelvis *				
Male Soft Tissue Pelvis *				
Male Soft Tissue Pelvis *				
TMJ *				
TMJ *				
TMJ *				

TMJ *				
TMJ *				
Sternum/SC *				
Sternum/SC *				
Sternum/SC *				
Sternum/SC *				
Sternum/SC *				
Shoulder (M)				
Shoulder (M)				
Shoulder (M)				
Shoulder (M)				
Shoulder (M)				
Upper Extremity Long Bone *				
Upper Extremity Long Bone *				
Upper Extremity Long Bone *				
Upper Extremity Long Bone *				
Upper Extremity Long Bone *				
Elbow *				
Elbow *				
Elbow *				
Elbow *				
Elbow *				
Wrist (M)				
Wrist (M)				
Wrist (M)				
Wrist (M)				
Wrist (M)				
Hand *				

Hand *				
Hand *				
Hand *				
Hand *				
Finger/Thumb *				
Finger/Thumb *				
Finger/Thumb *				
Finger/Thumb *				
Finger/Thumb *				
Bony Pelvis *				
Bony Pelvis *				
Bony Pelvis *				
Bony Pelvis *				
Bony Pelvis *				
Hip (M)				
Hip (M)				
Hip (M)				
Hip (M)				
Hip (M)				
Lower Extremity Long Bone *				
Lower Extremity Long Bone *				
Lower Extremity Long Bone *				
Lower Extremity Long Bone *				
Lower Extremity Long Bone *				
Knee (M)				
Knee (M)				
Knee (M)				
Knee (M)				

Knee (M)				
Ankle (M)				
Ankle (M)				
Ankle (M)				
Ankle (M)				
Ankle (M)				
Foot (M)				
Foot (M)				
Foot (M)				
Foot (M)				
Foot (M)				
MR Arthrogram *				
MR Arthrogram *				
MR Arthrogram *				
MR Arthrogram *				
MR Arthrogram *				
MSK Soft Tissue *				
MSK Soft Tissue *				
MSK Soft Tissue *				
MSK Soft Tissue *				
MSK Soft Tissue *				
Imaging Post-Processing (M)				
Imaging Post-Processing (M)				
Imaging Post-Processing (M)				
Imaging Post-Processing (M)				
Imaging Post-Processing (M)				
CINE *				
CINE *				

CINE *				
CINE *				
CINE *				
Signal to Noise (M)				
Signal to Noise (M)				
Signal to Noise (M)				
Center Frequency (M)				
Center Frequency (M)				
Center Frequency (M)				
Transmitter Gain/Attenuation (M)				
Transmitter Gain/Attenuation (M)				
Transmitter Gain/Attenuation (M)				
Geometric Accuracy (M)				
Geometric Accuracy (M)				
Geometric Accuracy (M)				
Equipment Inspection (M)				
Equipment Inspection (M)				
Equipment Inspection (M)				
Monitor Cryogen Levels (M)				
Monitor Cryogen Levels (M)				
Monitor Cryogen Levels (M)				
Room Temperature (M)				
Room Temperature (M)				
Room Temperature (M)				
BLS/CPR (M)				
Vital Signs (BP, Pulse, etc.) (M)				
Sterile Technique (M)				

Standard Precautions (M)				
Transfer of Patient (M)				
Care of Medical Equipment (M)				
Venipuncture (M)				
Screening Patients for MR Safety (M)				
Static Magnetic Field (Translational and Rotational Forces) (M)				
Radiofrequency Field (SAR, positioning considerations) (M)				
Gradient Magnetic Fields (e.g., Induced Current, Auditory Considerations) (M)				
Patient Communication & Monitoring Considerations (M)				
Contrast Media Safety (M)				
Other Safety (e.g., Cryogen Safety, Fire, Medical Emergencies, Laser Alignment Lights, Quench) (M)				
Identify MR Safety Zones (M)				

MRI Imaging Procedures '26-'27

Name: _____

Must Complete all 17 Mandatory procedures with 3 scans + evaluation

Must Complete 12 Elective procedures with 3 scans + evaluation

Must Complete a minimum of 135 anatomy-based competencies

Must Complete 7 QC Requirements with 3 repetitions

Must Complete 7 Patient Care Requirements once

Must Complete 8 MRI Safety Requirements once

	Procedure	M	E	Check-Off #1	Check-Off #2	Check-Off #3	Extra Check-Off (#4)	Extra Check-Off (#5)	Evaluation Completed
Head and Neck	Routine Brain	X							
	Internal Auditory Canal (IACs)	X							
	Pituitary	X							
	Orbits		X						
	Cranial Nerves (non IACS)		X						
	Vascular Head (MRA)	X							
	Vascular Head (MRV)		X						
	Brain Perfusion		X						
	Brain Spectroscopy		X						
	Soft Tissue Neck		X						
	Vascular Neck (MRA)	X							
	Cervical	X							
Spine	Thoracic	X							
	Lumbar	X							
	Spinal Trauma		X						

