

Company Induction

Clinical Induction

Mri Authorised Operator

row_name	intitals	date	compet ency_co mments	observe d	supervis ed	independ ently	comme nts	user_id	user-id	Introduc tion
AS	2023-06 -29	ss	2023-06 -29	ss	ss	ss	admin	Realisti c expecta tions of training		
					admin	Identify local training supervis or/ment or				
			admin	Underst anding the MR process						
	admin	Know the location of the MRI Quality Docume ntation								admin
Read and understood the MRI Quality Management System documentation								admin	Know the Locatio n of the MRI Local Rules	

						admin	Have read and understood the MRI Local Rules			
				admin	Know the Safety procedure for CARDIAC ARREST					
		admin	Know the Safety procedure for FIRE							
admin	Know the Safety procedure for contrast reactions								admin	Know the Safety procedure for patients
							admin	Know where the red electrical buttons are located		

					admin	Know when to press the electrical buttons as Quality document				
			admin	Know where the magnet stop button is located						
	admin	Know when to press the magnet stop button as Quality document								admin
Understand the oxygen monitor for the MR scan room								admin	Know how and where to record safety incidents	

						admin	Know how and where to record equipment incidents			
				admin	Attend MRI safety Talk					
		admin	Tested on MR Safety Talk 100% needed							
admin	Tested on MR questionnaires (20 100% correct)								admin	Preparation of the patient prior to the examination
							admin	Aware of the potential difficulties patient encounter		

					admin	The need to treat patients with respect and compassion				
			admin	Patient two-way communication						
	admin	Music								admin
Infection Control Issues								admin	Completion of the patient screening questionnaire	
						admin	Dealing/queries regarding the answers to questionnaire			
				admin	Able to find "routine" scanning protocol as required					

		admin	Able to select protocol manipulation pages							
admin	Able to adapt scanning protocols as appropriate								admin	Understand how protocol changes affect images
							admin	Signal to noise ratio and parameter manipulation		
					admin	Able to manipulate scanning parameters as instructed				
			admin	Aware of implications of SAR						

	admin	Able to locate and use "shortened" "quick" protocols								admin
Clear understanding of when to adapt protocols								admin	Understanding the MR process	
						admin	Able to set up daily QA			
				admin	Able to perform daily QA					
		admin	I can identify coils and the examinations for which they are used.							

admin	I can inspect coils for damage and describe the effects of poor coil handling.								admin	I can connect coils in a manner that prevents damage to the coil, connectors, cable, and tabletop.
							admin	I can position coil cables and infusion lines to prevent injury to the patient during table movement.		
					admin	I can demonstrate the correct positioning of flex coils.				



			admin	I can demonstrate the incorrect positioning of flex coils.						
	admin	I can find additional coil information in the Instructions for Use.								admin
I can safely store coils.								admin	Prevent skin to bore contact	
						admin	Prevent skin to skin contact			
				admin	Make the patient comfortable.					

		admin	Immobilize the patient to reduce movement during the examination.							
admin	I can apply hearing protection to the patient								admin	I recognize that passive headphones don't allow for communication and may cause image artefacts.
							admin	I can securely position the nurse call button and provide instructions to the patient for its use.		

					admin	With my 1.5T system, I know to use both earplugs and headphones for hearing protection.				
			admin	I can locate the emergency magnet off button.						
	admin	I can describe the events and potential risks that occur when the emergency shut down is initiated.								admin

I recognize the asphyxiation and burn dangers associated with release of cryogens that occurs during emergency shut down.								admin	I can identify emergencies when the emergency magnet off button is used and not used.	
						admin	I recognize that the emergency magnet off button (quench) is used only when there is risk of imminent danger.	XS	2023-06-29	sss

#### Mri New Startera

row_name	intitals	date	compet ency_co mments	observe d	supervis ed	independ ently	comme nts	user_id	user-id	Introduc tion
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AS	2023-06-29		2023-06-29	ss	ss	ss	admin	Realistic expectations of training		
					admin	Identify local training supervisor/mentor				
			admin	Understanding the MR process						
	admin	Anatomical knowledge of C-Spine								admin
Anatomical knowledge of T-Spine								admin	Anatomical knowledge of L-Spine	
						admin	Anatomical knowledge of W-Spine			
				admin	Anatomical knowledge of IAM					

		admin	Anatomical knowledge of Knee							
admin	Anatomical knowledge of Brain								admin	Anatomical knowledge of Ankle
							admin	Familiar with electronic protocol book		
					admin	Aware of the different examinations performed				
			admin	Knowledge of different clinical indications for basic exams (listed above)						
	admin	MR contrast agents and basic applications								admin

Aware of alternative basic imaging techniques								admin	C-Spine-coil selection	
						admin	T-Spine-coil collection			
				admin	L-Spine-coil selection					
		admin	W-Spine-coil selection							
admin	IAM-coil selection								admin	Brain-coil selection
							admin	Ankle-coil selection		
					admin	Spine-coil selection				
			admin	Aware of safety information when using coils						

	admin	Adapting coils according to needs								admin
Paediatric basic MR - coil selection								admin	Immobilisation devices	
						admin	Preparation of patient for their examination			
				admin	Cannulation issues					
		admin	Aware of the potential difficulties patients encounter							
admin	The need to treat patients with respect and compassion								admin	Patient communication during examination
							admin	Infection control		



					admin	Able to find basic protocol libraries on console				
			admin	Able to perform examinations according to protocols						
	admin	Familiar with C-Spine								admin
Familiar with routine T-Spine protocols								admin	Familiar with routine L-Spine protocols	
						admin	Familiar with routine W-Spine protocols			
				admin	Familiar with routine IAM protocols					

		admin	Familiar with routine Brain protocols							
admin	Familiar with SIJ								admin	Familiar with knee protocol
							admin	Familiar with routine Ankle protocol		
					admin	Basic MRI scanning experience				
			admin	C-spine						
	admin	T-Spine								admin
L-Spine								admin	W-Spine	
						admin	IAM			
				admin	Brain					
		admin	SIJ							
admin	Knee								admin	Able to adapt scanning protocols as appropriate

							admin	Underst and how protocol change s affect images		
					admin	Signal to noise ratio and paramet er manipul ation				
			admin	Able to manipul ate scannin g paramet ers as instruct ed						
	admin	Clear underst anding of when to adapt protocol s								admin
Attended Radiologist reporting session of one of the listed examinations								admin	Case Study spine	
						admin	Case study IAM			
				admin	Case study Brain					

		admin	Knows how to report a fault to Agito							
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## Mri Clinical Skills

row_name	phillips	siemens	ge	comments	user_id	user-id	Staff safety sign off
y	y	y		admin	Familiar with AMDS MRI safety Check List for Patients	on	on
on		admin	Adrenals	on	on	on	
admin	Hypertension (adrenals)	on	on	on		admin	Biliary Leak
on	on	on		admin	Cholangiocarcinoma	on	on
on		admin	Kidneys - 1st attendance or if report states contrast is required	on	on	on	
admin	Kidneys - follow up unless report states contrast is required	on	on	on		admin	Liver L1 - Gadovist
on	on	on		admin	Liver L2 - Primovist	on	on
on		admin	Liver L3 - Non-contrast	on	on	on	

admin	Liver L4 - Clatterbridge Liver Protocol	on	on	on		admin	Liver L5 - Benign Liver Protocol
on	on	on		admin	MRCP	on	on
on		admin	Pancreatic Cyst	on	on	on	
admin	Pancreas with Contrast	on	on	on		admin	Pancreas without Contrast
on	on	on		admin	Small Bowel 18 years old and above	on	on
on		admin	Small Bowel Under 18 years old	on	on	on	
admin	A1 - Dilated Root/Thoracic Aorta for measuring size.	on	on	on		admin	A2 - Coarctation
on	on	on		admin	A3 - Aorta Aneurysm follow up scans from vascular team	on	on
on		admin	Hypertension protocol	on	on	on	
admin	Standard	on	on	on		admin	Aortic valve protocol
on	on	on		admin	Viability	on	on
on		admin	Stress - Adenosine	on	on	on	

admin	Sudden cardiac death protocol (ARVD, unexplained syncope)	on	on	on		admin	RV Dilation protocol
on	on	on		admin	Left ventricular hypertrophy protocol	on	on
on		admin	AF patients	on	on	on	
admin	Amyloid protocol	on	on	on		admin	Axilla
on	on	on		admin	Breast Cancer 1st attendance	on	on
on		admin	Breast Cancer follow up	on	on	on	
admin	Breast Screening	on	on	on		admin	Breast Implants
on	on	on		admin	Chest Lesion	on	on
on		admin	Type 1 & 2	on	on	on	
admin	Type 3	on	on	on		admin	5 N Trigeminal nerve
on	on	on		admin	7N Facial nerve	on	on
on		admin	Arteries	on	on	on	
admin	Dementia	on	on	on		admin	MS - who may be eligible to have Tysabri Treatment
on	on	on		admin	MS	on	on

