

## Magnetic Imaging (MRI) - Preliminary Information Form

Please complete this	form with care and bring it along to your appointment.	
NamePersonal identity code		
Height (cm)	Weight (kg)	
There are some obsta	acles to the MRI procedure. To exclude these, we kindly ask young questions:	ou to
Do you have any of	f the following:	No
Pacemaker and/or pa	pacing leads	
Artificial heart valve		
Cochlear (inner ear)	or middle ear implant	
Medication pump (e.	.g. insulin pump)	
Are you pregnant?		
Implanted nerve stim	nulator and/or stimulator leads	
Shunt, stent or coils		
Aneurysm or surgica	al clips	
Breast expander pro	osthesis	
Metal fragments in y	our eyes	
Metal fragments in y	our head or body	
Other electronic impl	lant in the body	
Diagnosis of kidney	failure	
Weight above 140 kg	g	

**tel. 044 707 9202**, Monday to Thursday 8 am–2 pm and Friday 8 am–1.30 pm.

Do you have any of the following:  Sensor that measures glucose in interstitial fluid		No
<ul> <li>sensors must be removed for the duration of the scan.</li> </ul>		
Transdermal medication patch		
<ul> <li>You should change your patch on the day of the MRI.</li> </ul>		
<ul> <li>Remove the patch for the duration of the scan (except for hormone patches).</li> </ul>		

Joint prostheses, dental prostheses/implants, orthodontic braces or sterilisation clips are generally not an obstacle to MRI. Inform the staff of any tattoos or permanent pigmentation when you attend your appointment. Remove any piercing or other jewellery prior to the examination.

If you have someone accompany you, they can be present in the MRI scanner room. The person accompanying you must not have any contraindications for MRI.