**Proposal to use the MRRC Resources:**

All investigators submitting new IRB protocols or modifications that make use of the MRRC resources must upload this 1-page form to the IRES-IRB.

**Proposal to renew access to MRRC Resources:**

For annual IRB renewals, it is not necessary to resubmit your protocol to the MRRC Protocol

Review Committee if we have already approved it and your protocol meets the following requirements: (1) new or different intravenous infusions of any kind will not be used, (2) new or different medications will not be administered, (3) the subject population will not change and (4) the MR sequences will not change. If your protocol does not meet these requirements, you must submit all IRB protocol documents with amendments to the MRRC Protocol Review Committee.

**Synopsis:** Summary of Project. Include age range of subjects, number of subjects and duration of total project (not duration of a single experiment).

**Equipment:** Specify which scanner will be used. Human Systems: 4T or 3T. Animal Systems: 9.4T or 11.74T. If using the 4T human systems, provide name of the MR scientist who has evaluated the MR sequences to ensure your protocol will be in compliance with specific absorption rate (SAR) guidelines.

**Funding Source:** NIH, private foundation, or Industry sponsored work.

**Personnel:** Individuals who will be involved in the project (all individuals named on IRB application). **List PI first. List in bold font the individuals who will come to the MRRC magnet area and who are required to complete safety training.**

**Invasive Procedures:** List any invasive procedures planned, including injections and blood draws.

**Medications and Drugs:** List any medications or drugs administered before, during or after the MR study.

**Sedation and Anesthesia:** Describe in detail if conscious sedation or anesthesia is used during the MR study

**Name and Signature of Person Responsible for Providing Medical Coverage Appropriate for IRB Risk Level.** IRB Risk Level will be assigned by the MRRC Protocol Review Committee (see Table 1 below and MRRC Safety Policy Document on website). Coverage by a physician licensed in CT is required for anesthesia, conscious sedation, the administration of MR contrast agents, intra-arterial infusions, many intravenous injections, or infusions, and for any other procedures that might require physician coverage. The person responsible for providing medical supervision must provide the coverage requested by the MRRC Protocol Review Committee.

**Signature:**

**Certify that Personnel have had MRRC Safety Training:** All personnel should review and sign the MRRC User Imaging Policy and must complete all MR safety requirements.

**Check list of items to include in the Protocol and Consent Forms**

1. Consent and protocol should state that a member of the research team will accompany subject to the MRRC and will stay with subject for the duration of the MR study.

2. Consent and protocol should use the latest wording about MR risks, which can be found from the MRRC website (mrrc.yale.edu). Using this language will insure that you state subjects will walk through the ferromagnetic detector.

3. The protocol should have which MR coil will be used and should have detailed listing of the parameters for the MR sequences.

Table 1. Medical Supervision for Subjects

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| IRB Risk Class | Level of Supervision | | | |
|  | MR Operator, Research Staff | RN, PA, APRN | MD | EMS 911 |
| Level 1  Very Low Risk | On Site | \* |  | Available |
| Level 2  Low Risk | On Site | On Site BCLS | Pager | Available |
| Level 3 Moderate Risk | On Site | On Site BCLS | On Site BCLS | Available |
| Level 4  High Risk | On Site | On Site ACLS | On Site ACLS | Available |

\* Level 1 subjects younger than 5 years or adult subjects that require more monitoring will also be accompanied by a nurse or PA. Most Level 1 subjects will be monitored by the MR operator and research staff.