on		admin	Paediatric	on	on	on	
admin	Routine (H1)	on	on	on		admin	Sag Sinus Thromobosis
on	on	on		admin	Stroke Clinic	on	on
on		admin	TLE or seizures	on	on	on	
admin	Brain and Orbits with Gad 1	on	on	on		admin	Brain and Orbits with Gad 2
on	on	on		admin	H2 adult with gad	on	on
on		admin	Cholesteatoma	on	on	on	
admin	CSF Flow,NPH protocol	on	on	on		admin	Glomus tumuour
on	on	on		admin	IAMs with contrast	on	on
on		admin	IAMS	on	on	on	
admin	Orbits	on	on	on		admin	Pituitary
on	on	on		admin	Malignant Melanoma (staging of abdo/pelvis for young patients)	on	on
on		admin	Hypertension MRA	on	on	on	
admin	LD - 1 injection technique	on	on	on		admin	LD - 2 injection technique
on	on	on		admin	Peripheral MRA	on	on
on		admin	Renal MRA	on	on	on	

admin	Achilles	on	on	on		admin	Ankle Hind foot
on	on	on		admin	Elbow	on	on
on		admin	Elbow (arthrogram)	on	on	on	
admin	Foot ankle query fracture	on	on	on		admin	Forefoot
on	on	on		admin	Hip (arthrogram)	on	on
on		admin	Hips (MARS)	on	on	on	
admin	Hips	on	on	on		admin	Knee (arthrogram)
on	on	on		admin	Knee (post ACL repair)	on	on
on		admin	Knee (post op menisectomy)	on	on	on	
admin	Knee (Standard)	on	on	on		admin	Long Bone fracture
on	on	on		admin	Lumpogram	on	on
on		admin	MSK Pelvis	on	on	on	
admin	Myositis	on	on	on		admin	Osteomyelitis
on	on	on		admin	Oswestry Dynamic Scaphoid Protocol	on	on
on		admin	Scaphoid	on	on	on	



admin	Shoulder (arthrogram)	on	on	on		admin	Shoulder
on	on	on		admin	Wrist (RA Erosions)	on	on
on		admin	Wrist (Standard)	on	on	on	
admin	Wrist (Arthrogram)	on	on	on		admin	Brachial Plexus
on	on	on		admin	Sialogram	on	on
on		admin	Soft Tissue - N	on	on	on	
admin	Soft Tissue - NC	on	on	on		admin	Soft Tissue - NP
on	on	on		admin	Soft Tissue - NT	on	on
on		admin	Soft Tissue - NS	on	on	on	
admin	Soft Tissue - NO	on	on	on		admin	Anal Cancer
on	on	on		admin	Bladder	on	on
on		admin	Cervix	on	on	on	
admin	Endometriosis	on	on	on		admin	Endometrium
on	on	on		admin	Fibroid Embolisation	on	on
on		admin	Fistula - F1	on	on	on	
admin	Fistula - F2	on	on	on		admin	Fistula - F3
on	on	on		admin	Gynae Pelvis	on	on
on		admin	Hernia	on	on	on	
admin	Ovarian, adnexal mass	on	on	on		admin	Penis

on	on	on		admin	Placenta acreta	on	on
on		admin	Prostate - P	on	on	on	
admin	Prostate - PC	on	on	on		admin	Prostate - PAE
on	on	on		admin	Rectum - 1st attendance / new diagnosis	on	on
on		admin	Rectum - follow up	on	on	on	
admin	Urethral Diverticu m	on	on	on		admin	Uterine anomalies
on	on	on		admin	Arachnoidit is	on	on
on		admin	Bony Lesion Characteri sation	on	on	on	
admin	Cervical spine	on	on	on		admin	Coccyx
on	on	on		admin	Discitis	on	on
on		admin	Lumbar sacral plexus	on	on	on	
admin	Lumbar spine	on	on	on		admin	Pars defect
on	on	on		admin	Scoliosis	on	on
on		admin	Sacrum	on	on	on	
admin	Thoracic spine	on	on	on		admin	Whole spine - standard
on	on	on		admin	Whole spine - MSSC	on	on

on		admin	Whole spine - MS	on	on	on	
admin	1st Attendance - 1- Kidneys with contrast	on	on	on		admin	1st Attendance - 2- Brain and Whole spine pre and post contrast
on	on	on		admin	Follw up	on	on
on		admin	W1 (adult)	on	on	on	
admin	W1 (Paed under 18)	on	on	on		admin	W2
on	on	on		admin	WC	on	on

#### Philips Mri Competencies

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Able to turn scanner on from complete shutdown
MK	2023-06-29	row 1 competency	2023-06-29	row 1 sup	row 1 ind	row 1 comment	admin	Able to turn scanner on form stand-by-mode	AK	2023-06-30
row 2 competency	2023-06-30	row 2 sup	row 2 ind	row 2 comment	admin	Able to turn scanner off by complete shutdown	SM			

			admin	Able to turn scanner off into stand-by mode	TTTT					
	admin	Able to turn on/off remote consoles								admin
Understand local data storage issues								admin	Know location of protocols on Quality system	
						admin	Able to use patient table			
				admin	I can manually move the tabletop out of the bore using the tabletop release button.	YG	2023-07-05	row 7 competency		dddd

sss	ggg	admin	I can safely use the laser light to center to the anatomy of interest for the examination.							
admin	I can move the table to isocenter.								admin	I can use the markers on the tabletop to note the extent of table movement.
							admin	I can state the weight limit for the tabletop (250kg)		

					admin	I can locate the head set and nurse call connection sockets				
			admin	I can identify VCG components.						
	admin	I can position the ECG electrodes on the patient.								admin
I can position the wireless module on the patient.								admin	I recognize that the VCG is not used for patient monitoring.	
						admin	I can change and charge the battery on VCG module.			

				admin	I can change the wireless network channel used by the VCG.					
		admin	I can identify the components of the respiratory sensor.							
admin	I can position the respiratory sensor on the patient.								admin	I can change and charge the battery on respiratory sensor module.
							admin	I can change the wireless network channel used by the respiratory sensor.		

					admin	I recognize that the MR system computer in the technical room controls the gradient amplifiers, magnet cooling system, RF transmitter, and receiver.				
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			admin	I know how to contact a remote service engineer who can supervise a full system shutdown when it is required and advised by the remote service engineer.						
	admin	I can locate the helium level display.								admin

I can respond to low helium levels message and notify.								admin	I can follow Periodic Image Quality Testing (PIQT) procedures to perform quality assurance testing.	
						admin	I can use the intercom system to communicate with the patient.			
				admin	Stop and resume table movement in an emergency					
		admin	Adjust the music volume							

admin	Adjust the talk and listen volume								admin	Turn the music on and off
							admin	View the nurse call light ring		
					admin	I can visually monitor the patient during an examination				
			admin	I can pause and resume a scan so that I can enter the scan room during the examination.						
	admin	I can display and navigate the online help.								admin

I can access parameter help via the F1 key.								admin	I can find and navigate the Instructions for Use.	
						admin	I can find additional information on the info page.			
				admin	I can display information about the coils for my system					
		admin	Enter a new patient							
admin	View the Exam Card databases								admin	View the Scan List
							admin	Review examination images		

					admin	Switch between list view and thumbnail view				
			admin	View the shortcut menu (right-click)						
	admin	Window the display (middle button)								admin
Zoom the display (middle and right button)								admin	Pan the display (left and middle button)	
						admin	I can view the patient ventilation control.			
				admin	Using controls on the system and console. From the UIM.					

		admin	I recognize the recommended patient ventilation level is Level 5.							
admin	I can enter a new patient for scanning.								admin	I can select from the RIS, a patient for scanning. (If applicable)
							admin	I recognize that the system will scan in Normal SAR mode by default when the Pregnant Yes checkbox is selected.		

					admin	I can use Scan Wise Implant to safely enter a new patient who has an MR Safe or MR Conditional implant.				
			admin	View the current patient						
	admin	Review the previous patient								admin
Philips preset procedures and Example Cards								admin	Hospital	
						admin	Other			
				admin	I can view sequences in an Exam Card.					
		admin	Exam Card							

admin	Example Card (Philips predefined Exam Card)								admin	Preset protocol database
							admin	Hospital database		
					admin	To another database				
			admin	I can use a password to restrict access to the Hospital Exam Card database.						
	admin	I can unlock the Hospital database to save an Exam Card (if needed).								admin



I can create a new subfolder in the Hospital and Other databases.								admin	I can view the Exam Card properties.	
						admin	Change the order of sequences			
				admin	Repeat a sequence					
		admin	Copy a sequence							
admin	Delete a sequence								admin	I can hover the icons and labels on the Exam Card to identify their meaning.
							admin	Needs planning		
					admin	Is ready to run				
			admin	Is paused						

	admin	Is scanning								admin
Is completed								admin	I can identify high SAR sequences.	
						admin	I can override normal SAR mode when my patient might be pregnant.			
				admin	I can view the SED indicator display to know when the SED level is low, medium, and high.					
		admin	Save an Exam Card							
admin	Rename the Exam Card								admin	Copy the Exam Card

							admin	Delete an Exam Card		
					admin	I recognize that SmartS elect automatically selects the coils used in the examination.				
			admin	Number of stacks						
	admin	Off-center values for each stack								admin
Angulations for each stack								admin	Orientation	
						admin	I can use propagate coverage to plan scans with the same GeoName.			