	Total Spine (Large FOV)		X						
	Sacrum/Coccyx		X						
	Sacroiliac (SI) Joint		X						
Thorax	Chest (Non Cardiac)		X						
	Breast		X						
	Vascular Thorax		X						
	Brachial Plexus		X						
Abdomen and Pelvis	Liver	X							
	Pancreas		X						
	MRCP	X							
	Adrenals		X						
	Kidneys		X						
	Enterography		X						
	Vascular Abdomen		X						
	Female Soft Tissue Pelvis		X						
	Male Soft Tissue Pelvis		X						
MSK	TMJ		X						
	Sternum/SC Joints		X						
	Shoulder	X							
	Upper Extremity Long Bone		X						
	Elbow		X						
	Wrist	X							
	Hand		X						

	Finger/Thumb		X						
	Bony Pelvis		X						
	Hip	X							
	Lower Extremity Long Bone		X						
	Knee	X							
	Ankle	X							
	Foot	X							
	Arthrogram		X						
	MSK Soft Tissue		X						
Special Imaging Procedures	Imaging Post-Processing	X							
	CINE		X						
Quality Control	Signal to Noise	X							
	Center Frequency	X							
	Transmitter Gain/Attenuation	X							
	Geometric Accuracy	X							
	Equipment Inspection	X							
	Monitor Cryogen Levels	X							
	Room Temperature and Humidity	X							
Patient Care Procedures	BLS/CPR	X							
	Vital Signs (BP, Pulse, etc.)	X							
	Sterile Technique	X							
	Standard Precautions	X							

	Transfer of Patient	X			
	Care of Medical Equipment	X			
	Venipuncture	X			
MRI Safety Procedures	Screening Patients for MRI Safety	X			
	Identify MR Safety Zones	X			
	Static Magnetic Field (e.g., Translational and Rotational Forces)	X			
	Radiofrequency Field (SAR, positioning considerations)	X			
	Gradient Magnetic Fields (e.g., Induced Current, Auditory Considerations)	X			
	Patient Communication & Monitoring Considerations	X			
	Contrast Media Safety	X			
	Other Safety (e.g., Cryogen, Fire, Medical Emergencies, Laser Lights, Quench)	X			

MRI Student Competency Evaluation

Student: _____ Scan Competency: _____

Clinical Rotation: _____ Date: _____

Supervising Technologist: _____

Patient Care Skills

- Evaluation of requisition or medical record
- Patient identification
- Documentation of patient history (including allergies)
- Safety Screening
- Patient care and assessment
- Explanation of procedure
- Preparation of examination room
- Standard Precautions
- Preparation and/or administration of contrast
- Appropriate MRI safety procedures
- Patient discharge with post-procedure instructions

Acceptable	Not Acceptable	N/A

Technical and Procedural Skills

- Selection of imaging coils
- Patient positioning
- Protocol selection
- Parameter selection
- Image display
- Networking
- Archiving
- Post-processing
- Documentation of procedure/patient data in appropriate records
- Completion of acquisition

Acceptable	Not Acceptable	N/A

Evaluation Skills

- Analysis of the image for technical quality
- Demonstration of correct anatomic regions
- Proper identification on images and patient data
- Recognition of relevant pathology
- Exam completeness

Acceptable	Not Acceptable	N/A

Is the student capable of performing this examination without direct assistance?

☐ YES

☐ NO

_____ Supervising Technologist Name/Signature

_____ Student Technologist Name/Signature

Student Mid-Rotation Assessment

This student assessment is meant to be an early action formative assessment of the student's clinical performance. This evaluation tool will be utilized to promote student learning, personal growth and self-improvement. This evaluation will not be accounted for in the student's overall course grade.

Please complete this evaluation for each individual student you are educating in this rotation. If you feel as though you have not worked with the student for enough time, please forward this evaluation to another technologist within your department.

If this evaluation does not thoroughly cover your assessment of the student, please reach out to the Program Director and/or Clinical Coordinator for further discussion.

