MEDICAL RECORD - SUPPLEMENTAL MEDICAL DATA

For use of this form, see requiring document. Form is not valid without Requiring Document, Issuance Date, Local Form Number, and Edition Date.

REQUIRING DOCUMENT *(Title and Number)*	ISSUANCE DATE
LOCAL FORM TITLE *(Optional)*	

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CONSENT FOR INTRAVENOUS MRI CONTRAST MEDIA

Your physician has requested that you have a Magnetic Resonance Imaging (MRI) Procedure to diagnose your medical condition. In certain cases an injection of Gadolinium, an MRI contrast media, is used to enhance the quality of your MRI images. Not administering Gadolinium may limit the ability of the radiologist and your physician to diagnose your condition. No gadolinium substitute exists at this time. Gadolinium contrast is usually given by intravenous injection. Gadolinium is generally well tolerated. However, injections carry a small risk of harm including allergic reaction, injury at the injection site, or infection. The reported frequency of adverse events after an injection of gadolinium based MRI contrast ranges from 0.07-2.4%. The majority of these reactions are mild; including coldness at the injection site, nausea, vomiting, dizziness and itching. Reactions resembling an "allergic" response are rare and vary in frequency from 0.004-0.07%. A rash or hives are the most frequent of this group and very rarely there may be bronchospasm. Severe, life threatening anaphylactic reactions are exceedingly rare (1-10/100,000). In an accumulated series of 687,000 doses there were only 5 severe reactions. In another survey based on 20 million administered doses there were 55 cases of anaphylactic shock. To date, only one published death has been clearly related to the administration of gadolinium-based contrast. The staff and physicians are trained to handle problems that may arise with the contrast injection. If you previously had an "allergic type" reaction to contrast material used in MRI (gadolinium), please notify the technologist so that they can plan your examination accordingly. People who have kidney disease and are given a gadolinium-based contrast agent, have a very small risk of developing a very rare disease called Nephrogenic Systemic Fibrosis (NSF). We screen all MRI patients with criteria recommended by the American College of Radiology (ACR). If you meet certain criteria you may need a blood test to determine your level of kidney function. To date, this disease has only been found in patients with kidney disease, and the vast majority, if not all, have severe kidney disease. NSF is often associated with thickening and tightening of the skin (usually involving the arms and/or legs but occasionally associated with the trunk: and scarring. The scarring may involve other parts of the body including the diaphragm, heart, lungs, and muscles. NSF continues to get worse and can even cause death. There is no known cure. There is always a small risk that a particular patient will develop NSF.

I have read and understand the information stated above. I have been informed that allergic reactions to MRI contrast media can happen on rare occasions. I am authorizing the physicians and other medical personnel of your MRI facility to treat me in the event of an allergic reaction. I understand that this treatment may include medications or medical devices and consent to the administration of IV contrast media, if medically indicated or as prescribed by my referring physician.

Signature_____ Date_____

Legal Guardian_____ Date _____

Witness _____ Date _____

PRACTITIONER'S NAME	PRACTITIONER'S SIGNATURE	DATE
PATIENT'S IDENTIFICATION: *(For typed or written entries, give: Name - last, first, middle; SSN; Sex; Date of Birth; Rank/Grade.)*	HOSPITAL OR MEDICAL FACILITY	STATUS
	DEPARTMENT / SERVICE	RECORDS MAINTAINED AT
	SPONSOR'S NAME	SSN
	RELATIONSHIP TO SPONSOR	

Category _____