				admin	I can use Propagate Coverage to share FOV, foldover direction, and coverage					
		admin	I recognize that I should not use Propagate Coverage in a DWI series.							
admin	I can assign the correct GeoName to a scan.								admin	I can add, delete, and modify the GeoName of a sequence.

							admin	I can display and hide the Planscan overlay (volume or the stack(s) of slices, REST slab, shim box, navigator).		
					admin	I can use the Planscan toolbar and shortcut menu to plan the examination.				
			admin	Slice gap.						
	admin	Field of view (FOV)								admin
I can use flexible oversampling to ensure the entire anatomy is covered.								admin	Box	
						admin	3D view			

				admin	All midplanes					
		admin	Stack							
admin	Volume								admin	Slab
							admin	Scan time		
					admin	SAR				
			admin	SED						
	admin	Rel SNR								admin
PNS								admin	Technical Room	
						admin	TR			
				admin	I can view the SAR level for the scan.					
		admin	I can view the SED level for the examination.							

admin	I can use the buttons in the Dashboard to undo, redo, accept, reset, and cancel changes.								admin	FOV
							admin	Voxel		
					admin	Matrix				
			admin	Slice thickness and gap						
	admin	NSA								admin
Fat Suppression (SPIR)								admin	I can view advanced parameter setting tabs.	

						admin	I can reset the sequence settings to their original state using the undo button.			
				admin	I can identify ExamC and items that use Propagate Coverage.					
		admin	I can view conflicts and access assistance on the Conflicts tab.							



admin	I can enable AutoView for a sequence to view images during reconstruction.								admin	I can identify sequences that have SmartLine (inline) postprocessing enabled.
							admin	I can view and modify the Info page to add site-specific notes regarding the ExamCard and scan.		
					admin	I can manually start, pause, and restart a scan.				

			admin	I recognize that pause scan and stop scan have different outcomes.						
	admin	Patient name								admin
Physiology signal (if connected)								admin	Scan progress bar	
						admin	Exam card progress bar			
				admin	Message line					
		admin	SED							
admin	I can rescan failed scans.								admin	I can use ImageView to view images.
							admin	I can switch between the thumbnail and ScanList views.		

					admin	Add and remove rows and columns				
			admin	Use standard layouts						
	admin	Play and pause a movie								admin
Create text box								admin	Measure the image	
						admin	Select viewing display modes			
				admin	Change settings					
		admin	I can display Review environment.							
admin	I can switch between List view and Thumbnail view.								admin	Menu bar
							admin	Panel controls		

					admin	Short cut (right-click) menus				
			admin	Keyboard keys						
	admin	Scroll								admin
Zoom the display (middle and right button)								admin	Panel controls	
						admin	Change the window width and level			
				admin	Reset the window, zoom and pan					
		admin	Change the display to tiled or tabbed layout.							
admin	Link and unlink selected imaging series.								admin	Capture a screen image and save it as a DICOM file.
							admin	Stack display		

					admin	Box view				
			admin	Slice mode						
	admin	3D mode								admin
I can use the Package Manager to switch between examinations/views and to stop the execution of packages.								admin	I can display image information.	
						admin	I can expand Series information.			
				admin	I can display and hide Review Planscan to show planning.					
		admin	I can annotate an image to show ROI, add labels, and lines.							

admin	I can use tools to measure in the image.								admin	I can use print screen to capture an image.
							admin	I can use the Movie Toolbox to play, pause, and restart a movie.		
					admin	I can save the reformat images to the database.				

			admin	I can use Volume View to select render modes (algorithms) to calculate projections and reformat s of the source images.						
	admin	Maximum Intensity Projections (MIP)								admin
Minimum Intensity Projections (MinIP)								admin	Multiplanar Reformatt ing (MPR) rendering for 3D scans	
						admin	Surface Rendering (shaded and unshaded surface)			

				admin	Navigat e the view					
		admin	Navigat e the referenc e images							
admin	Change the referenc e views and lines.								admin	Change the layout of a view
							admin	Draw contour s.		
					admin	Reset all settings				
			admin	Orientat ion						
	admin	Zoom the display (middle and right button)								admin



Slab thickness								admin	I can use Picture Plus to apply a filter to images to customize the appearance of the image for the radiologists preferences.	
						admin	I can apply a Picture Plus preset to the image.			
				admin	I can use the mouse to adjust smoothing and edge enhancement.					

		admin	I can create a custom preset to define smoothing and edge enhancement values.							
admin	I can generate the modified series to save the new imaging series to the examination.								admin	I recognize a series with prefix "e" in the series name has been enhanced by Picture Plus.
							admin	I can use the MobiView postprocessing package to fuse multi-station datasets.		

					admin	I recognize that images must be acquired as different stacks in Head-Foot direction in order to use the MobiView postprocessing package.				
			admin	I recognize that it is a best practice to keep the source images as well as the fused image.						

	admin	I can check for artifacts before fusing images so that they are not mistakenly interpreted as pathologies.								admin
None								admin	Automatic	
						admin	MIP			
				admin	Fuse Hardcut					
		admin	Fuse Smooth							
admin	Merge series								admin	I can save the fused images to the patient database.

							admin	I can fuse a multi-station imaging series that includes multiple image types.		
					admin	I can save the examination to:				
			admin	Local patient database						
	admin	Queue DVD								admin
DICOM network node								admin	PACS	
						admin	External hard drive			
				admin	I can archive and delete examinations from the patient database.					

		admin	I can enable Autopus h to DICOM node.							
admin	The entire examination								admin	Selecte d images
							admin	Selecte d series		
					admin	I can use Split Exam to save the examination images as multiple scan instance s.				
			admin	Storing and retrievin g data from a USB drive						
	admin	I can enable access to a remova ble USB drive.								admin

I can import and export an ExamCard stored to a USB drive.								admin	I can back-up the ExamCard database to a USB drive.	
						admin	I can send and retrieve examination data from the data archive system (for example PACS).			

				admin	I can send data to the data archive system and remove it from the database on the MR system to maintain good system performance.					
		admin	I can save an examination to external media.							
admin	I can position the patient for a brain examination.								admin	I recognize that some passive headsets may cause image artifacts.



							admin	I can position the Head coil and accessories.		
					admin	I can add a routine brain Exam Card to the Scan List.				
			admin	I can plan the brain examination.						

	admin	I recognize that, when using SENSE, I must pay attention to the foldover direction and oversampling area to avoid foldover of anatomy outside the oversampling area.								admin
I can post-process the brain examination using the Diffusion package.								admin	See Knee Routine Workflow Guide	
						admin	I can position the patient for a knee examination.			

				admin	I can position the knee coil and accessories to reduce motion and improve patient comfort.					
		admin	I can add the knee Exam Card to the Scan List.							
admin	I can plan the knee examination.								admin	I can post-process the examination images.
							admin	I can position the patient for an abdomen examination.		

					admin	I can position the abdomen coil and accessories to reduce motion and improve patient comfort.				
			admin	I can position the respiratory sensor.						
	admin	I can add the abdomen ExamCard to the ScanList.								admin
I can plan the abdomen examination.								admin	I can use breathhold and free breathing techniques to perform the examination.	

						admin	I can use AutoVoice (if purchased) to communicate breathhold instructions to the patient.			
				admin	I can post-process the abdominal images.					
		admin	Refer to the Spine Workflow guide							
admin	I can position the patient for a spine examination.								admin	I can position the spine coil and accessories to reduce motion and improve patient comfort.

							admin	I can add the spine ExamCard to the ScanList.		
					admin	I can plan the spine examination.				
			admin	Use MobiView to fuse images						
	admin	Use Picture Plus to enhance images								admin
Use VolumeView for MPR and MIP reconstruction								admin	I can position the patient for an ankle examination.	

						admin	I can position the ankle coil and accessories to reduce motion and improve patient comfort.			
				admin	I can add the ankle ExamCard to the ScanList.					
		admin	I can plan the ankle examination.							
admin	Position Shim volume								admin	I can post-process the spine images

row_name	intitals	date	compet ency_co mments	observe d	supervis ed	independ ently	comme nts	user_id	user-id	I can manuall y move the tabletop out of the bore using the tabletop release button.
MK	2023-06 -26	aaaa	2023-06 -29	aaa	aaa	aaa	admin	I can safely use the laser light to center to the anatom y of interest for the examin ation.		
					admin	I can move the table to isocente r.				
			admin	I can locate the Flex Connect sockets on the tabletop						



	admin	I can use the markers on the tabletop to note the extent of table movement.								admin
I can state the weight limit for the tabletop. (250kg)								admin	I can locate the head set and nurse call connection sockets	
						admin	I can use Flex Trak to safely transfer patients to the tabletop :		2023-06-29	ssss

2023-06-30	sss	sss	sss	admin	Verify that there are no magnetic objects present on the tabletop before entering the examination room.					
		admin	Ensure wheels are locked during patient transfer.							
admin	I recognize that cardiac compression must never be performed on a patient who is on the Flex Trak.								admin	I can identify coils and the examinations for which they are used.

							admin	I can inspect coils for damage and describe the effects of poor coil handling.		
					admin	I can connect coils in a manner that prevents damage to the coil, connectors, cable, and tabletop.				

