



POLICIES AND PROCEDURES

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CROSS REFERENCE: A. Feb 2003
BoDs Mtg
B. Pre AGC
2003 BoDs
Mtg
C. Auditor General's
Report 2006

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ISSUED BY: Board of Directors

CATEGORY: ADMINISTRATION

SUBJECT: STAFFING STANDARDS - MAGNETIC RESONANCE
IMAGING FACILITIES

POSITION STATEMENT: It is the position of the Association that for Magnetic Resonance Imaging facilities there must be a minimum of one (1) Magnetic Resonance (MR) Technologists and one (1) non-MR Medical Radiation Practitioner (MRP) per shift at all times required to ensure efficiency, safety and effective quality care.

RATIONALE: The position is based on research of all MR facilities conducted in 2008 and consensus of the MR community who provided evidence associated with risk management, technologist job conditions and quality management issues.

IMPORTANT CONSIDERATIONS: The MRI facility is one in which the technology is demanding, the case load high along with the risk factor for the operator and patient due to the high field strength of the magnet, and the potential for harm due to the high field strength which has the potential for harm in terms of projectile objects, patients with pacemakers or ferrous objects in or on their body and other non-MRI safe conditions.

The standard takes into effect the need to staff for:

1. Magnet safety for staff, patients and other health-care workers
2. Supervision and assessment of the patient
3. Administration
4. Logistical demands
5. Patient safety
6. Case type
7. Referrals and screening

If there are two (2) operating magnets with a shared control room then two (2) MRI Technologists will be required per shift and one (1) MRP.

The type of patient examined may require more than the minimum 4 FTEs.

A security/safety alert system with response protocols should be in place. Personal safety alarms should be provided depending on the physical configuration of the MRI facility and the comprehensiveness of the security and alarm system in place.

REFERENCES:

Submissions to regulate MR by the Regulatory College and this Association, MRI and CT Expert Panels Phase 1 and 2 Reports, MoHLTC 2008.