RISK ASSESSMENT RECORD FORM

Please refer to your local guidance and risk scoring template when completing this form

Section 1: Administrative Details

Name of Assessor:	Job Title:	Date of Assessment:

Section 2: Activity/Task

Activity /Task
Provision of an MRI service

Risk:
Patients or staff experiencing transient sensory effects due to exposure to magnetic field

Area affected:
MRI

Source of Risk (Background):
Exposure to strong magnetic fields, and particularly rapid motion of the head, is associated with transient sensory effects such as vertigo, nausea, and a metallic taste. These effects resolve once the movement stops or the affected person is removed from the field. They have no longer-term health consequences, but can be unsettling and may give risk to health and safety effects indirectly (e.g. if a person carrying out a clinical procedure is affected). They are usually observed at high field, i.e. 3T and above, but can occur at 1.5T.

Supporting Evidence:
Published data on hazards in MRI. MHRA guidelines on safe use of MRI [1].

Factors the risk contains: *(if for COSHH include route of exposure, length of exposure time and exposure limits)*
Magnetic fields.

Potential Consequence if risk is realised:

- Minor disturbance, possible indirect hazards.

Section 3: Current Control Measures

Patients are taken into the scanner room at a speed at which transient sensory effects are unlikely.

Patients being taken out of the magnet are told not to sit up rapidly.

Staff training includes information about transient sensory effects, and they aware of the circumstances under which patients may be affected.

Section 4: Risk Rating
Use the consequence, likelihood and risk score tables in your local guidance to identify the scores below.

Consequence Score:

Likelihood Score:

Risk Score:

Initial Risk Grading:

Section 5: Risk Reduction Options		
Options	Revised Risk Score	Cost

Section 6: Directorate/Divisional Agreed Actions		
Actions	Lead	Target Date

Section 7: Risk Grading				
	Consequence	**Likelihood**	**Score**	**Grade**
Initial:				
Current (will be the same as initial to begin with):				
Residual:				

Section 8: Review
Risk Owner:
Planned Review Date:

Reference

[1] D. Grainger, “Safety Guidelines for Magnetic Resonance Imaging Equipment in Clinical Use,” Medicines and Healthcare Products Regulatory Agency, Mar. 2015.