

EMPLOYER Kaiser Permanente		
I.D. NO 1654644	OPT. NO./FY 027-23	BOI INVOLVED: Y or N

NOTE: *Fill out if Inspection is being appealed:*

Dated Received Intention to Appeal _____

Date Received Docketed Copies _____

Date Forwarded for Legal Assistance _____

Date Legal Assistance was Approved _____

Notice Status Conference By Phone

NOTE: Fill out Hearing/Status Conf./Hearing dates below as they are received ...

[illegible]

Inspection Report

August 7, 2023 4:13 PM

RID	CSHO ID	Supervisor ID	Inspection Number	Optional Report Number	Case Closed Date
0950613	C8043	X0360	1654644	027-23	

Establishment Name		Kaiser Permanente		Doing Business As (DBA)		Kaiser Permanente Redwood City	
Ownership Type	Private Sector	Type of Business/ Agency Code	Corporation	Primary NAICS		622110 - General Medical and Surgical Hospitals	
Site Address	1100 Veterans Blvd. Redwood City, CA 94063	Site Phone	(650) 269-8648	Extn		Site FAX	
Business Address	1100 Veterans Boulevard Redwood City, CA 94063	Business Phone	(650) 299-2360	Business FAX			
Mailing Address	1100 Veterans Boulevard Redwood City, CA 94063	E-mail					
Site Activity		Site NAICS	622110			Days on Site	2
Federal EIN		DUNS		Temporary or Fixed Site?		N	
State Estab Id		DUNS plus4		CAGE Code			
Construction Type							

Parent Company Legal Name			Parent Company Trade Name/DBA		
Parent Company Address		Phone Number		Extn	
TIN / EIN			DUNS		
CAGE Code			DUNS plus4		

Entry	03/06/2023		First Closing Conference	08/04/2023	
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Opening Conference	03/06/2023		Second Closing Conference		
Walkaround	03/06/2023		Exit	03/06/2023	

Inspection Initiating Type	Accident	Secondary Type	
Other Initiating Type		Inspection Category	Safety
Scope of Inspection	Partial	Reason No Inspection	
Migrant Farm Worker	N	Expln. for No Insp.	
State Strategic Initiatives			
National Emphasis			
State/Local Emphasis			
Primary Emphasis			

Additional Codes			
Type	ID	Value	Description
S	14	Sedgewick	

Employed in Establishment	101	Walkaround?	Y	Advance Notice?	N
Covered By Inspection	3	Interviewed?	Y	Flag for Follow-up	N
Controlled By Employer	101	Union?	Y	Reason for Follow-up	
Is this Company a current federal contractor?		N			

Related UPA		
Activity Number	Activity Type	Establishment Name
2005959	FAT/CAT	Kaiser Permanente

Related Inspections		
Inspection Number	Related Inspection Type	Establishment Name

SVEP Information			
SVEP Case?	Post Citation SVEP Action	Post Citation SVEP Action Date	Is this inspection related to a previous SVEP inspection?
N			N
Is an Imminent Danger Notice included in this case?	Date Imminent Danger Notice was issued	Were Enhanced Settlement Provisions Used?	Did the company implement a SHMS program?
N			

Employer Representatives Contacted					
Name	Umer Murtaza	Job Title	Safety Director	Occupation	
Address	1100 Veterans Blvd. REDWOOD CITY, CA 94063			Interviewed?	Y
Home		Mobile	(650) 269-8648	Work	
Email				Participation	Credentials, Opening Conference, Closing Conference, Walk Around, Citation Mailed
Employer Representatives Contacted					
Name	Lola Barnes	Job Title	Director Nursing Clinical Practice	Occupation	
Address	1100 Veterans Blvd REDWOOD CITY, CA 94063			Interviewed?	Y
Home		Mobile		Work	(650) 722-4887
Email	lola.barnes@kp.org			Participation	Credentials, Opening Conference, Walk Around
Employer Representatives Contacted					
Name	Josephine Reyes	Job Title	Chief Nurse	Occupation	