			admin	I can position coil cables and infusion lines to prevent injury to the patient during table movement.						
	admin	I can demonstrate the correct positioning of flex coils.								admin
I can demonstrate the incorrect positioning of flex coils.								admin	I can find additional coil information in the Instructions for Use.	
						admin	I can safely store coils.			
				admin	Prevent skin to bore contact					

		admin	Prevent skin to skin contact							
admin	Make the patient comfortable.								admin	Immobilize the patient to reduce movement during the examination.
							admin	I can identify VCG components.		
					admin	I can position the ECG electrodes on the patient.				
			admin	I can position the wireless module on the patient.						

	admin	I recognize that the VCG is not used for patient monitoring.								admin
I can change and charge the battery on VCG module.								admin	I can change the wireless network channel used by the VCG.	
						admin	I can identify the components of the respiratory sensor.			
				admin	I can position the respiratory sensor on the patient.					

		admin	I can change and charge the battery on respiratory sensor module.							
admin	I can change the wireless network channel used by the respiratory sensor.								admin	I can apply hearing protection to the patient
							admin	I recognize that passive headphones don't allow for communication and may cause image artifacts.		

					admin	I can securely position the nurse call button and provide instructions to the patient for its use.				
			admin	With my 1.5T system, I know to use both earplugs and headphones for hearing protection.						



	admin	I recognize that the MR system computer in the technical room controls the gradient amplifiers, magnet cooling system, RF transmitter, and receiver.								admin
I know how to contact a remote service engineer who can supervise a full system shutdown when it is required and advised by the remote service engineer.								admin	I can locate the emergency magnet off button.	

						admin	I can describe the events and potential risks that occur when the emergency shut down is initiated.			
				admin	I recognize the asphyxiation and burn dangers associated with release of cryogenics that occurs during emergency shut down.					

		admin	I can identify emergencies when the emergency magnet off button is used and not used.							
admin	I recognize that the emergency magnet off button (quench) is used only when there is risk of imminent danger.								admin	I can locate the helium level display.
							admin	I can respond to low helium levels message and notify.		

					admin	I can follow Periodic Image Quality Testing (PIQT) procedures to perform quality assurance testing.				
			admin	I can use the intercom system to communicate with the patient.						
	admin	Stop and resume table movement in an emergency								admin
Adjust the music volume								admin	Adjust the talk and listen volume	

						admin	Turn the music on and off			
				admin	View the nurse call light ring					
		admin	I can visually monitor the patient during an examination							
admin	I can pause and resume a scan so that I can enter the scan room during the examination.								admin	I can display and navigate the online help.
							admin	I can access parameter help via the F1 key.		

					admin	I can find and navigate the Instructions for Use.				
			admin	I can find additional information on the info page.						
	admin	I can display information about the coils for my system								admin
Enter a new patient								admin	View the Exam Card databases	
						admin	View the Scan List			
				admin	Review examination images					

		admin	Switch between list view and thumbnail view							
admin	View the shortcut menu (right-click)								admin	Window the display (middle button)
							admin	Zoom the display (middle and right button)		
					admin	Pan the display (left and middle button)				
			admin	I can view the patient ventilation control.						
	admin	Using controls on the system and console. From the UIM.								admin

I recognize the recommended patient ventilation level is Level 5.								admin	I can enter a new patient for scanning.	
						admin	I can select from the RIS, a patient for scanning. (If applicable)			
				admin	I recognize that the system will scan in Normal SAR mode by default when the Pregnant Yes checkbox is selected.					



		admin	I can use Scan Wise Implant to safely enter a new patient who has an MR Safe or MR Conditional implant.							
admin	View the current patient								admin	Review the previous patient
							admin	Philips preset procedures and Example Cards		
					admin	Hospital				
			admin	Other						
	admin	I can view sequences in an Exam Card.								admin

Exam Card								admin	Example Card (Philips predefined Exam Card)	
						admin	Preset protocol database			
				admin	Hospital database					
		admin	To another database							
admin	I can use a password to restrict access to the Hospital Exam Card database.								admin	I can unlock the Hospital database to save an Exam Card (if needed).
							admin	I can create a new subfolder in the Hospital and Other databases.		

					admin	I can view the Exam Card properties.				
			admin	Change the order of sequences						
	admin	Repeat a sequence								admin
Copy a sequence								admin	Delete a sequence	
						admin	I can hover the icons and labels on the Exam Card to identify their meaning.			
				admin	Needs planning					
		admin	Is ready to run							
admin	Is paused								admin	Is scanning

							admin	Is completed		
					admin	I can identify high SAR sequences.				
			admin	I can override normal SAR mode when my patient might be pregnant.						
	admin	I can view the SED indicator display to know when the SED level is low, medium, and high.								admin
Save an Exam Card								admin	Rename the Exam Card	

						admin	Copy the Exam Card			
				admin	Delete an Exam Card					
		admin	I recogni ze that SmartS elect automat ically selects the coils used in the examin ation.							
admin	Number of stacks								admin	Off- center values for each stack
							admin	Angulati ons for each stack		
					admin	Orientat ion				

			admin	I can use propagate coverage to plan scans with the same GeoName.						
	admin	I can use Propagate Coverage to share FOV, foldover direction, and coverage								admin
I recognize that I should not use Propagate Coverage in a DWI series.								admin	I can assign the correct GeoName to a scan.	
						admin	I can add, delete, and modify the GeoName of a sequence.			

				admin	I can display and hide the Planscan overlay (volume or the stack(s) of slices, REST slab, shim box, navigator).					
		admin	I can use the Planscan toolbar and shortcut menu to plan the examination.							
admin	Slice gap.								admin	Field of view (FOV)

							admin	I can use flexible oversampling to ensure the entire anatomy is covered.		
					admin	Box				
			admin	3D view						
	admin	All midplanes								admin
Stack								admin	Volume	
						admin	Slab			
				admin	Scan time					
		admin	SAR							
admin	SED								admin	Rel SNR
							admin	PNS		
					admin	Technical Room				
			admin	TR						
	admin	I can view the SAR level for the scan.								admin



I can view the SED level for the examination.								admin	I can use the buttons in the Dashboard to undo, redo, accept, reset, and cancel changes.	
						admin	FOV			
				admin	Voxel					
		admin	Matrix							
admin	Slice thickness and gap								admin	NSA
							admin	Fat Suppression (SPIR)		
					admin	I can view advanced parameter setting tabs.				

			admin	I can reset the sequence settings to their original state using the undo button.						
	admin	I can identify ExamC and items that use Propagate Coverage.								admin
I can view conflicts and access assistance on the Conflicts tab.								admin	I can enable AutoView for a sequence to view images during reconstruction.	

						admin	I can identify sequences that have SmartLine (inline) postprocessing enabled.			
				admin	I can view and modify the Info page to add site-specific notes regarding the ExamCard and scan.					
		admin	I can manually start, pause, and restart a scan.							

admin	I recognize that pause scan and stop scan have different outcomes.								admin	Patient name
							admin	Physiology signal (if connected)		
					admin	Scan progress bar				
			admin	Exam card progress bar						
	admin	Message line								admin
SED								admin	I can rescan failed scans.	
						admin	I can use ImageView to view images.			

				admin	I can switch between the thumbnail and ScanList views.					
		admin	I can use the ImageView toolbar and the shortcut (right-click) menu to modify view settings.							
admin	Add and remove rows and columns								admin	Use standard layouts
							admin	Play and pause a movie		
					admin	Create text box				
			admin	Measure the image						
	admin	Select viewing display modes								admin

Change settings								admin	I can display Review environment.	
						admin	I can switch between List view and Thumbnail view.			
				admin	Menu bar					
		admin	Panel controls							
admin	Short cut (right-click) menus								admin	Keyboard keys
							admin	Scroll		
					admin	Zoom the display (middle and right button)				
			admin	Panel controls						
	admin	Change the window width and level								admin

Reset the window, zoom and pan								admin	Change the display to tiled or tabbed layout.	
						admin	Link and unlink selected imaging series.			
				admin	Capture a screen image and save it as a DICOM file.					
		admin	Stack display							
admin	Box view								admin	Slice mode
							admin	3D mode		

					admin	I can use the Package Manager to switch between examinations/views and to stop the execution of packages.				
			admin	I can display image information.						
	admin	I can expand Series information.								admin
I can display and hide Review Planscan to show planning.								admin	I can annotate an image to show ROI, add labels, and lines.	



						admin	I can use tools to measure in the image.			
				admin	I can use print screen to capture an image.					
		admin	I can use the Movie Toolbox to play, pause, and restart a movie.							
admin	I can save the reformat images to the database.								admin	I can use Volume View to select render modes (algorithms) to calculate projections and reformat s of the source images.

							admin	Maximum Intensity Projections (MIP)		
					admin	Minimum Intensity Projections (MinIP)				
			admin	Multipanar Reformating (MPR) rendering for 3D scans						
	admin	Surface Rendering (shaded and unshaded surface)								admin
Navigate the view								admin	Navigate the reference images	
						admin	Change the reference views and lines.			

				admin	Change the layout of a view					
		admin	Draw contours.							
admin	Reset all settings								admin	Orientation
							admin	Zoom the display (middle and right button)		
					admin	Slab thickness				
			admin	I can use Picture Plus to apply a filter to images to customize the appearance of the image for the radiologists preferences.						

