 *Research Development and Administration*

#####  Advanced Imaging Research Center

 *3181 SW Sam Jackson Park Road*

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####

**AIRC Human Subject MRI Study/Procedure Application**

*Please email this form to Dr. Wei Huang (huangwe@ohsu.edu) for approval by the* AIRC Human Subject MRI Study Review Committee

*For funded study, the committee review focuses on safety issues and technical feasibility.*

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| --- | --- |
| Date:      |  |
| Study Title:      |  |
| Principal Investigator:       | Address (Mailstop):       |
| Affiliation (Dept/Div):       | Email:       |
| Other investigators and roles in study:       |  |
| Group members who are or will be trained by AIRC to operate the MRI instrument:       |
| Administrative contact phone number:      and email:     Investigator initiated or industry sponsored?      IRB Status       | IRB Protocol #:        |
| Last approval date or pending:      IRB approval memo, protocol, and consent form need to be on file in AIRC before starting the MRI study.  |  |
| Estimated number of scan sessions per year:     Expected MRI instrument time per scan session:      Subject age range:     Describe subject health condition and concerns related to MRI procedures:      |
| **MR Study Design:** |
| MRI instrument to be used:  |
| RF Coil:       |
| **Project summary (350 words maximum).** Brief description of the project background, aims (hypotheses), study design, and expected results:       |
| Main Pulse Sequences and associated data acquisition parameters:      |
| Detailed experimental set-up (including fMRI accessories, contrast injection rate and dose, anesthesia, physiological monitoring, etc.)       |
| **AIRC Resources to be used:**Personnel: [ ] Certified MR Technologist (Bill Woodward: Wednesday and Thursday only; must check for studies with contrast injection)[ ] MR Operator[ ] Research Assistant(s):            Equipment (other than the MRI scanner and RF coil):[ ] Power injector[ ] InVivo Precess physiological monitor[ ] Audio and/or visual stimulus presentation equipment[ ] Mock Scanner[ ] Data processing (contact Brendan Moloney)[ ] Non-standard pulse sequence[ ] Eye Tracker[ ] Other equipment:      Space for Special Procedures[ ] Subject Preparation Room[ ] Mock Scanner Room**Description of Special Procedures:****Current Funding Source:** Alias:      Grant or account #:       Grant start / end dates:      **Relevant MR Literature Citations (please provide all authors and complete title):**       |