Address	1100 Veterans Blvd				Interviewed?	Y
	REDWOOD CITY, CA 94063					
Home		Mobile		Work	(650) 763-7868	Extn
Email				Participation	Credentials, Opening Conference, Closing Conference, Walk Around	
Employer Representatives Contacted						
Name	John Fannin	Job Title	COO	Occupation		
Address	1100 Veterans Blvd				Interviewed?	Y
	REDWOOD CITY, CA 94063					
Home		Mobile		Work	(415) 328-9402	Extn
Email	john.x.fannin@kp.org			Participation	Credentials, Opening Conference, Closing Conference	
Employer Representatives Contacted						
Name	Maria Faulve-Montojo	Job Title	Area Quality Leader	Occupation		
Address	1100 Veterans Blvd				Interviewed?	Y
	REDWOOD CITY, CA 94063					
Home		Mobile	(650) 533-0467	Work	(650) 299-2425	Extn
Email	maria.i.faulve-montojo@kp.org			Participation	Credentials, Opening Conference, Walk Around	
Employer Representatives Contacted						
Name	Liz Legaspi	Job Title		Occupation	CNA Representative	
Address					Interviewed?	N
Home		Mobile		Work		Extn
Email				Participation		
Employer Representatives Contacted						

Name	Michele Grade	Job Title	Supervisor	Occupation	
Address	1100 Veterans Blvd REDWOOD CITY, CA 94063			Interviewed?	Y
Home		Mobile		Work	
Email	michele.a.grade@kp.org		Participation		
Employer Representatives Contacted					
Name	Shari Samuels	Job Title	Norther Director EH&S	Occupation	
Address				Interviewed?	N
Home		Mobile		Work	
Email	shari.a.samuels@kp.org		Participation Closing Conference		
Employer Representatives Contacted					
Name	Dorothy Totah	Job Title	Clinical Director Quality Services	Occupation	
Address	1100 Veterans Blvd REDWOOD CITY, CA 94063			Interviewed?	N
Home		Mobile		Work	(650) 207-8432
Email			Participation Closing Conference		
Employer Representatives Contacted					
Name	Jelissa Cummings	Job Title	Area Quality Leader	Occupation	
Address	4601 Dale Road MODESTO, CA 95356			Interviewed?	N
Home		Mobile		Work	(209) 617-6320
Email	jelissa.m.walker@kp.org		Participation Closing Conference		
Employees Contacted					
Name	Marilyn Jacinto	Job Title	Registered Nurse	Occupation	CNA Representative

Address				Interviewed?		N	
Home		Mobile		(650) 299-3100		Work	
Extn							
Email		marilyn.c.jacinto@kp.org		Participation		Credentials, Opening Conference	
Employees Contacted							
Name		Grace Malasan		Job Title		Registered Nurse	
Occupation							
Address		1100 Veterans Blvd		Interviewed?		N	
		REDWOOD CITY, CA 94063					
Home		Mobile		Work		Extn	
Email				Participation			
Employees Contacted							
Name		Erika Rodriguez		Job Title		Occupation	
						PCT	
Address				Interviewed?		Y	
Home		Mobile		Work		Extn	
Email				Participation			
Employees Contacted							
Name		Letichia Gomez		Job Title		Imaging Assistant	
Occupation							
Address				Interviewed?		Y	
Home		Mobile		Work		Extn	
Email				Participation			
Employees Contacted							
Name		William Shashte		Job Title		PCT	
Occupation							

Address					Interviewed?	Y
Home		Mobile		Work		Extn
Email					Participation	
Employees Contacted						
Name	Maria Kristine Aguilar Gozum	Job Title	Registered Nurse	Occupation		
Address					Interviewed?	N
Home		Mobile		Work		Extn
Email					Participation	
Employees Contacted						
Name	Agnes Rodil	Job Title		Occupation		
Address					Interviewed?	N
Home		Mobile		Work		Extn
Email					Participation	
Employees Contacted						
Name	Grace Lam	Job Title	MRI Lead	Occupation		
Address					Interviewed?	Y
Home		Mobile		Work		Extn
Email					Participation	
Employees Contacted						
Name	Ainah Cervantes	Job Title	Registered Nurse	Occupation		
Address					Interviewed?	Y

