

## Risk Assessment Form

Use this form for any detailed risk assessment unless a specific form is provided. Refer to your Summary of Hazards/Risks and complete forms as required, including those that are adequately controlled but could be serious in the absence of active management. The Action Plan and reply section is to help you pursue those requiring action.

<b>Name of Initial Assessor / Reviewer:</b>	Sarah Allwood-Spiers	<b>Post Held:</b>	Clinical Scientist
<b>Department:</b>	Imaging	<b>Date (Initial Review):</b>	08/11/2019
<b>Subject of Assessment:</b> E.g.: hazard, task, equipment, location, people			
Contact burns from MRI scanning			
<b>Hazards</b> (Describe the harmful agent(s) and the adverse consequences they could cause)			
<p>Patients can receive contact burns while having an MRI scan. The radiofrequency power of the MRI scanner induces electric currents in the body which can lead to a burn.</p> <p>Contact burns can occur due to:</p> <ul style="list-style-type: none"> <li>Proximity burns: when patient tissues are within approximately 1cm of the wall of the scanner bore.</li> <li>Large loops in the patient's body: when there are skin to skin contact points in the patient, such as their thighs touching, or their hand touching their thighs.</li> <li>Burns can also occur if there are conductive materials in the bore such as electrically conductive clothing, leads, wires, or patches.</li> </ul>			
<b>Description of Risk</b>			
Describe the work that causes exposure to the hazard, and the relevant circumstances. Who is at risk? Highlight significant factors: what makes the risk more or less serious – e.g.: the time taken, how often the work is done, who does it, the work environment, anything else relevant.			
All patients having MRI scans are vulnerable to this type of injury. Patients who have large areas of skin to skin contact or any skin to MRI bore contact are more vulnerable.			
<b>Existing Precautions</b>			
<b>Summarise current controls in place</b>		<b>Describe how they might fail to prevent adverse outcomes.</b>	

<p>Ensure all authorised MRI operators and accompanying nursing staff are aware of the risk of contact burns.</p> <p>Authorised MRI operators and MR nurses are trained to position the patient correctly to avoid obvious contact loops, for example, hands being clasped or ankles being overlapped.</p> <p>Insulating pads provided by the scanner vendor should be used to avoid skin-skin and skin-bore contact points, making sure where possible, that there is at least 1cm of padding between these areas.</p> <p>Patients are taken through the MRI checklist to ensure there are no leads or patches attached that would be unsafe for MRI.</p> <p>Cold compress should be available in the MRI department to apply to an affected area of heating or burn</p>	<p>There is a greater likelihood of skin to skin contact if a patient is wearing a hospital gown as opposed to scrubs.</p> <p>The patient may move during the scan into a position which is not the position the MR staff originally placed them in.</p> <p>It might not be recognised that a patient is wearing electrically conductive clothing (for example, sportswear or underwear with silver fibres in the material).</p>
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**Level of Risk** - Is the control of this risk adequate?

Give more than one risk level if the assessment covers a range of circumstances. You can use the 'matrix' to show how 'likelihood' and 'consequences' combine to give a conclusion. Also, be critical of existing measures: if you can think how they might fail, or how they could be improved, these are indications of a red or orange risk.

**Risk Matrix**

<u>Likelihood</u>	<u>Impact/Consequences</u>				
	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium	High	High	V High	V High
Likely	Medium	Medium	High	High	V High
Possible	Low	Medium	Medium	High	High
Unlikely	Low	Medium	Medium	Medium	High
Rare	Low	Low	<u>Low</u>	Medium	Medium

Very High     
  High     
  Medium     
  Low

**Current risk level**

Given the current precautions, and how effective and reliable they are, what is the current level of risk? **Green** is the target – you have thought it through critically and you have no serious worries. Devise ways of making the risk green wherever you can.

**Yellow** is acceptable but with some reservations. You can achieve these levels by reducing the inherent risk and or by effective and reliable precautions.

**High (Orange) or Very High (Red) risks are unacceptable and must be acted on: use the Action Plan section to summarise and communicate the problems and actions required.**

## Action Plan (if risk level is High (Orange) or Very High (Red))

Use this part of the form for risks that require action. Use it to communicate, with your Line Manager or Risk Coordinator or others if required. If using a copy of this form to notify others, they should reply on the form and return to you. Check that you do receive replies.

Describe the measures required to make the work safe. Include hardware – engineering controls, and procedures. Say what you intend to change. If proposed actions are out with your remit, identify them on the plan below but do not say who or by when; leave this to the manager with the authority to decide this and allocate the resources required.

Proposed actions to control the problem List the actions required. If action by others is required, you must send them a copy	By Whom	Start date	Action due date
Providing scrubs with long sleeved tops and no pockets to MR Imaging departments will further reduce the likelihood of contact burns occurring.	Imaging Management		

**Action by Others Required - Complete as appropriate: (please tick or enter YES, name and date where appropriate)**

Report up management chain for action	
Report to Estates for action	
Contact advisers/specialists	
Alert your staff to problem, new working practice, interim solutions, etc	

### Reply

If you receive this form as a manager from someone in your department, you must decide how the risk is to be managed. Update the action plan and reply with a copy to others who need to know. If appropriate, you should note additions to the Directorate / Service Risk Register.

If you receive this as an adviser or other specialist, reply to the sender and investigate further as required.

Date of last review: As per QPulse record

Next Review date: As per QPulse record