MRI PROCEDURE FORM (MPRA screen 1 of 2)

1. Status of MRI procedure:
   - Go to Item 3b. [ ] Completed [ ]
   - Go to Item 3a. [ ] Attempted, incomplete [ ]
   - Not attempted [ ]

2. The reason MRI was not attempted:
   - No show [ ]
   - Rescheduled [ ]
   - Refused to sign informed consent form [ ]
   - Refused for other reasons (specify) [ ]
   - Other (specify) [ ]

Specify: ____________________________________________

3.a. Reason for incomplete MRI:
   - Claustrophobia [ ]
   - Other (Specify) [ ]

Specify: ____________________________________________

3.b. Date MRI attempted or completed:

[ ] [ ] [ ] [ ] [ ]

4. Record the order of Scanning Pulse Sequence. (If all series were completed in order, enter 1, 2, 3)

[ ] [ ] [ ]

OPTIONS:
- Series 1: T1 Sagittal 1
- Series 2: Spin density/T2 Oblique Axial 2
- Series 3: Oblique Axial 3
- Other 4

IF 4 IS ENTERED, PLEASE EXPLAIN BELOW:

______________________________
5. Was oblique axial scan parallel to the AC/PC line? .......... Yes Y  
               No  N  

6.a. Were any emergent alert conditions noted? ...... Yes  Y  
       No  N  

6.b. Specify the alert condition:  

   6.c. Who was notified of this alert?  

   6.d. Date of alert notification:  

   M M D D Y Y  

7. MRI Technologist initials:  

8. Date of data collection:  

   M M D D Y Y  

TO BE COMPLETED BY MRI READING CENTER:  

Tape Number:  

Date Received:  

   M M D D Y Y  

Date Archived:  

   M M D D Y Y  

Date of dBase Entry:  

   M M D D Y Y