

### 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>	Jonathan Ashmore	<b>Post Held:</b>	Clinical Scientist
<b>Department:</b>	<b>Radiology</b>	<b>Date (of initial review):</b>	<b>27/6/2023</b>

**Subject of Assessment:** E.g.: hazard, task, equipment, location, people

MRI Scanning patients with eyelid weights

**Hazards** (Describe the harmful agent(s) and the adverse consequences they could cause)

Eyelid weights could potentially experience torque or a ferromagnetic projectile force resulting in injury to the orbit.

**Description of Risk**  
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.

Eyelid weights are typically made from non-ferrous metals including gold and platinum. However peer reviewed articles suggested older implants could be made of other materials such as stainless steel. There was no evidence however of MR Unsafe eyelid weights and every source of evidence suggested these should be safe to scan.

The risk from scanning eyelid weights is associated with an unknown or newly manufactured ferromagnetic device. However, given the size of the implant and location in the eyelid (superficial to the globe) it would seem the risk of injury even if the implant was ferromagnetic would be low and would most likely just lead to pressure on the globe (e.g. like rubbing your eyes with your fingers). The risk of heating is negligible given the implants are less than 2cm and therefore FDA guidance suggests any heating assessment of such an implant is not required.

There is a risk that an eyelid weight could get confused with an eyelid spring for which there are some known MR Unsafe implants. However, the risk of scanning these devices is low and there are reports of these being safely scanned in the peer reviewed literature after 6 weeks when tissue fibrosis will have secured the implant into place. Given the limited number of studies highlighting this it would seem prudent to exclude eyelid springs from this GISP.

From the evidence review there is one anecdotal account via the MRI safety facebook group suggesting that a patient complained of heating in a gold eyelid weight. There is no robust evidence to back this up and the size of eyelid weights is below the 2cm limit which is highlighted within FDA guidance for which implant manufacturers are required to do heating measurements for an implant to gain approval to be marked as MR Conditional.

<b>Existing Precautions</b>	<b>Describe how they might fail to prevent adverse outcomes.</b>
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Patients are taken through an extensive MRI safety checklist to identify any implants that they may have. Specific questions are asked to ensure implanted eyelid weights are not confused with other similar implants such as eyelid springs or external eyelid weights.	The patient is a poor historian and incorrectly identifies their implant to the radiographer.
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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	Low	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.

<b>Proposed actions to control the problem</b> List the actions required. If action by others is required, you must send them a copy	<b>By Whom</b>	<b>Start date</b>	<b>Action due date</b>

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

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

**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

**Date of next review**

As per Qpulse record