Student name _____ Date _____

Clinical site _____ Semester/Year _____

Technologist Name/Signature _____

Please rate the student's performance in the following areas:

0 - Deficient **1** - Poor **2** - Average **3** - Good **4** - Excellent

	0	1	2	3	4
Initiative					
Professionalism					
Patient Rapport					
Staff Rapport					
Technical Knowledge					
Receptive to Feedback					

Strengths of this student:

Areas for improvement:

Additional Comments/Concerns:

MRI Clinical Evaluation Report

Student name _____ Date _____

Clinical site _____ Semester/Year _____

Technologist _____

Please evaluate the University of Cincinnati MRI students on the following with 1 being poor, 2 being average, 3 being good, and 4 being excellent. Please grade the student on where they should be based on how far they are in the program.

1	3	3	4	N/A	Question:
1	2	3	4	N/A	1. Does the student dress appropriately and according to UC's uniform policy? Is the student punctual?
1	2	3	4	N/A	2. Does the student get along well with staff/communicate well with physicians?
1	2	3	4	N/A	3. Does the student take constructive criticism well?
1	2	3	4	N/A	4. Does the student seek guidance about things he/she doesn't understand?
1	2	3	4	N/A	5. Does the student display or express enthusiasm to learn?
1	2	3	4	N/A	6. Does the student show initiative (i.e., bringing patients to MR, screening patients, setting up exams, running scans, either with assistance or on their own?)
1	2	3	4	N/A	7. Does the student assist in stocking scan room and help in maintaining the equipment?
1	2	3	4	N/A	8. Does the student select the correct coils, protocols, sequences, and parameters for the exam?
1	2	3	4	N/A	9. Is the student interested in helping with exams?
1	2	3	4	N/A	10. Does the student properly evaluate the requisition and/or medical records?
1	2	3	4	N/A	11. Does the student obtain necessary information before beginning an exam with regard to patient history/MR screening/patient ID?
1	2	3	4	N/A	12. Does the student explain the procedure to patients prior to scan?
1	2	3	4	N/A	13. Does the student demonstrate appropriate knowledge in image display, filming, and archiving?
1	2	3	4	N/A	14. Does the student employ proper MRI safety procedures and precautions?
1	2	3	4	N/A	15. Does the student employ Universal Precautions when necessary?
1	2	3	4	N/A	16. Does the student evaluate the resulting images for image quality?
1	2	3	4	N/A	17. Does the student evaluate the resulting images for optimal demonstration of anatomic region?
1	2	3	4	N/A	18. Does the student evaluate the resulting images for proper identification on images and patient data?
1	2	3	4	N/A	19. Does the student evaluate the resulting images for exam completeness?
1	2	3	4	N/A	20. Does the student assist the patient in dressing/undressing/help onto MR scanner table as necessary?
1	2	3	4	N/A	21. Does student prepare scan room and position the patient properly?
1	2	3	4	N/A	22. Does the student show technical proficiency?
1	2	3	4	N/A	23. Does the student show technical knowledge?

1	2	3	4	N/A	24. Does the student talk to the patient during the exam, letting them know of the scanner noises and directions (i.e., "please hold still", "noise for 4 minutes", "How are you doing? etc.)
1	2	3	4	N/A	25. Is the student discreet about asking the technologist questions in front of the patient?
1	2	3	4	N/A	26. Does the student explain the procedure to the patient to make the patient more comfortable?
1	2	3	4	N/A	27. Does the student refrain from inappropriate patient communication?
1	2	3	4	N/A	28. Is the student courteous to patients?
1	2	3	4	N/A	29. Does the student make good use of his/her time?
1	2	3	4	N/A	30. The student can analyze the need to modify standard procedures and technical factors to accommodate patient conditions and other variables.

What are the strengths of this student?

Areas for improvement?

Any other comments?

Technologist signature _____

Date _____

Student Evaluation of MRI Clinical Site & Clinical Preceptor

Student's Name _____ Semester & Year _____

Clinical Site _____ Clinical Preceptor _____

This form is confidential and is intended to enhance the clinical experience for future MRI students. Your honest input is appreciated.

Clinical Site Evaluation

Please evaluate your MRI clinical site on the following categories/questions.

Responses: Strongly Disagree=1, Disagree=2, Neither Agree Nor Disagree=3, Agree=4, Strongly Agree=5, N/A

Answer Scale:

Question:

1	2	3	4	5	N/A	Questions:
1	2	3	4	5	N/A	1. The pace of the site enhanced my learning experience.
1	2	3	4	5	N/A	2. The organization of the MRI department allowed for optimal learning experiences during your rotation.
1	2	3	4	5	N/A	3. The expectations of you were well outlined and communicated early on during your rotation.
1	2	3	4	5	N/A	4. Were you comfortable with the level of responsibility you had during your rotation.
1	2	3	4	5	N/A	5. The technologist-student relationships enhanced my learning experience.
1	2	3	4	5	N/A	6. The technologist(s) were helpful.
1	2	3	4	5	N/A	7. The physician(s) were helpful.
1	2	3	4	5	N/A	8. Do you feel that as a result of this rotation you have developed professionally?
1	2	3	4	5	N/A	9. Do you feel that your professional objectives were met during your rotation?
1	2	3	4	5	N/A	10. How likely would you be to recommend this site to other students?