Home		Mobile		Work		Extn	
Email				Participation			
Union Information							
Union Name	SEIU UHW			Local			
Rep Name	Schanta Wilson	Job Title	Senior Medical Assistant	Occupation			
Address	1150 Veterans Blvd REDWOOD CITY, CA 94063				Interviewed?	Y	
Home		Mobile		Work		Extn	
Email	schanta.wilson@kp.org			Participation	Credentials, Opening Conference, Walk Around		
Union Information							
Union Name	CNA			Local			
Rep Name	Avery Fuerst	Job Title	CNA Labor Representative	Occupation			
Address	1871 The Alameda Suite 300 SAN JOSE, CA 95126				Interviewed?	Y	
Home		Mobile		Work		Extn	
Email	afuerst@calnurses.org			Participation			
Union Information							
Union Name	CNA			Local			
Rep Name	Shauna Braun	Job Title	Shop Steward	Occupation	Registered Nurse		
Address					Interviewed?	Y	
Home		Mobile		Work		Extn	
Email				Participation			
Union Information							
Union Name	SEIU UHW			Local			
Rep Name	Michael Taylor	Job Title	Tech Assistant - MRI	Occupation			
Address					Interviewed?	N	

Home		Mobile		Work		Extn	
Email	michael.a.taylor@kp.org			Participation			
Union Information							
Union Name	SEIU UHW			Local			
Rep Name	Ron Cook	Job Title	Transport - Shop Steward		Occupation		
Address						Interviewed?	Y
Home		Mobile		Work		Extn	
Email				Participation			

Denial of Entry			
Denial Date/Time	Stage	Reason	Re-entry Date/Time

CSHO Signature		Date	8/7/2023
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Inspection Report

