



Competency/Skills Self-Appraisal: MRI Tech

Name _____ Date _____

Please check the column that applies to your skill level:
 3= Very Competent > 1yr Exp. 2=Some Help needed <1 yr. Exp. 1=Need Direction <6 months Exp. 0=Never Done

| SKILLS | 3 | 2 | 1 | 0 | SKILLS | 3 | 2 | 1 | 0 |
|---|---|---|---|---|--|---|---|---|---|
| ▪ BCLS Expires: _____ | | | | | 5. ANGIO STUDIES: | | | | |
| ▪ ACLS Expires: _____ | | | | | ▪ Abdominal aorta | | | | |
| ▪ ARRT Expires: _____ | | | | | ▪ Abdomen | | | | |
| ▪ ARRT - MR Expires: _____ | | | | | ▪ Chest | | | | |
| ▪ Other Certification (specify): _____ | | | | | ▪ Circle of Willis | | | | |
| ▪ Computerized Charting System (specify) _____ | | | | | ▪ Head without contrast | | | | |
| ▪ Drug Administration System (specify) _____ | | | | | ▪ Lower extremities | | | | |
| 1. AGE SPECIFIC PRACTICE CRITERIA: | | | | | ▪ Neck | | | | |
| ▪ Newborn/Neonate (birth to 30 days) | | | | | ▪ Pelvis | | | | |
| ▪ Infant (30 days to 1 year) | | | | | ▪ Renal | | | | |
| ▪ Toddler (1 -3 years) | | | | | ▪ Subclavian | | | | |
| ▪ Preschooler (3-5 years) | | | | | 6. VENOGRAM STUDIES: | | | | |
| ▪ School Age Children (5-12 years) | | | | | ▪ Carotid/neck | | | | |
| ▪ Adolescent (12-18 years) | | | | | ▪ Renal | | | | |
| ▪ Young Adults (18-39 years) | | | | | ▪ Pelvis | | | | |
| ▪ Middle Adults (39-64 years) | | | | | ▪ Upper extremities | | | | |
| ▪ Geriatric (64 +) | | | | | ▪ Lower extremities | | | | |
| 2. EXPERIENCE WITH AGE GROUPS: | | | | | 7. MR STUDIES: | | | | |
| ▪ Able to adapt care to incorporate normal growth and development | | | | | ▪ Head/neck | | | | |
| ▪ Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level | | | | | ▪ Brain/head with contrast | | | | |
| ▪ Ensures safe environment reflecting specific needs of various age groups | | | | | ▪ Brain/head without contrast | | | | |
| 3. EXPERIENCE IN SETTINGS: | | | | | ▪ Internal auditory canal with contrast | | | | |
| ▪ Acute care hospital – adult | | | | | ▪ Internal auditory canal without contrast | | | | |
| ▪ Adult Outpatient | | | | | ▪ Mandible with contrast | | | | |
| ▪ ER/Trauma | | | | | ▪ Mandible without contrast | | | | |
| ▪ Pediatric acute care | | | | | ▪ Nasopharynx without contrast | | | | |
| ▪ Pediatric Outpatient | | | | | ▪ Orbits with contrast | | | | |
| 4. GENERAL SKILLS: | | | | | ▪ Orbits without contrast | | | | |
| ▪ Charting/Documentation/Consents/Care Plans | | | | | ▪ Pituitary with contrast | | | | |
| ▪ Confidentiality of Information/HIPAA | | | | | ▪ Pituitary without contrast | | | | |
| ▪ Ordering Supplies | | | | | ▪ Soft tissue neck with contrast | | | | |
| ▪ Universal Precautions/Infection Control Procedures | | | | | ▪ Soft tissue neck without contrast | | | | |
| ▪ Advance Directives | | | | | ▪ Sinuses with contrast | | | | |
| ▪ JCAHO – National Patient Safety Guidelines | | | | | ▪ Sinuses without contrast | | | | |
| ▪ Vital Signs | | | | | ▪ TMJ with contrast | | | | |
| ▪ Use of transfer/lift devices | | | | | ▪ TMJ without contrast | | | | |
| ▪ Pain management pre and post procedure | | | | | 8. ABDOMEN/PELVIS: | | | | |
| ▪ Patient/Caregiver Education | | | | | ▪ Abdomen with contrast | | | | |

