Regionaal ziekenhuis
Heilig Hart Leuven

RADIOLOGIE

Patient identification sticker

CHECKLIST CONTRA-INDICATIONS MRI

TO BE COMPLETED BY PATIENT OR GUARDIAN. BRING TO THE EXAMINATION.

During an MRI examination you will be exposed to a strong magnetic field. Because of this some safety measures will be required. Please read this list carefully and complete it as completely as possible.
If this document is not properly filled out, for your own safety, the examination cannot take place.

Have you undergone any surgeries? Please specify.

.....

Weight: ..... kg height: ..... cm

Do you have a pacemaker, defibrillator or cardiac monitor? Stayed behind leads?	☐ Yes	☐ No
Do you have a neurostimulator, nerve stimulator or bladder stimulator?	☐ Yes	☐ No
Do you have a cochlear implant, VP drain or penile implant?	☐ Yes	☐ No
Do you have a pain or insulin pump?	☐ Yes	☐ No
Do you have an artificial heart valve?	☐ Yes	☐ No

If you answer yes to any of the above questions, additional information will be required before you can undergo an MRI examination. Please contact our radiology department on 016/209242 or by e-mail at radiologie@hhleuven.be.

Do you have a stent?	☐ Yes	☐ No
Have you ever had brain surgery or cerebral clips?	☐ Yes	☐ No
Do you have a hearing aid?	☐ Yes	☐ No
Do you have an artificial eye with a magnet?	☐ Yes	☐ No
Do you have any metallic fragments in your eyes? (metal worker)	☐ Yes	☐ No
Do you have dental implants, dentures or braces?	☐ Yes	☐ No
Do you have a joint prosthesis?	☐ Yes	☐ No
Do you have any other metal objects in your body (hail, bullet, pin, plate...)?	☐ Yes	☐ No
Do you have a medication patch? If yes which one?.....	☐ Yes	☐ No
Do you have a sensor for glucose measurement? (for diabetes patients)	☐ Yes	☐ No
Do you have a tattoo, piercing, permanent make-up, hair extensions or wig?	☐ Yes	☐ No
Do you have renal insufficiency or do you suffer from poorly functioning kidneys?	☐ Yes	☐ No
Do you have glaucoma? (High pressure in your eyes)	☐ Yes	☐ No
Have you ever had problems with the contrast medium used on MRI?	☐ Yes	☐ No
Have you experienced any other problems with previous MRI exams?	☐ Yes	☐ No
Are you (possibly) pregnant?	☐ Yes	☐ No
Are you breastfeeding?	☐ Yes	☐ No

Please leave all metal objects in the dressing room (jewellery, piercings, glasses, watch, hairpins, credit cards, identity card, wallet, mobile phone, coins, clothing with metal parts…). If in doubt or if you have any questions, please contact the MRI staff.

We offer MRI scans between 7am and 10pm to minimise waiting times for patients. No supplements are charged for examinations between 8am and 6pm. For examinations before 8am and after 6pm on weekdays or for examinations performed during the weekend, a fixed supplement of €40 is charged.

I DECLARE THAT THE ABOVE MENTIONED INFORMATION IS CORRECT ON THE DATE OF THE SCHEDULED EXAMINATION. And I agree to pay the supplement if my examination takes place between 6pm and 8am or on weekends.

Date of the examination: ...../...../.....

Name and signature:

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