

INFORMATION SHEET/CONSENT FOR PERFORMING MAGNETIC RESONANCE IMAGING (MRI)

In order to better examine your health it is necessary to perform a magnetic resonance imaging (MRI) investigation, which is conducted in Pärnu Hospital in room E245, located on the 2nd floor.

An image of the human body is obtained with a strong magnetic field. The test does not involve the use of x-rays. As a strong magnetic field is used during the MRI investigation, no metal objects or mechanical devices may be taken into the imaging room.

Before the examination

- Wear something light and comfortable that is easy to put on and remove. The clothes should not have metal buttons, zippers or hooks. Special clothing will be given to you if required.
- All jewellery, watches, hair clips, pins or ribbons containing metal should be removed (leave them at home if possible). Dentures must also be removed.
- Wallet, cards with a magnet strip, knives, scissors, mobile phones, metal change, etc., are not allowed to be taken into the imaging room.
- Do not use hairspray or make-up on the day of the investigation as these may contain metal.
- You can continue taking your everyday medications, and there are no restrictions on diet.

During the examination

During the examination you must lie motionless on the examination table for 15-60 minutes, depending on the medical problem. To achieve a comfortable position, you will be supported with aids. Then the examination table is moved to the centre of the MRI device. The inside of the machine is like a large tunnel with a diameter of about 70 cm, illuminated and open at both ends. The examination consists of many individual measurements accompanied by thumping and banging noises that last from a few seconds to up to 12 minutes. Earplugs and/or earmuffs are used to muffle the loud noise from the machine. You have signalling and verbal contact with the radiology technician during the whole examination. When the examination is completed, you can leave. A radiologist evaluates the images and sends a reply to your treating doctor.

Many diseases are visible during the MRI examination after the contrasting agent is injected into the vein. If your examination requires the injection of contrasting agent, the radiology technician will insert a venous cannula before or during the investigation through which the contrasting agent is injected. The contrasting agents used are generally well tolerated and do not contain iodine. Complications don't commonly occur (1/100 to <1/10) and usually these are not more serious than a headache. Allergic reactions, hypersensitivity, dizziness, paraesthesia, transient taste disorder, flushing, vomiting, diarrhoea, and pruritus occur uncommonly (1/1000 to <1/100). Anxiety, convulsions, tremor, somnolence, transient smell disorder, vision disorders, dyspnoea, cough, rash, urticaria, oedemas (including facial oedema and angioneurotic oedema), arthralgia, acute renal failure, chest pain, fever, and chills occur rarely (1/10000 to <1/1000). On very rare occasions anaphylactic/anaphylactoid reaction may occur which can be fatal.

After the examination

After the contrasting agent has been injected into the vein, it is recommended to drink a lot of alcohol-free liquid (1.5-2 litres) on the same day and the next day to excrete the contrasting agent faster from the body.

If you have chronic diseases, you should inform your treating doctor as well as the radiology technician performing the MRI investigation before the contrasting agent is injected.

Vorm

Patient's acknowledgement

I confirm with my signature that I have read and completely understood the content of this information sheet. I confirm that I have been informed of the nature and possible risks of the MRI examination . Taking the above into consideration:

- I agree with the performance of the above-mentioned healthcare service and administration of the contrasting agent.
- I refuse the above-mentioned healthcare service and understand the possible consequences of it not being performed.

(Please mark the respective box with an x).

Patient's (legal representative's) name and surname: _____

Date: _____ Signature: _____

I have explained to the above-mentioned person the procedure for the MRI examination and the information contained in the information sheet.

Name and surname: _____ Date: _____

Profession: _____ Signature: _____

PATIENT'S QUESTIONNAIRE BEFORE MRI EXAMINATION

Name sticker

Body weight

Please answer the following questions if you have or use:

ABSOLUTE CONTRAINDICATIONS	YES	NO
Cardiac pacemaker		
Transplanted neurotransmitter		
Implanted drug pump		

RELATIVE CONTRAINDICATIONS	YES	NO
Hearing implant		
Brain aneurysm clips		
Aortic clips		
Joint prosthesis		
Metal rods, plates, screws in bones		
Non-removable dentures (metal teeth, bridges, peg teeth)		
Shooting injuries (bullet, shell fragments)		
Worker in the metallurgical industry		
Metal body decorations		
Tattoo		
Possible pregnancy		
Allergy to drugs or other substances		
Do you have chronic diseases (for example bronchial asthma, cardiac arrhythmias, seizures, kidney diseases, etc.)?		