	admin	I can apply a Picture Plus preset to the image.								admin
I can use the mouse to adjust smoothing and edge enhancement.								admin	I can create a custom preset to define smoothing and edge enhancement values.	
						admin	I can generate the modified series to save the new imaging series to the examination.			

				admin	I recognize a series with prefix "e" in the series name has been enhanced by Picture Plus.					
		admin	I can use the MobiView postprocessing package to fuse multi-station datasets.							

admin	I recognize that images must be acquired as different stacks in Head-Feet direction in order to use the MobiView postprocessing package.								admin	I recognize that it is a best practice to keep the source images as well as the fused image.
							admin	I can check for artifacts before fusing images so that they are not mistakenly interpreted as pathologies.		
					admin	None				
			admin	Automatic						

	admin	MIP								admin
Fuse Hardcut								admin	Fuse Smooth	
						admin	Merge series			
				admin	I can save the fused images to the patient database.					
		admin	I can fuse a multi-station imaging series that includes multiple image types.							
admin	Local patient database								admin	Queue DVD
							admin	DICOM network node		
					admin	PACS				
			admin	External hard drive						

	admin	I can archive and delete examinations from the patient database.								admin
I can enable Autopush to DICOM node.								admin	The entire examination	
						admin	Selecte d images			
				admin	Selecte d series					
		admin	I can use Split Exam to save the examination images as multiple scan instances.							
admin	Storing and retrieving data from a USB drive								admin	I can enable access to a removable USB drive.



							admin	I can import and export an ExamCard stored to a USB drive.		
					admin	I can back-up the ExamCard database to a USB drive.				
			admin	I can send and retrieve examination data from the data archive system (for example PACS).						

	admin	I can send data to the data archive system and remove it from the database on the MR system to maintain good system performance.								admin
I can save an examination to external media.								admin	I can position the patient for a brain examination.	
						admin	I recognize that some passive headsets may cause image artifacts.			

				admin	I can position the Head coil and accessories.					
		admin	I can add a routine brain Exam Card to the Scan List.							
admin	I can plan the brain examination.								admin	I recognize that, when using SENSE, I must pay attention to the foldover direction and oversampling area to avoid foldover of anatomy outside the oversampling area.

							admin	I can post-process the brain examination using the Diffusion package.		
					admin	See Knee Routine Workflow Guide				
			admin	I can position the patient for a knee examination.						
	admin	I can position the knee coil and accessories to reduce motion and improve patient comfort.								admin

I can add the knee Exam Card to the Scan List.								admin	I can plan the knee examination.	
						admin	I can post-process the examination images.			
				admin	I can position the patient for an abdomen examination.					
		admin	I can position the abdomen coil and accessories to reduce motion and improve patient comfort.							

admin	I can position the respiratory sensor.								admin	I can add the abdomen ExamCard to the ScanList.
							admin	I can plan the abdomen examination.		
					admin	I can use breathhold and free breathing techniques to perform the examination.				
			admin	I can use AutoVoice (if purchased) to communicate breathhold instructions to the patient.						

	admin	I can post-process the abdomen images.								admin
Refer to the Spine Workflow guide								admin	I can position the patient for a spine examination.	
						admin	I can position the spine coil and accessories to reduce motion and improve patient comfort.			
				admin	I can add the spine ExamCard to the ScanList.					
		admin	I can plan the spine examination.							

admin	Use MobiView to fuse images								admin	Use Picture Plus to enhance images
							admin	Use Volume View for MPR and MIP reconstruction		
					admin	I can position the patient for an ankle examination.				
			admin	I can position the ankle coil and accessories to reduce motion and improve patient comfort.						



	admin	I can add the ankle ExamCard to the ScanList.								admin
I can plan the ankle examination.								admin	Position Shim volume	
						admin	I can post-process the spine images			

#### Ge Mri Competencies

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Prevent skin to bore contact
							admin	Prevent skin to skin contact	sss	2023-06-29
sss	2023-06-29	sss	sss	ss	admin	Make the patient comfortable.				

			admin	Immobilize the patient to reduce movement during the examination.						
	admin	I can apply hearing protection to the patient								admin
I recognize that passive headphones don't allow for communication and may cause image artefacts.								admin	I can securely position the nurse call button and provide instructions to the patient for its use.	

						admin	With my 1.5T system, I know to use both earplugs and headphones for hearing protection.			
				admin	I can locate the emergency magnet off button.					
		admin	I can describe the events and potential risks that occur when the emergency shut down is initiated.							

admin	I recognize the asphyxiation and burn dangers associated with release of cryogen s that occurs during emergency shut down.								admin	I can identify emergencies when the emergency magnet off button is used and not used.
							admin	I recognize that the emergency magnet off button (quench ) is used only when there is risk of imminent danger.		

					admin	Patient/ staff Contra- Indications				
			admin	Patient position ning (laser eye protecti on; acoustic hearing protecti on; patient alert system; use of pads...)						
	admin	Emerg ency procedu res (Emerg ency Stop buttons; patient removal ; Quench ...)								admin
Accessories								admin	Patient positioni ng and landmar king	

						admin	Operati on of the table			
				admin	Operati on on the gantry					
		admin	Explana tion and Position ing of the MRI Coils							
admin	Q:Syste m Procedu re:								admin	System Comput er & Monitor power
							admin	Startup & Shutdo wn		
					admin	Explana tion of Standar d Coils availabl e on System				
			admin	Explana tion of the Digital Surroun d Technol ogy (DST) If availabl e						

	admin	Explanation of the Total Digital Imaging coil suite If available								admin
Explanation of AIRCoil and MPCoils								admin	Explanation of additional Coils (GEM Flex; PV; 16ch Knee coil; 8ch Foot/Ankle; 8ch Breast; 16Ch Breast; 18ch Kneecoil)	
						admin	Coil Selection Interface including Auto Coil Select			

				admin	AIR Touch Includes Flexible NPW and Selectiv e Anatom y					
		admin	Explana tion of User Interfac e							
admin	Protocol Manage ment								admin	Patient Gating : Cardiac; PG ; RTr; Navigat or
							admin	Explana tion of the scannin g; Prescrib ing; Image Visualis ation; Post- Process ing and Archivin g		
					admin	AIReco n				
			admin	AIReco n DL						



	admin	Automatic Slice Prescription : AirRx Brain; AirRX Knee								admin
Parallel Imaging:ASSET;ARC								admin	Intensity Correction:Pure ; Scenic	
						admin	Dixon Technique: IDEAL; Flex			
				admin	3D FSE Family :CUBE					
		admin	Propeller							
admin	MAGiC - acquisition - contrast reconstruction - pitfalls								admin	3D GRE Family : BRAVO /MP-Rage; MENSA ;MERGE ;SPGR
							admin	3D Promo 2.0		
					admin	eSWAN				
			admin	3D ASL						

	admin	Hyper Suite( Hyperse nse- Hyper Cupe- Hyper Band )								admin
DWI Family: eDWI; FOCUS; MUSE/MUSE Stir; Synthetic DWI; Distortion Correction								admin	SILENT suite	
						admin	fMRI			
				admin	Cardiac Basic :Fiesta cine;Ti me Course; Cine IR;Late Enhanc ement					
		admin	Cardiac Advanc ed :3D HEART; Cardio Map; ViosWo rks							

admin	ViosWorks								admin	3D BODY and Breast Family :VIBRANT/VIBRANT Flex; Lava /Lava Flex; Disco/Disco Flex
							admin	3D Stack of Stars : DISCO Star/ Lava Star		
					admin	Vascular : TRICKS				
			admin	Vascular NO CE : Inhance Inflow IR/Inhance 3D Velocity /Inhance 3D Delta Flow/Inhance 3D Velocity						
	admin	QuickStep								admin

Pasting								admin	Auto-bind	
						admin	I can position the patient for a brain examination.			
				admin	I recognize that some passive headsets may cause image artifacts.					
		admin	I can position the Head coil and accessories.							
admin	I can plan the brain examination.								admin	I can position the patient for a knee examination.

							admin	I can position the knee coil and accessories to reduce motion and improve patient comfort.		
					admin	I can plan the knee examination.				
			admin	I can post-process the examination images.						
	admin	I can position the patient for an abdomen examination.								admin
I can position the abdomen coil and accessories to reduce motion and improve patient comfort.								admin	I can plan the abdomen examination.	

						admin	I can use breathhold and free breathing techniques to perform the examination.			
				admin	I can post-process the abdominal images.					
		admin	Refer to the Spine Workflow guide							
admin	I can position the patient for a spine examination.								admin	I can position the spine coil and accessories to reduce motion and improve patient comfort.

							admin	I can add the spine ExamCard to the ScanList.		
					admin	I can plan the spine examination.				
			admin	I can position the patient for an ankle examination.						
	admin	I can position the ankle coil and accessories to reduce motion and improve patient comfort.								admin
I can add the ankle ExamCard to the ScanList.								admin	I can plan the ankle examination.	

