

Name of Policy: Protocols for MRI

Scope: South Georgia Radiology Associates, LLC

Responsible Agent: Heidi Nichols RRA

Approving Officer: Gary Dent MD



Effective Date: 1-11-2025

Initial Effective Date: 10-01-2018

<input type="checkbox"/> New Policy Proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy

A. **Policy Statement:** Policy for the usage and application of protocols approved by South Georgia Radiology Associates (SGRA).

B. **Purpose:** To establish a process for appropriateness and necessity of ordered MRI procedures.

C. **Scope:** This policy applies to all radiology personnel at each facility serviced by the medical staff of South Georgia Radiology Associates, LLC.

D. **Procedure:**

- * Read over and confirm doctor's order.
- * Review any x-ray/related exam reports Ex: chest x-ray for pulmonary nodule, etc.
- * Push prior relevant studies. Any exams that are 2 years old or older may have to be reloaded into SGRA and pushed with your current study.
- * Do not assume printed requisition is correct.
- * Please call SGRA for guidance from radiologists regarding any question you may have about any exam or protocol that may not be listed in this document.
- * If your facility doesn't have the capability to perform a given exam, let SGRA staff know and a radiologist will advise on alternate sequences/protocol.

Approved by:

DocuSigned by:

Gary H. Dent

AA1014A2F2C04AD...

Date: 1/12/2025

Gary Dent MD
President

Review/ Revisions completed by: Heidi Nichols RRA, RTR,
CT.

Review/ Revision Date:

- 10-01-2018
- 02-06-2018
- 01-23-2019
- 04-01-2020
- 03-31-2022
- 01-04-2023
- 01-12-2024
- 01-11-2025