**MRI Scan booking form (Neuroimaging Unit Oldenburg)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Responsible Researchers** | | | |
| Responsible researcher |  | | |
| Group |  | PI |  |
| Other people involved |  | | |
| All people working at the MRI already received a safety instruction | | | yes  no |
| Signature PI |  | | Date: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Study Details** | | | | | |
| Study name |  | | | | |
| Short title |  | | | | |
| Participants | 0 participants (0 patients, 0 controls) | | | | |
| Sessions per participant |  | Session names |  | | |
| Funding |  | | | | |
| DFG (150€/h)  Contingent (25€/h) | | | | |
| Ethics approval | yes  no | | | Ethics approval number: |  |
| Setup | Projector  Response Pads Eyetracker  Optoacoustics headphones  In-ear headphones  ECG  Pulse  Respiration  Driving simulator  other: MRI safety approved:  yes  no | | | | |
| Study presented | Date: | | | | |
| Planned start | Date: | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MRI Scanning Details** | | | | | |
| Scanner operator |  | | | | |
| Head coil | 20-channel  64-channel  pediatric | | | | |
| Sequences to be used (please hand in pdf with all protocol parameters provided at the MRI) | | | | | |
| Sequence | Task name (other specifications) | Multislice | No of Scans | TR (ms) | Duration  (hh:min:s) |
| 1) Select sequence |  | yes  no |  |  |  |
| 2) Select sequence |  | yes  no |  |  |  |
| 3) Select sequence |  | yes  no |  |  |  |
| 4) Select sequence |  | yes  no |  |  |  |
| 5) Select sequence |  | yes  no |  |  |  |
| 6) Select sequence |  | yes  no |  |  |  |
|  |  |  |  |  |  |
| Total time | | | | |  |
| Time per participant to be booked | | | | |  |

|  |  |
| --- | --- |
| **Stimulus PC** | |
| Software | Matlab  Cogent  Psychtoolbox  Presentation  other: |
| Response Pads (which buttons?) | Right hand:  1  2  3  4  Left hand:  6  7  8  9 |
| Folder | Experiments / Select Group / StudyName |
| Specific connections? |  |