						admin	Position Shim volume	MK	2023-06-29	sdfd
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#### Mri Responsible Person

row_name	trainig_date	initials	competency_date	comments	user_id	user-id	Relevant national, international standards and guidelines on MR safety and their interpretation
2023-07-07	AS	2023-06-29	sss	admin	The physical principles of NMR and MRI		
		admin	The physical theory and technology underpinning clinical applications of MR				
admin	The operational dynamics of a clinical MR facility					admin	The clinical case-mix relevant to the MR system
				admin	The organisational culture of the institution		



		admin	Types of risk and methods of risk management				
admin	The impact of stray magnetic fields on the environment					admin	The nature and biological effects of electromagnetic fields encountered in MRI
				admin	Electromagnetic compatibility in the context of MRI and associated equipment		
		admin	Dangers associated with liquefied gases				
admin	The principles and limitations of MR compatibility					admin	The implications for safety and equipment selection

				admin	Roles, responsibilities and levels of authority of personnel involved in MR services		
		admin	Risks associated with MR services				
admin	Relevant legislation and its interpretation					admin	Attended Kanal MRSO Course (Compulsory)

#### Injectors Mrxperion

row_name	staff	initials	date	user_id	user-id	Correctly attach syringe/s without contamination of sterile parts
ggg	MK	2023-06-29	admin	Loading of contrast into syringe without contamination of sterile parts		
	admin	Able to load with contrast & saline safely				admin

Able to observe and remove air bubbles from the syringes and tubing				admin	Ensures that all air is expelled from the syringe and tubing whilst the syringe is upright	
		admin	Tilts the pump nose down, and visually assess the syringe and tubing for any air bubbles, expelling them if necessary. Express contrast from the sterile end of the connecting tube and connect to the cannula			
admin	Able to arm & start the injector correctly				admin	Check all contrast details prior to loading including expiry date
			admin	Aware of the amount of contrast and flow rates required for each examination		

	admin	Understanding of all set parameters on the monitor				admin
Able to perform a test injection to check positioning (advance small dosage)				admin	Able to stop the injector in an emergency	
		admin	Explain procedure to patient and ensure they understand how to alert staff if needed			
admin	Aware of contrast media reactions and safety precautions				admin	Knowledge of Fault Reporting Procedures

#### Injectors Stellant

row_name	staff	initials	date	user_id	user-id	Correctly attach syringe/s without contamination of sterile parts
comment	ML	2023-06-29	admin	Loading of contrast into syringe without contamination of sterile parts		

	admin	Able to load with contrast & saline safely				admin
Able to observe and remove air bubbles from the syringes and tubing				admin	Ensures that all air is expelled from the syringe and tubing whilst the syringe is upright	
		admin	Tilts the pump nose down, and visually assess the syringe and tubing for any air bubbles, expelling them if necessary. Express contrast from the sterile end of the connecting tube and connect to the cannula			
admin	Able to arm & start the injector correctly				admin	Check all contrast details prior to loading including expiry date

			admin	Aware of the amount of contrast and flow rates required for each examination		
	admin	Understanding of all set parameters on the monitor				admin
Able to perform a test injection to check positioning (advance small dosage)				admin	Able to stop the injector in an emergency	
		admin	Explain procedure to patient and ensure they understand how to alert staff if needed			
admin	Aware of contrast media reactions and safety precautions				admin	Knowledge of Fault Reporting Procedures

#### Ct Authorised Operator

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Introduction
AA	2023-06-29	dsds	2023-06-29	dsfsd	sdfsd	sdfsd	admin	Realistic expectations of training		

					admin	Identify local training supervisor/mentor				
			admin	Understanding the CT process						
	admin	Know the location of the CT Quality Documentation								admin
Read and understood the CT Quality Management System documentation								admin	Know the Location of the MRI Local Rules	
						admin	Have read and understood the CT Local Rules			

				admin	Know the Safety procedure for CARDIAC ARREST					
		admin	Know the Safety procedure for FIRE							
admin	Know the Safety procedure for contrast reactions								admin	Know the Safety procedure for patients
							admin	Know where the red electrical buttons are located		



					admin	Know when to press the electrical buttons as Quality document				
			admin	Know how and where to record safety incidents						
	admin	Know how and where to record equipment incidents								admin
Preparation of the patient prior to the examination								admin	Aware of the potential difficulties patient encounter	

						admin	The need to treat patients with respect and compassion			
				admin	Patient two-way communication					
		admin	Infection Control Issues							
admin	Completion of the patient contrast questionnaire (if required)								admin	Dealing/queries regarding the answers to questionnaire
							admin	Able to find "routine" scanning protocol as required		
					admin	Able to select protocol manipulation pages				

			admin	Able to adapt scanning protocols as appropriate						
	admin	Underst and how protocol changes affect images								admin
Understanding the MR process								admin	Able to set up daily QA depending on manufacturer	
						admin	Able to perform daily QA depending on manufacturer	CC	2023-06-29	ddd

#### Ct Clinical Skills

row_name	phillips	siemens	ge	canon	comments	user_id	user-id	Familiar with AMDS CT safety Check List for Patients
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y	y	y	y		admin	Thoracic Aorta	on	on
on	on		admin	Whole Aorta	on	on	on	on
	admin	Gated Aorta	on	on	on	on		admin
Cardiac Angiogram	on	on	on	on		admin	Calcium Scoring	on
on	on	on		admin	Unenhanced Head	on	on	on
on		admin	Contrast Head	on	on	on	on	
admin	Mandible	on	on	on	on		admin	Facial Bones
on	on	on	on		admin	Sinuses	on	on
on	on		admin	Petrous Bones	on	on	on	on
	admin	IAMs	on	on	on	on		admin
Stroke Angio	on	on	on	on		admin	HRCT	on
on	on	on		admin	Arterial Chest	on	on	on
on		admin	PV Chest	on	on	on	on	
admin	Unenhanced AP	on	on	on	on		admin	PV AP
on	on	on	on		admin	Arterial AP	on	on
on	on		admin	Adrenals/adrenal washout	on	on	on	on
	admin	KUB	on	on	on	on		admin
Renal Angiogram	on	on	on	on		admin	Urogram	on
on	on	on		admin	Mesenteric Angiogram	on	on	on

on		admin	Dual Phase Liver	on	on	on	on	
admin	Periphere l Angiogra m	on	on	on	on		admin	Shoulder
on	on	on	on		admin	Humerus	on	on
on	on		admin	Elbow	on	on	on	on
	admin	Forearm (Radius and Ulnar)	on	on	on	on		admin
Wrist	on	on	on	on		admin	Hand/Fin gers	on
on	on	on		admin	Pelvis	on	on	on
on		admin	SIJS	on	on	on	on	
admin	Hips	on	on	on	on		admin	Femur
on	on	on	on		admin	Knee	on	on
on	on		admin	Lower Legs (Tibia and Fibula)	on	on	on	on
	admin	Ankle	on	on	on	on		admin
Foot/Toes	on	on	on	on		admin	Cervical Spine	on
on	on	on		admin	Thoracic Spine	on	on	on
on		admin	Lumbar Spine	on	on	on	on	
admin	Sacrum/C occyx	on	on	on	on		admin	Whole Body
on	on	on	on		admin	Polytraum a	y	on

row_name	intitals	date	compet ency_co mments	observe d	supervis ed	independ ently	comme nts	user_id	user-id	Introduc tion
MK	2023-06 -29	comp	2023-06 -29	aa	aaa	aa	admin	Realisti c expecta tions of training		
					admin	Identify local training supervis or/ment or				
			admin	Underst anding the CT process						
	admin	Underst and Log book completi on during training								admin
Able to Operate the Gantry Controls								admin	Able to Remove the Patient from the Gantry in an emerge ncy.	

						admin	Knows how to reset the scanner after the Emergency Stop Button has been engaged.			
				admin	Phillips Scanner technical use					
		admin	Able to select patient from the schedule (worklist)							
admin	Able to select new examination								admin	Able to input patient data when RIS is down
							admin	Able to select correct scan protocol.		

					admin	Familiar with electronic protocol book				
			admin	Aware of the different examinations performed						
	admin	Knowledge of different clinical indications for basic exams (listed above)								admin
CT contrast agents and basic applications								admin	Aware of alternative basic imaging techniques	
						admin	Anatomical knowledge of Follow Up Chest Abdomen and Pelvis			



				admin	Anatomical knowledge of Follow Up Chest					
		admin	Anatomical knowledge of Follow Up Abdomen							
admin	Anatomical knowledge of Follow Up Pelvis								admin	Anatomical knowledge of Follow Up Head
							admin	Anatomical knowledge of Follow Up Neck		
					admin	Patient Positioning / Protocol selection of a Follow Up Chest Abdomen and Pelvis				

			admin	Patient Positioning / Protocol selection of a Follow Up Chest						
	admin	Patient Positioning / Protocol selection of a Follow Up Abdomen								admin
Patient Positioning / Protocol selection of a Follow Up Pelvis								admin	Patient Positioning / Protocol selection of a Follow Up Head	
						admin	Patient Positioning / Protocol selection of a Follow Up Neck			
				admin	Immobilisation devices					

		admin	Able to correct patient data, if input incorrect.							
admin	Able to change input scan protocol								admin	Able to change direction of table movement
							admin	Able to select alternative language for patient instructions		
					admin	Able to change Topogram Length of Perspective				
			admin	Able to definite appropriate area to be scanned						

	admin	Able to specify Field of View (FOV) when required								admin
Able to add scan protocol								admin	Able to repeat part of scan	
						admin	Able to insert "Contrast", if required.			
				admin	Able to change collimation and width for acquisition of data.					
		admin	Able to change reconstruction protocols.							
admin	Able to add reconstruction protocols								admin	Able to change appropriate Auto tasking Protocol

							admin	Able to end examination		
					admin	Able to load study/studies to viewing card				
			admin	Able to page through study/studies						
	admin	Able to manipulate window settings								admin
Able to zoom and pan images								admin	Able to alter text (add, annotate, customise, remove)	
						admin	Able to use measurement tools (e.g. HU measurement and length)			

				admin	Follow Up Chest Abdomen and Pelvis					
		admin	Follow Up Chest							
admin	Follow Up Abdomen								admin	Follow Up Pelvis
							admin	Follow Up Head		
					admin	Follow Up Neck				
			admin	Able to perform coronal reconstruction, as per protocol						
	admin	Able to perform sagittal reconstruction, as per protocol								admin

