

Technologist Quality Control Procedures

The specific procedures for the Technologist Quality Control Program are those specified in the most current ACR MRI QC Manual.

LASER PRINTER QC STARTUP WORKSHEET

Day	0% patch	10% patch	40% patch	90% patch
Start Date:				
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Average				

For five consecutive working days and using the SMPTE in the upper left corner of the page, measure the optical density each of the specified patches (0%, 10%, 40% & 90%) of the six-on-one printout of SMPTE Pattern as described on pages 53 through 57 of the 2004 ACR MRI Quality Control Manual.

LASER PRINTER QC STARTUP WORKSHEET

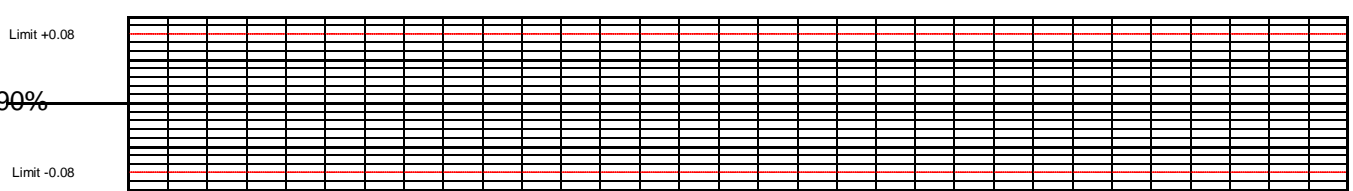
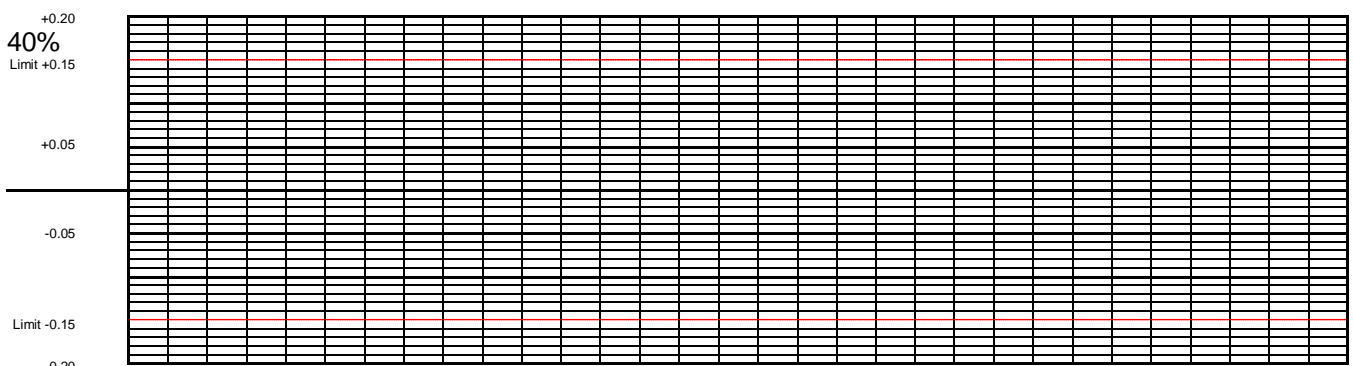
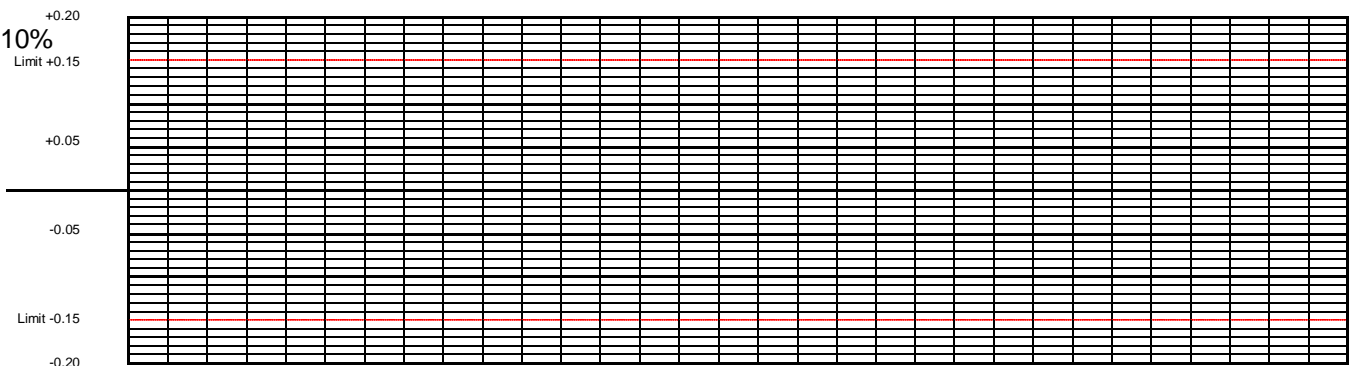
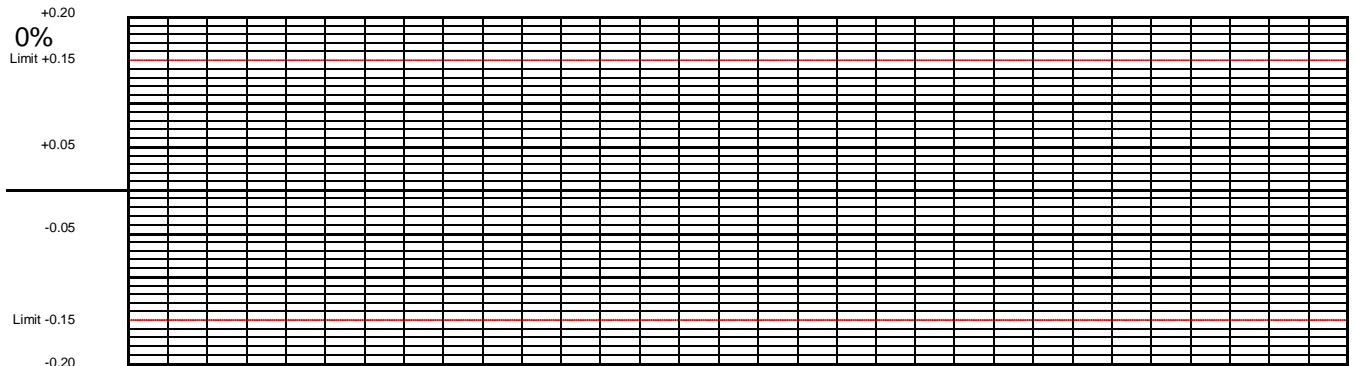
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Start Date:				
Day 1				
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LASER FILM PRINTER CONTROL CHART – PERFORMED WEEKLY

