Incidental Findings Policy

First Issued: December 2017
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Last Review: December 2017

PURPOSE

The purpose of this policy is to define procedures for handling any potential incidental findings detected on MR images acquired at the MRIRC.

PROCEDURES

At this time, the MRIRC does not have the resources necessary to provide a diagnostic reading of every MRI exam performed in the facility. Thus, the following procedures are implemented:

Research study scans

For images obtained as part of a research study, the procedures outlined in the study protocol will be followed. Non-clinical study protocols will be reviewed by the MRIRC Technical Director to verify that they contain language covering risks of MRI exams and handling of incidental findings. Clinical study protocols, defined as the studies where data becomes part of the subject's medical record, will not be evaluated by the MRIRC.

MRIRC personnel may or may not alert the study PI of findings that they deem suspicious, but they are not qualified to diagnose or evaluate any finding or exam. Thus the responsibility for evaluating acquired images lies with the study PI, as defined by the study protocol.

The MRIRC will provide study data (MR images) to the PI or other study personnel. No images will be shared with the subject.

Internal QC scans

For images obtained as part of an internal QC scan, the procedures outlined in the MRIRC QC Waiver Form will be followed.

MRIRC personnel may or may not request that one of Radiology clinicians (e.g., the neuro or body radiologist on call) provide a diagnostic reading of available images. In this case, the radiologist will evaluate the exam for any incidental findings, and if detected, identify potential
follow up procedures and provide guidance on their necessity or urgency to the volunteer. However, the QC scans are not acquired for diagnostic purposes, and the MRIRC personnel are not qualified to diagnose or evaluate any finding or exam and will not be doing so.

The MR images acquired as part of internal QC scans are not intended to diagnose any disease or condition, will never become a part of the volunteer’s medical record, and will not be shared with the volunteer.

INTERPRETATION, IMPLEMENTATION, AND REVISION

The MRIRC Incidental Findings Policy is reviewed at least every three years by the MRIRC Director and the Operations Committee.

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Incidental Findings Report Form

One copy to be kept on record with MRIRC.

Study: ____________________________

Study Subject ID: __________________

Reported Finding: _______________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Sequences: ________________________________________________________________

____________________________________________________________________________

Communicated to: ___________________________________________________________

____________________________________________________________________________

Name: ____________________________ Date: ______________________

Signature: ________________________