STATE OF CALIFORNIA DEPARTMENT OF INDUSTRIAL RELATIONS DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

MOD Date		1. Reporting ID R D 9506 1 3		2. CSE/IH ID C8043		3. Report Number RPT FY 027 23		4. Inspection Number (Identifies this inspection) 1654644	
5. Related Activity/Activity Satisfied		5.1 Type Number A 2005969		Compl./Ref. Satisfied S H		5.2 Type Number		Compl./Ref. Satisfied S H	
7. Previous Activity		Has there been previous activity at this establishment?		Yes No		If Yes, enter		Type Number	
8. a. Change?		b. Establishment Name KAISER PERMANENTE REDWOOD CITY		9. Employer ID (State's option)					
10. a. Change?		b. Site Address (Street, City, State, ZIP) 1100 VETERANS BLVD., REDWOOD CITY, CA 94063		11. City Code 2980		12. County Code 081			
13. Mailing Address (if different) (Street, City, State, ZIP) 1100 VETERANS BLVD., REDWOOD CITY, CA 94063		14. Telephone Number		15. Name of Controlling Corporation, Partner, or Owner KAISER PERMANENTE		16. Telephone Number (Site) (650) 269-8648			
Ownership		17. a. ☒ Private Sector b. ☐ Local Government c. ☐ State Government d. ☐ Federal Agency/Code		18. Legal Entity a. ☐ Corporation b. ☐ Partnership c. ☐ Sole Owner					
Inspection Opening		19. Was Advance Notice Given? Yes No		20. Opening Conference Date MARCH 6, 2023					
Inspection Category		21. Mark "X" in one box ☒ Safety ☐ Health		22. Primary SIC 622110		23. Secondary SIC a. Guide b. Insp'd			
Inspection Type		24. Mark "X" in one box Unprogrammed a. ☒ Accident b. ☐ Complaint c. ☐ Referral d. ☐ Monitoring Programmed e. ☐ Variance f. ☐ Follow-up g. ☐ Unprogrammed Related h. ☐ Planned i. ☐ Programmed Related		25. Inspection Classification (Mark all that apply) a. Safety Planning Guide: ☐ Manufacturing ☐ Construction ☐ Maritime b. Health Planning Guide: ☐ Manufacturing ☐ Construction ☐ Maritime c. ☐ Local Emphasis Program (specify) ☐ Permit ☐ Sp. Study ☐ Tunnel ☐ Carcarg ☐ Region Pl. d. ☐ National Emphasis Program (specify) e. ☐ Migrant Farmworker Camp					
Employee Information		26. Number of Employees Employed in Establishment 101		27. Number of Employees Covered by Inspection 3		28. Number of Employees Controlled by Employer 101		29. a. ☒ Union b. ☐ Non-Union	
OSHA-200 Data		Copy below the OSHA-200 Log entries for the most current complete year.		30. a. ☐ Employee Exercised Walkaround Privilege? b. ☐ Employees Interviewed?		31. Year: 32. ☒ Data Not Available		33. LWD/F Plate	
Occupational Injury Cases		Occupational Illness Cases							
34. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)									
Scope of Inspection		35. Scope (Mark "X" in one box) a. ☐ Comprehensive b. ☐ Partial c. ☒ Records Only d. ☐ No Inspection		36. Number of Days Site Visited					
Warrant Information		37. Anticipatory Warrant/ Subpoena Served Yes		38. Date of Denial		39. Date Re-Entered		40. Date Re-Denied	
41. Date Re-Entered									
42. Optional Information									
Type	ID	Value	Number	Type	ID	Value			
S	1	Order Prohibiting Use							
S	2	Information Memo		S	14	SELF INSURED SEAGENICK			
S	3	Type of Inspection					43. Total Entries		
Closed Case		44. a. ☐ Close b. ☐ No Citations Issued		45. If no inspection conducted, mark "X" in one box a. ☐ Establishment Not Found b. ☐ Employer Out of Business c. ☐ Process to Be Inspected Not Active d. ☐ Ten or Fewer Employees e. ☐ Denied Entry f. ☐ SIC Not on Planning Guide g. ☐ Worksite Exempt through Voluntary Program h. ☐ Non-Exempt Consultation In Progress i. ☐ Other		46. Closing Conference Date (On Site)			
47. CSE/IH Signature [Signature]		Date 8/7/2023		48. Reviewer Signature [Signature]		Date 8/9/2023			

☒ COVID AP

22. Employees/Persons Interviewed During Inspection. (Enter Name, Home Address and Home Phone Number Below)

(A) Name: <u>SEE OIS</u>			(B) Name:		
Title:			Title:		
Address:			Address:		
City	State	Zip	City	State	Zip
Phone (Home)	Phone (Cell)		Phone (Home)	Phone (Cell)	
(C) Name:			(D) Name:		
Title:			Title:		
Address:			Address:		
City	State	Zip	City	State	Zip
Phone (Home)	Phone (Cell)		Phone (Home)	Phone (Cell)	

23. Multi-Employer Worksite: ☐ YES ☐ NO (If Yes, obtain the following information on each employer involved)

(A) Employer:			(B) Employer:		
Address:			Address:		
City	State	Zip	City	State	Zip
Phone (Bus)	Phone (Cell)		Phone (Bus)	Phone (Cell)	
Activities:			Activities:		
☐ Contract Governing Employer's Work at site? ☐ Awareness of Violation ☐ Violation Foreseeable to Employer ☐ Steps taken by Employer to protect Employees If yes, what specific steps? Employer Category (Check all that apply) ☐ Exposing ☐ Creating ☐ Controlling ☐ Correcting			☐ Contract Governing Employer's Work at site? ☐ Awareness of Violation ☐ Violation Foreseeable to Employer ☐ Steps taken by Employer to protect Employees If yes, what specific steps? Employer Category (Check all that apply) ☐ Exposing ☐ Creating ☐ Controlling ☐ Correcting		
(C) Employer:			(D) Employer:		
Address:			Address:		
City	State	Zip	City	State	Zip
Phone (Bus)	Phone (Cell)		Phone (Bus)	Phone (Cell)	
Activities:			Activities:		
☐ Contract Governing Employer's Work at site? ☐ Awareness of Violation ☐ Violation Foreseeable to Employer ☐ Steps taken by Employer to protect Employees If yes, what specific steps? Employer Category (Check all that apply) ☐ Exposing ☐ Creating ☐ Controlling ☐ Correcting			☐ Contract Governing Employer's Work at site? ☐ Awareness of Violation ☐ Violation Foreseeable to Employer ☐ Steps taken by Employer to protect Employees If yes, what specific steps? Employer Category (Check all that apply) ☐ Exposing ☐ Creating ☐ Controlling ☐ Correcting		

