

MRI Accreditation Program Visual Checklist

MRI Facility Name: _____

MRI Scanner Identifier: _____

Date:																													
Patient Transport and Gantry	Table position and other displays																												
	Alignment lights																												
	Horizontal smoothness of motion and stability																												
	Vertical motion smoothness and stability																												
Filming Viewing	Laser camera																												
	Light boxes																												
RF Integrity and Control Room	RF door contacts																												
	RF window-screen integrity																												
	Operator console switches/lights/meters																												
	Patient monitor (if present)																												
	Patient intercom																												
	Room temperature/room humidity																												
Facility Safety	Emergency cart																												
	Safety warning signage																												
	Door indicator switch (if installed)																												
	Cryogen level indicator																												
Pass = <input checked="" type="checkbox"/> Fail = F Does Not Apply = NA																													
Technologist Initials:																													

Reviewed by: _____
Qualified Medical Physicist/MRI Scientist

Date of Review: _____