

**TAB 5**

**Annual Physics Survey/Performance Evaluation Checklist**

Make additional copies of the pages as needed. Please complete the date of the most recent and the prior Annual Physics Survey/Performance Evaluation. Leave it blank if that modality is not ACR accredited.

**MR Unit #:** \_\_\_\_\_

<input type="checkbox"/>	Date of Most Recent:		<input type="checkbox"/> Corrective Action Needed
<input type="checkbox"/>	Date of Prior <i>(if applicable)</i> :		<input type="checkbox"/> Corrective Action Needed

**Annual Medical Physicist Survey/Technologist's QC**

The following is a list of QC tests that must be included in the Annual Medical Physicist Survey and technologist's QC:

<b>Medical Physicist's/MR Scientist's Annual QC Tests</b>	
<ul style="list-style-type: none"> <li>• Magnetic Field Homogeneity</li> <li>• Slice Position Accuracy</li> <li>• Slice Thickness Accuracy</li> <li>• Radiofrequency Coil Checks</li> <li>• Soft-Copy Displays (Monitors)</li> <li>• Review of Technologist Weekly QC</li> </ul>	
<b><i>The following will be required on Medical Physicist/MR Scientist's annual QC tests performed after July 1, 2016.</i></b>	
<ul style="list-style-type: none"> <li>• Setup and Table Position Accuracy</li> <li>• Center Frequency</li> <li>• Transmitter Gain or Attenuation</li> <li>• Geometric Accuracy Measurements</li> <li>• High-Contrast Spatial Resolution</li> </ul>	<ul style="list-style-type: none"> <li>• Low-contrast Detectability</li> <li>• Artifact Evaluation</li> <li>• Film Printer Quality Control (if applicable)</li> <li>• Visual Checklist</li> <li>• <b>MR Safety Program Assessment</b></li> </ul>