MED Academy

Program in Magnetic Resonance Imaging

MRI Procedure Log

Student Name: ______________________________ Clinical Site: ________________________

<u>O</u> – Observed **<u>DS</u> – Direct Supervised** **<u>IS</u> – Indirect Supervised**

Procedure Performed	Magnet Type	Date	Starting Time	Ending Time	O	DS	IS
Brain – IAC	1.5 GE	01/01/2010	9:00 AM	9:45 AM	X		

Procedure Performed	Magnet Type	Date	Starting Time	Ending Time	O	DS	IS