SUNY DOWNSTATE MEDICAL CENTER UNIVERSITY HOSPITAL OF BROOKLYN POLICY AND PROCEDURE

No: MRI-13

Subject: MRI / PREGNANT PATIENTS	Page <u>1 of 2</u>	
Prepared by: James shanahan	Original Issue Date: Effective Date:	1/2002 2/2016
Reviewed by: Donna McKenzie, EMBA.,	REVIEWED:	11/2018
	PC.01.02.15 (EP.3) when a test re Information necessary to interpret the request for the test RI.01.03.01the hospital honors t withhold informed consent	et the result is provided with
Approved by: Deborah Reede, M.D	Related Policy Cons-1 Consent Policy (RAD-12) Medication Orders for Media Imaging Procedure	
Contrast		
Harry Zinn, M.D.	Issued by: Radiology [Department

I. PURPOSE

To ensure that consideration has been afforded to assessing the potential risks versus benefits of performing an MR procedure on a pregnant female.

II. DEFINITION;

III. POLICY

Orders for MR studies on pregnant females will require a reassessment of the absolute need for the procedure.

IV. RESPONSIBILITIES

Nursing Staff, MRI Technologist, Radiology Staff and Radiologists, referring physicians.

V. PROCEDURES /GUIDELINES:

NON-CONTRAST STUDIES:

- When an MR non-contrast/contrast enhanced study is ordered on a pregnant patient, a discussion between the Attending Radiologist, the patient's attending Physician, and the patient should take place .
- A reassessment of the potential risks versus benefits of the pending study must be performed. A determination whether the performance of the MR examination could safely wait until the end of pregnancy must be made by the Patient's attending physician and the Attending radiologist. This decision must be shared with and agreed to, by the patient.
- If it is determined that the examination should proceed, it must be documented in the patient record that:
 - A. The information needed could not be obtained from ultrasound or other diagnostic tests which do not require ionizing radiation.
 - B. The information needed affects the care of the patient and/or fetus during pregnancy
 - C. The attending referring physician feels that the scan cannot wait until after pregnancy and is needed to obtain the necessary information.
 - D. Informed consent was obtained and counter signed by the attending radiologist or resident and attending referring physician.

CONTRAST STUDIES:

- Gadolinium based contrast agents are contraindicated in pregnant patients These include: Gadopentetate, dimeglumine, gadodiamide, and Gadoverstamide.
- Alterative imaging testing, including ultrasound, and those using ionizing radiation could not provide the needed information, should an MR with Gadolinium be considered .
- If alternative testing is not an option, a well documented **RISK VS BENEFIT** analysis demonstrating the absolute need for an MR must be permed by the attending radiologist in consultation with the ordering physician.
- Informed consent must be obtained if it is decided to proceed with a contrast MR. There must be documentation stating the patient has been made aware of the risks. The consent form must be signed by the attending radiologist, ordering physician, and the patient. The documentation must be stored in the patient record.

VI. ATTACHMENTS:

None

VII. REASON FOR REVISION: Review

VII. REFERENCES:

<u>www.MR</u> SAFETY .COM/subie article 173 <u>http://www.downstate.edu/regulatory/pdf/policies/CONS-01.pdf</u> Kanal, JMRI 2013; 37-501-530

Date Reviewed	Revision Required (Check One)		Responsible Staff Name and Title
1/2002	-		James Shanahan, Director Radiology
2/2016		NO	Vincent Monte, Director Radiology Department
11/2018		No	Vincent Monte, Director Radiology Department
	Yes	No	
	Yes	No	

MRI-13 MRI ON PREGNANT PATIENT