MOSAES – information required to submit individual patient events

Mandatory:

- MRI scanner used to perform the scan (vendor, model and field strength)
- Body region(s) scanned (e.g. brain, liver etc)

Optional:

- Your NHS Health Board or Trust (or other employer), name and email
- Implant category
- Implant manufacturer (if multiple implants, state the main one of concern here and add the other relevant implants when prompted in a later question)
- Implant make/model (if unknown, please describe what was known about the implant)
- MR safety label
- Information on any other relevant implants
- Whether risk/benefit decision justified
- Why was the scan off-label?
- Scanning mode used (e.g. Normal Operating Mode)
- Any low SAR or B1+RMS limits used
- Transmit coil used
- Receive coil used
- Any other manufacturer's conditions that were followed
- Patient orientation (e.g. head first supine)
- Patient height (if known/relevant)
- Patient awareness (e.g. GA scan)
- Summary of mitigations taken to minimise risk
- Risk profile (likelihood, impact/consequences and overall risk)
- Outcome: scan performed/completed?, whether any adverse events occurred and details if so.
- Any additional information relevant to this off label scan