24. Opening and Closing Conference Summary and Additional Comments: ☐ Comprehensive ☒ Partial

OPENING CONFERENCE CONDUCTED WITH EMPLOYER.
WALK AROUND CONDUCTED WITH EMPLOYER. CLOSING CONFERENCE
CONDUCTED WITH EMPLOYER.

25. Previous Citation History: ☒ Yes ☐ No (If yes, include history in case file)

26. Publications Provided:

☐ Guide to Cal/OSHA ☐ Poster ☐ Heat Illness Prevention OTHER: a)

b) c) d) e)

27. If additional sheets are necessary, check this box: ☐

FIELD DOCUMENTATION WORKSHEET

Establishment Name:

KNSG2 PERMANENT

Page

1 of 4

3/6/2023

JOHN FANNIN

COO

415 328 9402

~~JOHN. E.~~

JOHN.X.FANNIN@KP.ORG

SCHANTA WILSON

SENIOR MEDICAL ASSISTANT

(650) 716 7016

SCHANTA.WILSON@KP.ORG

HO 1150 VETERANS

SEIU UHW

(UNITED HEALTHCARE WORKERS)

MARIA FAULVE-MONTJO

AREA QUALITY LEADER

GRACE

MARISAN

LIZ

LEBAGPI

CNA

(CALIFORNIA NURSING ASSOCIATION)

UMAR MURTAZA

UMAR.X.MURTAZA@KP.ORG

Signature:

[Signature]

Date:

3/6/2023

Region

1

District

3

Ident. No.

C8043

Opt. Rept. No.

027/23

Insp. No.

1654644

FIELD DOCUMENTATION WORKSHEET

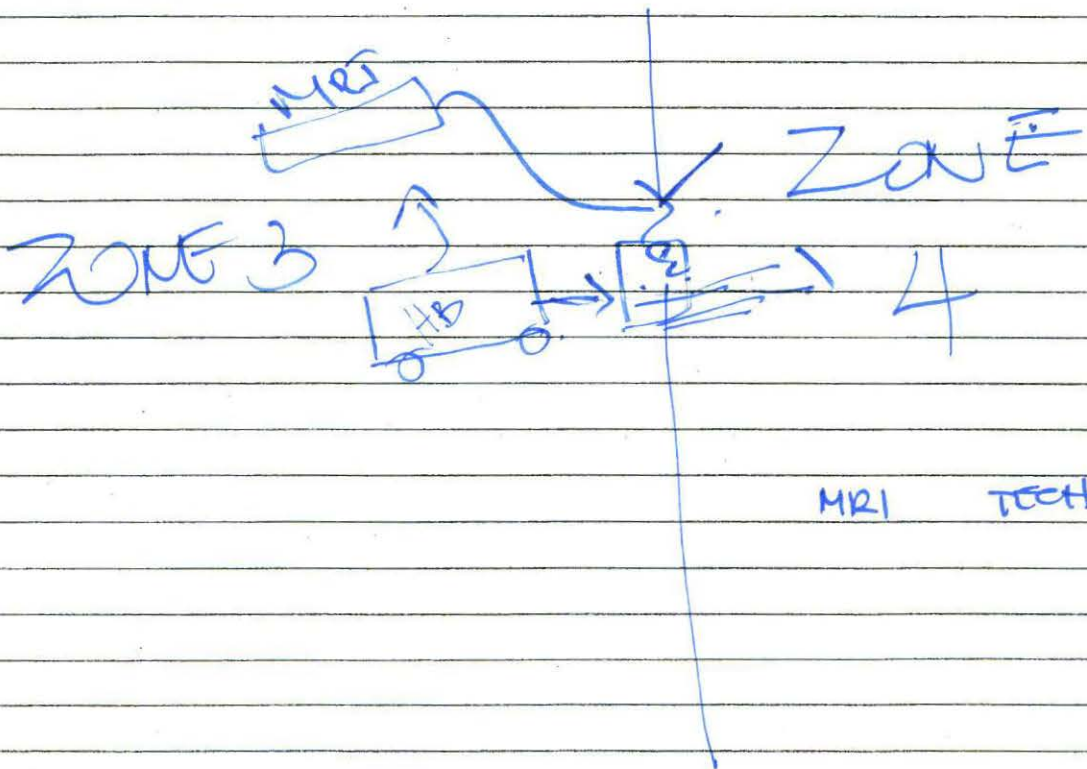
Establishment Name:

