



Screenings list MRI examination

The MRI uses a very strong magnetic field. This means that if there is metal inserted in any part of your body, there might be a health hazard for you. Sometimes it is impossible to perform the examination. Therefore we ask you to answer the following questions carefully.

If you have to answer one of the standard questions below with a "YES": Please contact us by sending an email to the following address mri-veiligheid@tergooi.nl. If it is not possible to send an email you can call us at 088-7531500.

Standard questions: Do you have:

- yes no a pacemaker, ICD, a device to measure your heart rhythm or leads that are left after a device removal.
- yes no an artificial heart valve?
- yes no a neurostimulator?
- yes no a tissue-expander after a mastectomy? (a permanent breast implant is not a problem)
- yes no a glucometer or insulin pump which is situated directly on or under the skin?
- yes no an internal pump/ device (for instance a hydrocephalus pump or medication pump)?
- yes no an aneurysm clip implanted before 2001 in the head?
- yes no an intraocular lens containing metal? (The intraocular lens used for cataract operations does not contain metal)
- yes no an implant in your inner ear or a non-removable hearing aid?
- yes no an implant in your jaw with magnets to hold your dentures?
- yes no a metal splinter inside your body (due to working in the metal industry or because of a war injury?)
- yes no are you pregnant or could you be pregnant?

If you have to answer one of the questions below with a "YES" you don't have to email.

Additional questions: Do you have/are you

- yes no claustrophobic? (contact your requesting physician for any medication)
- yes no is it difficult to instill an IV? (if so, please contact your requesting physician)
- yes no false teeth that can be removed? (this should be removed before the examination)
- yes no a hearing aid? (this should be removed before the examination)
- yes no tattoos, piercings or tattooed eyeliner? (Piercings have to be removed at home before the examination, they must not be in during the examination).
- yes no a medication- of nicotine patch? (this should be removed before the examination)
- yes no recently have surgery (<6 weeks)? Please call for consultation 088-7531500
- yes no ever had an operation in which there was something containing metal inserted? If so, what kind of operation? _____
- yes no clips or stents inserted (for instance in your arteries)? If yes, where and when were they inserted? _____
- yes no breastfeeding?

What is your length: _____ cm and what is your weight: _____ kg

NB: if you are 150 kg or heavier, please call for consultation the radiology department 088-7531500

Important

I declare that I will not bring bank cards, telephones, hearing aids, watches and other jewellery into the examination room.

Name: _____ Male Female

Date of birth _____ Date of completion _____ Signature _____