Do you have any additional comments or feedback regarding your rotation?

Clinical Preceptor Evaluation

Please evaluate your MRI clinical preceptor on the following categories/questions.

Responses: Strongly Disagree=1, Disagree=2, Neither Agree Nor Disagree=3, Agree=4,
Strongly Agree=5, N/A

Answer Scale:

Question:

1	2	3	4	5	N/ A	Questions:
1	2	3	4	5	N/A	1. Does the preceptor allow for optimal learning experiences during your rotation?
1	2	3	4	5	N/A	2. Does the preceptor provide feedback/constructive criticism regarding your performance?
1	2	3	4	5	N/A	3. Does the preceptor communicate your expectations well?
1	2	3	4	5	N/A	4. Does the preceptor oversee your clinical experience during your rotation (daily and/or weekly)?
1	2	3	4	5	N/A	5. Does the preceptor make themselves available to help you when needed?
1	2	3	4	5	N/A	6. Does the preceptor display or express enthusiasm to have you as a student?
1	2	3	4	5	N/A	7. Does the preceptor answer your questions carefully and with patience?
1	2	3	4	5	N/A	8. Does the preceptor act approachable and responsive when you have questions?
1	2	3	4	5	N/A	9. Does the preceptor use explanations that are clear and understandable?
1	2	3	4	5	N/A	10. Does the preceptor encourage you to ask questions and participate in all aspects of MRI patient care and scanning?

Do you have any additional comments or feedback regarding your preceptor?

Declaration of Pregnancy – Magnetic Resonance Imaging

MRI Safety Policy:

Pregnant students, staff and health care providers may enter the scan room when the static field is on but should not remain in the MR scanner room or Zone IV during actual data acquisition or scanning.

It is the student's responsibility to submit written disclosure of their pregnancy to the program director. Disclosure of pregnancy is a voluntary declaration and can be withdrawn at any time. Students have the right to refuse disclosure of medical information; however, if a student chooses not to disclose information regarding pregnancy, the student is acknowledging that they are assuming all responsibility for their condition and any potential complications that may arise.

Upon medical verification of pregnancy, students have the following four (4) options:

Option #1 – Elect to withdraw from the Advanced Medical Imaging Technology program.

- ☐ By choosing this option, the student will withdraw from the program effective immediately and will be immediately removed from their current clinical rotation.

Option #2 - Elect to continue in the Advanced Medical Imaging Program realizing that there may be possible restrictions implemented by my clinical sites.

- ☐ If the student so decides, they may continue in the Program under the following conditions:
 - ☐ The student shall not remain in the scan room during actual data acquisition or scanning.
 - ☐ The student shall participate in all scheduled clinical rotation areas as assigned.
 - ☐ Absences due to pregnancy are governed by the Attendance and Medical Leave of Absences policy.

Option #3 – Elect to continue in the Advanced Medical Imaging Program without any program modifications assuming all responsibility to you and your fetus' health.

- ☐ By choosing this option, the student implies acknowledgement that she has chosen to disregard the recommendations made by the ACR and the Program and that she is assuming responsibility for all potential risks and related complications.

Option #4 – Withdraw the Declaration of Pregnancy Form

- ☐ By choosing this option, the student acknowledges that their declaration of pregnancy is hereby officially withdrawn. The student implies acknowledgement that they are assuming responsibility for all potential risks and related complications

Pregnancy Form – Magnetic Resonance Imaging

Officially, I am declaring my pregnancy to the AMIT program faculty member. I the undersigned do hereby acknowledge that I have been counseled regarding the possible health risks to my unborn fetus and my option to either withdraw or continue in the program in full accordance with the Advanced Medical Imaging Technology Program written Magnetic Resonance Imaging Pregnancy Policy.

Below, I have indicated the option I choose to select:

_____ I elect to withdraw from the Advanced Medical Imaging Technology Program.

Signature

Date

_____ I elect to continue in the Advanced Medical Imaging Program realizing that there may be possible restrictions implemented by my clinical sites.

Signature

Date

_____ I elect to continue in the Advanced Medical Imaging Program without any program modifications assuming all responsibility to me and my fetus' health.

Signature

Date

_____ Effective immediately, I am officially withdrawing my declaration of pregnancy.

Signature

Date

As the Program Director, I have reviewed the possible health risks with the student and have confirmed her program withdraw or continuation as signed above

Signature

Date