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|-------------------------------------|---|---|---|---|--|---|---|---|---|
| 8. ABDOMEN/PELVIS CONTINUED: | | | | | ▪ Wrist without contrast | | | | |
| ▪ Abdomen without contrast | | | | | ▪ Hand/finger with contrast | | | | |
| ▪ Adrenal with contrast | | | | | ▪ Hand/finger without contrast | | | | |
| ▪ Adrenals without contrast | | | | | 12. LOWER EXTREMITIES: | | | | |
| ▪ Buttock with contrast | | | | | ▪ Hip with contrast | | | | |
| ▪ Buttocks without contrast | | | | | ▪ Hip without contrast | | | | |
| ▪ Cholangiogram | | | | | ▪ Knee without contrast | | | | |
| ▪ Pelvis with contrast | | | | | ▪ Ankle with contrast | | | | |
| ▪ Pelvis without contrast | | | | | ▪ Ankle without contrast | | | | |
| ▪ Prostate with contrast | | | | | ▪ Foot with contrast | | | | |
| ▪ Prostate without contrast | | | | | ▪ Foot without contrast | | | | |
| ▪ Renal with contrast | | | | | 13. MRI SCAN TYPES: | | | | |
| ▪ Renal without contrast | | | | | ▪ Gradient Echo Imaging | | | | |
| ▪ Scrotum with contrast | | | | | ▪ Multiplanar Reconstruction/MRA | | | | |
| ▪ Scrotum without contrast | | | | | ▪ Spin Echo Images | | | | |
| 9. CHEST: | | | | | Surface Coils | | | | |
| ▪ Brachial plexus | | | | | ▪ Extremity | | | | |
| ▪ Breast with contrast | | | | | ▪ Head | | | | |
| ▪ Breast without contrast | | | | | ▪ Neurovascular | | | | |
| ▪ Chest with contrast | | | | | ▪ Shoulder | | | | |
| ▪ Chest without contrast | | | | | ▪ Spine/Phase array | | | | |
| ▪ Myocardium with contrast | | | | | ▪ Torso | | | | |
| ▪ Myocardium without contrast | | | | | ▪ T-1 Weighted Images | | | | |
| ▪ Sternum with contrast | | | | | ▪ T-2 Weighted Images | | | | |
| ▪ Sternum without contrast | | | | | ▪ Inversion Recovery Images | | | | |
| 10. SPINE: | | | | | ▪ Fat Suppression Images | | | | |
| ▪ Cervical spine with contrast | | | | | 14. OTHER: | | | | |
| ▪ Cervical spine without contrast | | | | | ▪ Venipuncture | | | | |
| ▪ Thraic spine with contrast | | | | | ▪ Contrast administration | | | | |
| ▪ Thoracic spine without contrast | | | | | ▪ Scanning patient with conscious sedation | | | | |
| ▪ Lumbar spine with contrast | | | | | ▪ Scanning patient with anesthesia | | | | |
| ▪ Lumbar spine without contrast | | | | | | | | | |
| ▪ Sacrum with contrast | | | | | | | | | |
| ▪ Sacrum without contrast | | | | | | | | | |
| 11. UPPER EXTREMITIES: | | | | | | | | | |
| ▪ Scapula with contrast | | | | | | | | | |
| ▪ Scapula without contrast | | | | | | | | | |
| ▪ Shoulder with contrast | | | | | | | | | |
| ▪ Shoulder without contrast | | | | | | | | | |
| ▪ Arthrogram with contrast | | | | | | | | | |
| ▪ Arthrogram without contrast | | | | | | | | | |
| ▪ Elbow with contrast | | | | | | | | | |
| ▪ Elbow without contrast | | | | | | | | | |
| ▪ Wrist with contrast | | | | | | | | | |