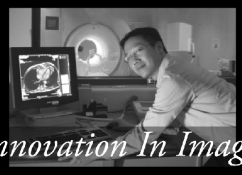

NEW RESEARCH PROJECT

Project Title

Principal Investigator

Name

Department

Email

Phone

Co-Investigator

Name

Department

Please note that for human studies, an MD is required in the event of incidental findings

Contact information of personnel present for all subject scans (repeat for each key person)

Name

Role

Department

Email

Phone

Name

Role

Department

Email

Phone

This will be available to all users on our secure website to allow scheduling conflicts to be resolved and for general contact regarding scanner issues. They must attend the Peter S Allen MR Centre Safety Course. Note that 2 research project staff must be present for patient / volunteer scans (1 may be the MR Technologist for 3T Siemens scans)

Identify who will be present in the MR Centre for scans from the research project team?

MR Experiments: Outline all applicable to your research project

Select Scanner(s) (A = Siemens 3T; B = 4.7T)

☐ A ☐ B

Select Pulse Sequences that will be used

Brain

☐ PD ☐ T1 ☐ T2 ☐ FLAIR ☐ DWI
☐ TOF MRA ☐ GRE ☐ DTI ☐ MRS ☐ fMRI
☐ MPRAGE ☐ SWI ☐ MRA ☐ Perfusion

Heart

☐ Cine ☐ Tagging ☐ Flow ☐ T2 ☐ Perfusion

Other Custom MR Pulse Sequences

Duration of scan protocol (minutes)

Will MR contrast be used?

◯ Yes ◯ No

For intra-venous gadolinium contrast scans, will pre-screening for prior kidney disease be performed?

◯ Yes ◯ No

This information should be noted on the screening form, and subjects with a GFR < 30 should be excluded. Please note that patient information forms should discuss gadolinium risks.

The investigator is responsible for purchasing Gd contrast agent which is available through the MR Research Centre

Will hospital in-patients be scanned?

◯ Yes ◯ No

In-patient studies require the presence of a physician, and a Radiology Research Nurse

Will physiological monitoring be required during the scan?

☐ ECG ☐ Blood Pressure ☐ O2 Saturation

Provide rationale for monitoring

Who will operate the scanner?

Who will be responsible to archive and analyze data?

Siemens 3T scanner may be operated by MRI technologist (8am - 4pm, Mon - Fri)

Patients and Controls

Patient disorder/disease

Number of Patients

Number of Controls

Please note that exclusion criteria for subjects suitable for scanning at 3T are not necessarily acceptable at 4.7T .

Enter a brief description of your Research Project (show scan schedule, eg single scan, or multiple scans - day 0, 30 120 etc)

Funding Source

Other

If other specify below

Start Date

Completion Date

Has the appropriate research ethics approval been obtained?

◯ **Yes** ◯ **No**

Has an electronic copy of the HREB submission and approval been attached?
(Including all Attachments, Consent Forms & Information Sheets)
◯ **Yes** ◯ **NO**

If incidental findings are discovered by the investigators, it will be up to the medical doctor involved in the project to determine whether or not these findings require further investigation or follow-up. Please briefly outline what your policy and procedure is for incidental findings on anatomic images.

An electronic copy of the patient information and consent forms has been attached

◯ **Yes** ◯ **No**

Have all members of the research team attended the MR Research Centre's Safety and Orientation course?

◯ **Yes** ◯ **No**

Contact Dr Rob Stobbe (rstobbe@ualberta.ca) if you or your staff need to complete this course

I have read the Policy and Procedure Manual for the Peter S Allen MR Research Centre

◯ **Yes** ◯ **No**

A copy of this can be requested from Carol Hartle (chartle@ualberta.ca)