ERETENIA NURSING HOME

36100 VICENZA, ITALY – VIALE ERETENIO, 12 – TEL. +39 (0)444/994511 – FAX +39 (0)444/543644 IMAGING DIAGNOSTICS

Dr. Marco SCABARDI - Dr. Carlo GUGLIELMINI - Dr. Fiorenzo SANDINI - Dr. Andrea BUSOLO

INFORMATION NOTES ABOUT THE PERFORMANCE OF THE MRI EXAMINATION



Dear Patient, Your doctor submitted a request for an MRI examination for you. We would like to provide you with some information about the performance of this examination and its possible complications which, despite all precautions, might take place.

MRI is an examination performed by means of Computerised Equipment, based on the use of a magnetic field (1.5T).

The examination may be performed with or without intravenous administration of the paramagnetic contrast agent, depending on the clinical issue. The Contrast Agent will be injected by means of a cannula needle with an automatic injector or manually. The quantity changes depending on the method, diagnostic investigation, body district to examine and the patient's body weight.

If a contrast agent is used, it is necessary to have been fasting for at least 6 hours. Routine drugs can be taken regularly, with some water. It is advisable to hydrate your body considerably (at least 1.5 I of water) the day before and the day after the examination.

For breast-feeding women, it is advisable, as a precaution, to stop breast feeding for the 24 hours following the administration of the contrast agent.

After the examination, the patient does not have to follow a precise regime or precise prescriptions, and may re-start his/her normal activities immediately.

On the day of the examination, the patient must go to the Radiology Service reception (Nursing Home Hall) with all his/her clinical documentation about the pathology in question, including the images of previous radiological examinations (X-ray, CT, MRI, bone scans, etc. and specialists' letters).

Patients will be told the number of the waiting room where they will have to wait until they are called to undergo the examination.

Before performing the examination, the patient will have to take off all metal objects, including watches, electronic devices, magnetic cards.

It should be born in mind that on the day of the examination, Patients should not use cosmetics.

The technician will show the patient where he/she has to take off his/her clothes (except for underwear, which should be made of cotton). After wearing a suitable coat, the patient will be placed on a sliding bed.

Depending on the diagnostic issue, superficial reels may be applied on the body district to examine.

In order to soften the background noise of the equipment, an isolating headset will be used.

To report any problems, the patient may call the Technician by means of a suitable trumpet that he/she will hold in his/her hand.

The patiently will be constantly monitored by means of a video camera.

The examination generally lasts between 30 and 45 minutes. During the examination, the patient must remain still.

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Imaging diagnostic service

Managers: Dr. Marco Scabardi, Dr. Carlo Guglielmini, Dr. Fiorenzo Sandini, Dr. Andrea Busolo Reservations RX, TAC, RM, ECO: +39 (0)444/994562

REFERRAL FOR A MAGNETIC RESONANCE IMAGING EXAMINATION

| USER | 'S DATA | GENERAL PRACTITIONER | | |
|---|---|--|--|---|
| | | | | |
| | me | | | |
| First r | name | DISTRICT TO EXAMINE | | |
| Date | of birth | | | |
| CLINIC | AL CLICDICIONIC | | | |
| CLINICA | AL SUSPICIONS | | | |
| | MAGNETIC RESONANCE I | MAGING INFORMED COI | <u>VSENT</u> | |
| perform be inject for at le water) t fragility, During | In examination performed by means of Computerised Equip ed with or without intravenous administration of the paramated by means of a cannula needle with an automatic injector east 6 hours. Routine drugs can be taken regularly, with sor the day before and the day after the examination. During the etc., a blood vessel may even break, resulting in leakage in the and after the administration of the Contrast Agent, units may be: | gnetic contrast agent, depending or or manually. <i>If a contrast agent is</i> ne water. It is advisable to hydrate he intravenous infusion with the case injection area; in this case, a local | n the clinical issingued, it is necestary it is necessary in the necessary in t | ue. The Contrast Agent will ssary to have been fasting insiderably (at least 1.5 l of for anatomic reasons, vein a applied. |
| 0 | Slight: nausea, vomit, pain in the injection site, hives, whea | Is | | |
| 0 | Moderate: dyspnea, hypotension-hypertension, tachycardi | a-bradycardia, collapse, vasovagal s | yncope | |
| 0 | Serious: pulmonary or glottis oedema, anaphylactic shock kidney failure. In these rare cases our service has suitable reanimation operators are readily available. | | | |
| | ctions (from 1 hour to 7 days post-injection) are most frequ s advisable to seek medical advice. | ently skin rashes, influenza-like syn | dromes, gastro | intestinal disorders. In this |
| 0 | Patients bearing the following should absolutely be exclude | ed from the MRI examination: | | |
| | Cardiac pacemaker | | YES | NO |
| | Intraocular metal splinters | | YES | NO |
| 0 | Patients with the following conditions will be carefully consand type): | sidered (assessing, each single time, | compatibility v | vith the implantation date |
| | Cardiac valves | | YES | NO |
| | Vascular metal clips, aortic-coronary bypasses, results on su intracranial aneurysms, etc. | urgery for | YES | NO |
| | Insulin pumps | | YES | NO |
| | Orthopaedic metal prostheses | | YES | NO |
| | Intraocular lens prostheses | | YES | NO |

Note: the prosthesis implantation documentation issued by the specialist who performed the surgical operation may be required.



YES

NO

Non-vascular metal clips

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| The pati | ent declares: | | | |
|--|--|--|--|--|
| 0 | Not suffering from claustrophobia | | | |
| 0 | Not having undergone surgical operations like | | | |
| 0 | Having worked in places where metal splinters could be found, for instance | | | |
| 0 | Having suffered accidents with penetration of metal fragments, in the following areas | | | |
| Women | patients also declare: | | | |
| 0 | Being pregnant (specify the week) | | | |
| 0 | Having had the last menstruation on | | | |
| 0 | Carrying intrauterine devices | | | |
| | ote: In case of ascertained or suspected pregnancy, the exertal Practitioner and the Radiologist. | camination will only be performed after a direct agreement has been reached by | | |
| | CLINICAL HISTORY EVALUAT | TION (reserved to the general practitioner) | | |
| 0 | Liver failure (serum bilirubin < 2.5 mg %) | report the value | | |
| 0 | Azotemia (< 50 mg %) | report the value | | |
| 0 | Severe kidney failure (serum bilirubin < 1.5 mg %) | report the value | | |
| | | WARNINGS | | |
| hyperse systemic the age NSF, the | nsitivity risks typical of every solution for injections, it sho c fibrosis (NSF) correlated with the use of contrast agents of 4 weeks and in patients with a liver transplantation or E European Agency for the Evaluation of Medicinal Produc- tioned that all patients who will receive these products und | gent intravenously, in any case taking into consideration the general huld be borne in mind that there have been reports of cases of nephrogenic containing Gadolinium in patients with serious kidney problems, in babies under for whom liver transplantation is expected. In order to minimise the risk of ts (EMEA) and the Committee for Medicinal Products for Human Use (CHMP) ergo laboratory examinations in order to ascertain the absence of serious kidney | | |
| I, the un | ndersigned, Mr./Ms. | born on | | |
| in | her | eby declare having been thoroughly informed | | |
| | he goals, performance and risks relative to the examir | nation with organ-iodine contrast medium by injection and I authorise/do not eneral Practitioner. | | |
| | | Patient's full signature | | |
| Vic | enza, on | | | |
| | General Practitioner's signature | Radiologist's signature | | |