Able to save reconstructions to PACS								admin	Able to check Data stored to disc (CD/DVD WRITE R/USB)	
						admin	Able to check data stored to PACS			
				admin	Able to locate source of saved data					
		admin	Able to re-load saved data from CD							
admin	Able to re-load saved data from PACS								admin	Able to send study to another part of the network .
							admin	Knows differences between scan protocols		

					admin	Low dose CT				
			admin	Diagnostic dose CT						
	admin	Knows how to report a fault to service team								admin
Knows how to report a fault to the PACS Team								admin	Complete Daily QA	
						admin	Complete Weekly QA	aa	2023-06-29	aaa

#### Ct Scanner Canon

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Introduction
MK	2023-06-29	ss	2023-06-29	sss	ss	ss	admin	Realistic expectations of training		
					admin	Identify local training supervisor/mentor				
			admin	Understanding the CT process						



	admin	Underst and Log book completi on during training								admin
Able to Operate the Gantry Controls								admin	Able to Remove the Patient from the Gantry in an emerge ncy.	
						admin	Knows how to reset the scanner after the Emerge ncy Stop Button has been engage d.			
				admin	Canon Scanner technica l use					
		admin	System Orientat ion							
admin	Switch on/off								admin	Power procedu res

							admin	Gantry/able controls		
					admin	Cleaning				
			admin	Keyboard/Mouse/Monitors						
	admin	Keyboard controls and function keys								admin
Abort/Scan control								admin	Preset WW/WL	
						admin	Microphone			
				admin	Emergency Stop					
		admin	Mouse Combinations (pan/zoom)							
admin	Able to select patient from the schedule (worklist)								admin	Able to select new examination

							admin	Able to input patient data when RIS is down		
					admin	Able to select correct scan protocol .				
			admin	Familiar with electronic protocol book						
	admin	Aware of the different examinations performed								admin
Knowledge of different clinical indications for basic exams (listed above)								admin	CT contrast agents and basic applications	
						admin	Aware of alternative basic imaging techniques			

				admin	Executi on of Scannin g					
		admin	Exampl an Selectio n							
admin	Scanogr am and scano skip								admin	SureSta rt Bolus Trackin g
							admin	SureEx posure		
					admin	Anatomi cal Puppet				
			admin	Delays and wait single and multi helical						
	admin	Editing Protocol s								admin
Reconstruction perameters and multiviews								admin	Use of abort scan	
						admin	Repeat Examin ations			
				admin	Quit Examin ation					
		admin	Next Patient							

admin	Dose Alert								admin	Anatomi cal knowled ge of Follow Up Chest Abdome n and Pelvis
							admin	Anatomi cal knowled ge of Follow Up Chest		
					admin	Anatomi cal knowled ge of Follow Up Abdome n				
			admin	Anatomi cal knowled ge of Follow Up Pelvis						
	admin	Anatomi cal knowled ge of Follow Up Head								admin

Anatomical knowledge of Follow Up Neck								admin	Basic CT Equipment Selection / Protocol Acquisition	
						admin	Patient Positioning / Protocol selection of a Follow Up Chest Abdomen and Pelvis			
				admin	Patient Positioning / Protocol selection of a Follow Up Chest					
		admin	Patient Positioning / Protocol selection of a Follow Up Abdomen							

admin	Patient Positioning / Protocol selection of a Follow Up Pelvis								admin	Patient Positioning / Protocol selection of a Follow Up Head
							admin	Patient Positioning / Protocol selection of a Follow Up Neck		
					admin	Immobilisation devices				
			admin	Able to correct patient data, if input incorrect.						
	admin	Able to change input scan protocol								admin

Able to change direction of table movement								admin	Able to select alternative language for patient instructions	
						admin	Able to change Topogram Length of Perspective			
				admin	Able to definite appropriate area to be scanned					
		admin	Able to specify Field of View (FOV) when required							
admin	Able to add scan protocol								admin	Able to repeat part of scan
							admin	Able to insert "Contrast", if required.		



					admin	Able to change collimation and width for acquisition of data.				
			admin	Able to change reconstruction protocols.						
	admin	Able to add reconstruction protocols								admin
Able to change appropriate Auto tasking Protocol								admin	Able to end examination	
						admin	Able to load study/studies to viewing card			
				admin	Able to page through study/studies					
		admin	Able to manipulate window settings							

admin	Able to zoom and pan images								admin	Able to alter text (add, annotate, customise, remove)
							admin	Able to use measurement tools (e.g. HU measurement and length)		
					admin	Follow Up Chest Abdomen and Pelvis				
			admin	Follow Up Chest						
	admin	Follow Up Abdomen								admin
Follow Up Pelvis								admin	Follow Up Head	
						admin	Follow Up Neck			

				admin	Able to perform coronal reconstruction, as per protocol					
		admin	Able to perform sagittal reconstruction, as per protocol.							
admin	Able to save reconstructions to PACS								admin	Able to check Data stored to disc (CD/DVD WRITE R/USB)
							admin	Able to check data stored to PACS		
					admin	Able to locate source of saved data				
			admin	Able to re-load saved data from CD						

	admin	Able to re-load saved data from PACS								admin
Able to send study to another part of the network.								admin	Knows differences between scan protocols	
						admin	Low dose CT			
				admin	Diagnostic dose CT					
		admin	Knows how to report a fault to service team							
admin	Knows how to report a fault to the PACS Team								admin	Complete Daily QA
							admin	Complete Weekly QA		
					admin	Air Calibration	AK	2023-06-29	sss	2023-06-29

# Ct Scanner Siemens

row_name	intitals	date	compet ency_co mments	observe d	supervis ed	independ ently	comme nts	user_id	user-id	Introduc tion
SA	2023-06 -29	ss	2023-06 -29	sss	sss	ss	admin	Realisti c expecta tions of training		
					admin	Identify local training supervis or/ment or				
			admin	Underst anding the CT process						
	admin	Underst and Log book completi on during training								admin
Able to Operate the Gantry Controls								admin	Able to Remove the Patient from the Gantry in an emerge ncy.	

						admin	Knows how to reset the scanner after the Emergency Stop Button has been engaged.			
				admin	Canon Scanner technical use					
		admin	System Orientation							
admin	Switch on/off								admin	Power procedures
							admin	Gantry/table controls		
					admin	Cleaning				
			admin	Keyboard/Mouse/Monitors						
	admin	Keyboard controls and function keys								admin

Abort/Scan control								admin	Preset WW/WL	
						admin	Microph one			
				admin	Emerge ncy Stop					
		admin	Mouse Combina tions (pan/zo om)							
admin	Able to select patient from the schedule (worklist )								admin	Able to select new examination
							admin	Able to input patient data when RIS is down		
					admin	Able to select correct scan protocol .				
			admin	Familiar with electron ic protocol book						

	admin	Aware of the different examinations performed								admin
Knowledge of different clinical indications for basic exams (listed above)								admin	CT contrast agents and basic applications	
						admin	Aware of alternative basic imaging techniques			
				admin	Execution of Scanning					
		admin	Example Selection							
admin	Scanogram and scanoskip								admin	SureStart Bolus Tracking
							admin	SureExposure		
					admin	Anatomical Puppet				



			admin	Delays and wait single and multi helical						
	admin	Editing Protocols								admin
Reconstruction parameters and multiviews								admin	Use of abort scan	
						admin	Repeat Examinations			
				admin	Quit Examination					
		admin	Next Patient							
admin	Dose Alert								admin	Anatomical knowledge of Follow Up Chest Abdomen and Pelvis
							admin	Anatomical knowledge of Follow Up Chest		

					admin	Anatomical knowledge of Follow Up Abdomen				
			admin	Anatomical knowledge of Follow Up Pelvis						
	admin	Anatomical knowledge of Follow Up Head								admin
Anatomical knowledge of Follow Up Neck								admin	Patient Positioning / Protocol selection of a Follow Up Chest Abdomen and Pelvis	

						admin	Patient Positioning / Protocol selection of a Follow Up Chest			
				admin	Patient Positioning / Protocol selection of a Follow Up Abdomen					
		admin	Patient Positioning / Protocol selection of a Follow Up Pelvis							
admin	Patient Positioning / Protocol selection of a Follow Up Head								admin	Patient Positioning / Protocol selection of a Follow Up Neck
							admin	Immobilisation devices		

					admin	Able to correct patient data, if input incorrect.				
			admin	Able to change input scan protocol						
	admin	Able to change direction of table movement								admin
Able to select alternative language for patient instructions								admin	Able to change Topogram Length of Perspective	
						admin	Able to definite appropriate area to be scanned			
				admin	Able to specify Field of View (FOV) when required					

		admin	Able to add scan protocol							
admin	Able to repeat part of scan								admin	Able to insert "Contrast", if required.
							admin	Able to change collimation and width for acquisition of data.		
					admin	Able to change reconstruction protocols.				
			admin	Able to add reconstruction protocols						
	admin	Able to change appropriate Auto tasking Protocol								admin