Laser Film Printer: _____ Film: _____ Calendar Year: _____

Month:	
Date:	
Initials:	



REMARKS

Date	Action

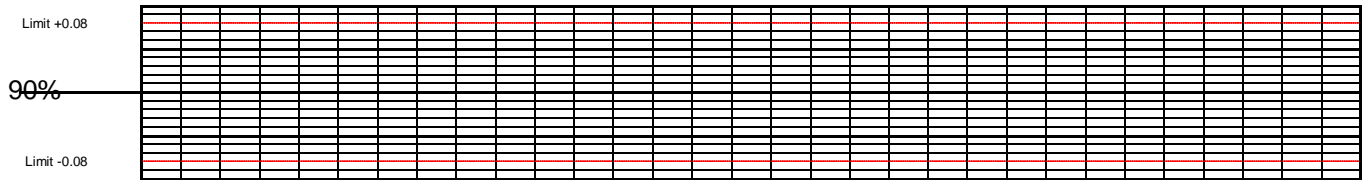
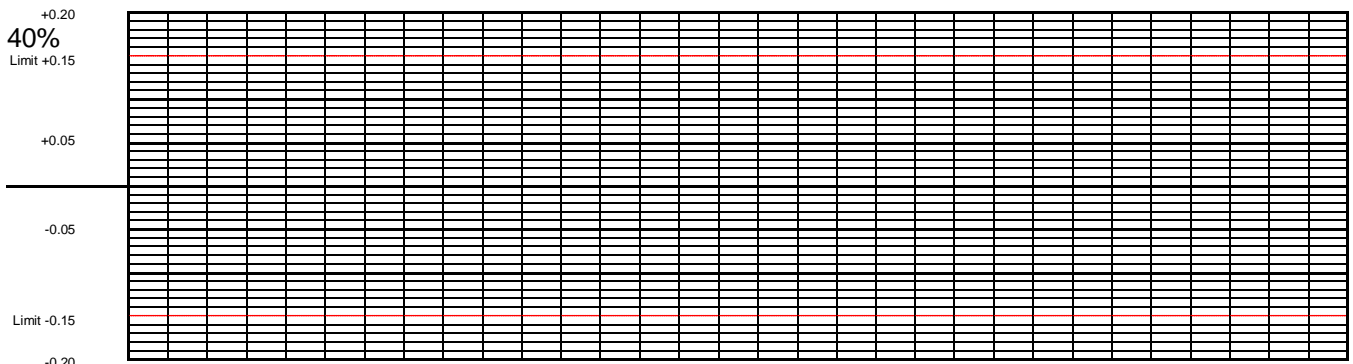
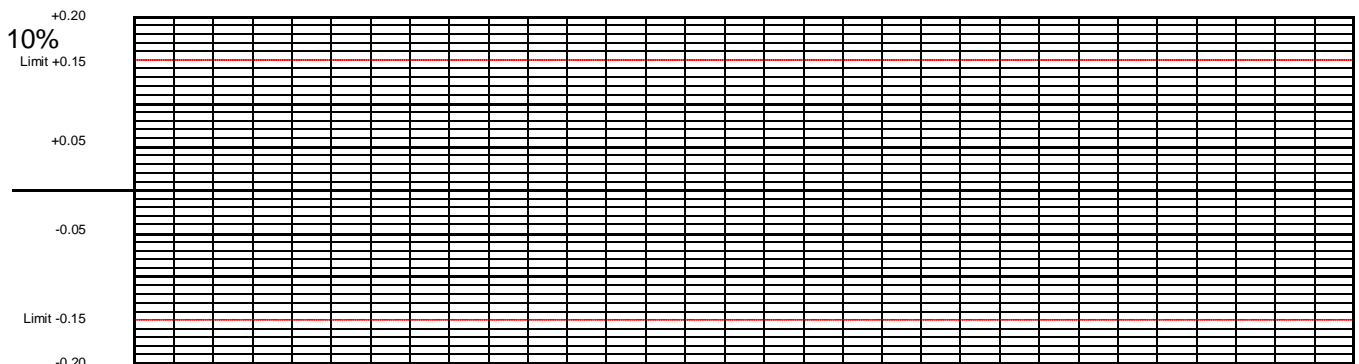
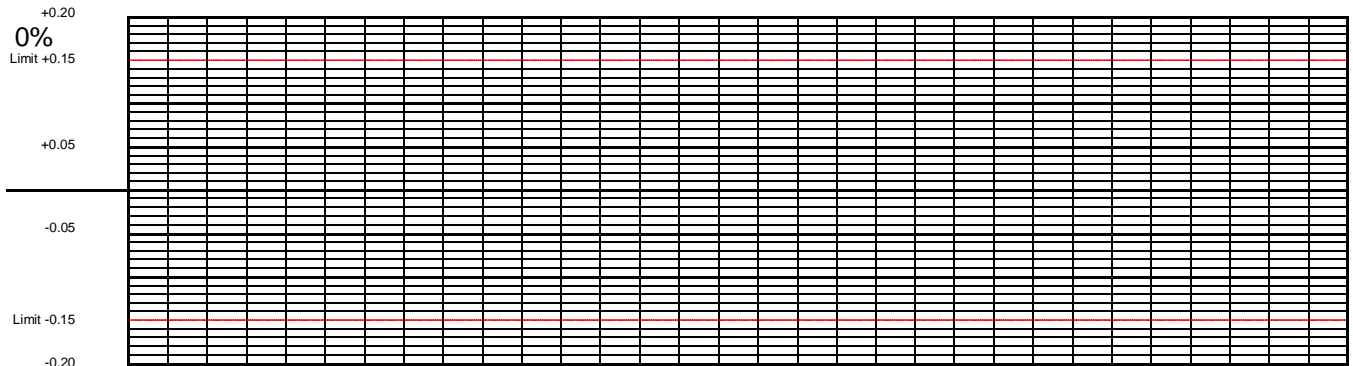
Date	Action

This Laser Film Printer Control Chart is based upon information available on the ACR web site.

LASER FILM PRINTER CONTROL CHART – PERFORMED WEEKLY

Laser Film Printer: _____ Film: _____ Calendar Year: _____

Month:	
Date:	
Initials:	



REMARKS

Date	Action

Date	Action

This Laser Film Printer Control Chart is based upon information available on the ACR web site.

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: _____

Date of Review: _____

Qualified Medical Physicist/MRI Scientist

MRI Accreditation Program Visual Checklist

MRI Facility Name:

MRI Scanner Identifier:

Date:																													
Patient Transport and Gantry	Table position and other displays																												
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