Able to end examination								admin	Able to load study/studies to viewing card	
						admin	Able to page through study/studies			
				admin	Able to manipulate window settings					
		admin	Able to zoom and pan images							
admin	Able to alter text (add, annotate, customise, remove)								admin	Able to use measurement tools (e.g. HU measurement and length)
							admin	Follow Up Chest Abdomen and Pelvis		
					admin	Follow Up Chest				

			admin	Follow Up Abdome n						
	admin	Follow Up Pelvis								admin
Follow Up Head								admin	Follow Up Neck	
						admin	Able to perform coronal reconstr uction, as per protocol			
				admin	Able to perform sagittal reconstr uction, as per protocol .					
		admin	Able to save reconstr uctions to PACS							
admin	Able to check Data stored to disc (CD/DV D WRITE R/USB)								admin	Able to check data stored to PACS

							admin	Able to locate source of saved data		
					admin	Able to re-load saved data from CD				
			admin	Able to re-load saved data from PACS						
	admin	Able to send study to another part of the network .								admin
Knows differences between scan protocols								admin	Low dose CT	
						admin	Diagnostic dose CT			
				admin	Knows how to report a fault to service team					



		admin	Knows how to report a fault to the PACS Team							
admin	Complete Daily QA								admin	Complete Weekly QA
							admin	Air Calibration	xxx	2023-06-29

Ct Scanner Ge

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Introduction
							admin	Realistic expectations of training	NN	2023-06-29
dds	2023-06-29	fff	ddd	dd	admin	Identify local training supervisor/mentor				
			admin	Understanding the CT process						

	admin	Underst and Log book completi on during training								admin
Able to Operate the Gantry Controls								admin	Able to Remove the Patient from the Gantry in an emerge ncy.	
						admin	Knows how to reset the scanner after the Emerge ncy Stop Button has been engage d.			
				admin	Canon Scanner technica l use					
		admin	System Orientat ion							
admin	Switch on/off								admin	Power procedu res

							admin	Gantry/able controls		
					admin	Cleaning				
			admin	Keyboard/Mouse/Monitors						
	admin	Keyboard controls and function keys								admin
Abort/Scan control								admin	Preset WW/WL	
						admin	Microphone			
				admin	Emergency Stop					
		admin	Mouse Combinations (pan/zoom)							
admin	Able to select patient from the schedule (worklist)								admin	Able to select new examination

							admin	Able to input patient data when RIS is down		
					admin	Able to select correct scan protocol .				
			admin	Familiar with electronic protocol book						
	admin	Aware of the different examinations performed								admin
Knowledge of different clinical indications for basic exams (listed above)								admin	CT contrast agents and basic applications	
						admin	Aware of alternative basic imaging techniques			

				admin	Executi on of Scannin g					
		admin	Exampl an Selectio n							
admin	Scanogr am and scano skip								admin	SureSta rt Bolus Trackin g
							admin	SureEx posure		
					admin	Anatomi cal Puppet				
			admin	Delays and wait single and multi helical						
	admin	Editing Protocol s								admin
Reconstruction perameters and multiviews								admin	Use of abort scan	
						admin	Repeat Examin ations			
				admin	Quit Examin ation					
		admin	Next Patient							

admin	Dose Alert								admin	Anatomical knowledge of Follow Up Chest Abdomen and Pelvis
							admin	Anatomical knowledge of Follow Up Chest		
					admin	Anatomical knowledge of Follow Up Abdomen				
			admin	Anatomical knowledge of Follow Up Pelvis						
	admin	Anatomical knowledge of Follow Up Head								admin

Anatomical knowledge of Follow Up Neck								admin	Patient Position ing / Protocol selectio n of a Follow Up Chest Abdome n and Pelvis	
						admin	Patient Position ing / Protocol selectio n of a Follow Up Chest			
				admin	Patient Position ing / Protocol selectio n of a Follow Up Abdome n					
		admin	Patient Position ing / Protocol selectio n of a Follow Up Pelvis							

admin	Patient Positioning / Protocol selection of a Follow Up Head								admin	Patient Positioning / Protocol selection of a Follow Up Neck
							admin	Immobilisation devices		
					admin	Able to correct patient data, if input incorrect.				
			admin	Able to change input scan protocol						
	admin	Able to change direction of table movement								admin
Able to select alternative language for patient instructions								admin	Able to change Topogram Length of Perspective	



						admin	Able to definite appropriate area to be scanned			
				admin	Able to specify Field of View (FOV) when required					
		admin	Able to add scan protocol							
admin	Able to repeat part of scan								admin	Able to insert "Contrast", if required.
							admin	Able to change collimation and width for acquisition of data.		
					admin	Able to change reconstruction protocols.				

			admin	Able to add reconstruction protocols						
	admin	Able to change appropriate Auto tasking Protocol								admin
Able to end examination								admin	Able to load study/studies to viewing card	
						admin	Able to page through study/studies			
				admin	Able to manipulate window settings					
		admin	Able to zoom and pan images							

admin	Able to alter text (add, annotate, customise, remove)								admin	Able to use measurement tools (e.g. HU measurement and length)
							admin	Follow Up Chest Abdomen and Pelvis		
					admin	Follow Up Chest				
			admin	Follow Up Abdomen						
	admin	Follow Up Pelvis								admin
Follow Up Head								admin	Follow Up Neck	
						admin	Able to perform coronal reconstruction, as per protocol			

				admin	Able to perform sagittal reconstruction, as per protocol.					
		admin	Able to save reconstructions to PACS							
admin	Able to check Data stored to disc (CD/DVD WRITE R/USB)								admin	Able to check data stored to PACS
							admin	Able to locate source of saved data		
					admin	Able to re-load saved data from CD				
			admin	Able to re-load saved data from PACS						

[illegible]

						admin				
				admin						
		admin								
admin									admin	
							admin			
					admin					
			admin							
	admin									admin

### Injectors Centargo

row_name	staff	initials	date	user_id	user-id	Contrast
Me	MK	2023-06-29	admin	Saline		
	admin	Clamps				admin
Spike Adapter to connect to day set				admin	Lights	
		admin	Power Button			
admin	Unlock door button				admin	Patient line port
			admin	Outlet air sensor light		
	admin	On fluid loading area				admin
Door Open				admin	Impossible to open door when patient line inserted	
		admin	Prime container (injector will not work without this in place)			
admin	Day Set & Patient Line				admin	24h day set

			admin	Spikes		
	admin	Air sensor Tube				admin
Orange Dat Set Cap				admin	Closed-loop connection	
		admin	Installing Day Set			
admin	Do not move orange cap				admin	Piston Advance
			admin	Oush air sensor tube into outlet air sensor		
	admin	Open snap spike adaptors into holders				admin
Replacing Spike				admin	Spikes labelled 24h	
		admin	Replace is not sterile			
admin	Load Contrast & Saline				admin	Select on display
			admin	Slide Bottle onto Holder		
	admin	Fill				admin
Repeat for addition bottles				admin	Select Blue Icon for saline	
		admin	Spike bag horizontally			
admin	Replacing Fluids				admin	Remove empty container
			admin	Select correspondin g icon		

	admin	Load on spike and press fill				admin
Chaning contrast concentrations				admin	Performing injection	
		admin	Arm button			
admin	Checking for air				admin	Test injection
			admin	Ending exam		
	admin	Managing air detection				admin
Inecjtor automatically stops if air detected				admin	Disconnect patient and follow on screen instruction	
		admin	Advance saline to clear air	Last	sksk	2023-06-29

#### Medicines Management

row_name	intitals	date	competency_comments	observed	supervised	independently	comments	user_id	user-id	Understanding and awareness of the use of PGDs/PSDs
AA	2023-06-29	aa					admin	Dispensing medications under a PGD/PSD	aa	2023-06-29



aa	2023-06-29	aa	aa		admin	Records Management for dispensing under a PGD/PSD	dd	2023-06-29	aa	2023-06-29
dd	dd		admin	IV Cannulation training	aa	2023-06-29	dd	2023-06-29	dd	dd

#### Extra Courses

row_name	col_from	col_to	category	participation	title	details	user_id	user-id	1
2023-06-29	2023-06-30	fff	fff	ff	ff	admin	2		
				admin	3				
		admin	4						
admin	5							admin	6
						admin	7		
				admin	8	2023-06-29	2023-06-29	ff	ff