Kaiser Permanente

Page

2 of 4

BRUCE H. MALIKIAN (V) KP.org
RN



SITUATIONAL AWARENESS

Signature:

gabriel

Date:

2/6/23

Region

1

District

3

Ident. No.

C8043

Opt. Rept. No.

027.23

Insp. No.

1654644

FIELD DOCUMENTATION WORKSHEET

Establishment Name:

KAISER PERMANENTE

Page

3 of 4

LOLA BARNES

DIR NURSING CLINICAL PRACTICE

650 722-4887

LOLA.BARNES@KP.ORG

MARILYN JACINTO

CNA

RN

650 299 3100

MARILYN.C.JACINTO@KP.ORG

JOSEPHINE PETERS

CHIEF NURSE

JOSEPHINE.T.PETERS@KP.ORG

650 763-7868

MR1 UNIT

Signature:

quadrado

Date:

3/6/23

Region

1

District

3

Ident. No.

C8043

Opt. Rept. No.

007-23

Insp. No.

1654644

FIELD DOCUMENTATION WORKSHEET

Establishment Name:

KAISER PERMANENTE

Page

4 of 4

NURSE

PCT

ERIKA RODRIGUEZ

0700AM - 330PM

AINAH

- ICU

11PM - 0700AM

SUPERVISOR

TINA DE DIPIERRO

PATIENT TRANSFERRED FROM ICU - MRI

SUPERVISOR

MCHENE, A. GRADE @ KP. ORCA

Signature:

gubavara

Date:

3/6/23

Region

1

District

3

Ident. No.

C8043

Opt. Rept. No.

02722

Insp. No.

1054644

FIELD DOCUMENTATION WORKSHEET

Establishment Name: Kaiser Permanente Page 1 of 1

CSTO CONTRACTED UNION ON 3/23/2023
AND LMM @ XBISS

r / radiology
u / throw away 905530

Signature: <u>[Signature]</u>		Date: <u>3/23/23</u>		
Region <u>1</u>	District <u>3</u>	Ident. No. <u>C8043</u>	Opt. Rept. No. <u>027-23</u>	Insp. No. <u>1054644</u>

FIELD DOCUMENTATION WORKSHEET

Establishment Name:

Kaiser Permanente

Page

1 of 1

ERIKA RODRIGUEZ WAS INTERVIEWED BY THE
DIVISION ON WITH SHOP STEWARDS
PRESENT AT 1100 VERMONT BLVD. UFFENBERG
THE CSFO'S TYPEWRITER NOTES WERE LOST
ON THE CSFO'S LAPTOP.

ERIKA RODRIGUEZ STATED SHE ASSISTED
EE#1 IN TRANSPORTING THE PATIENT ON FEBRUARY 23, 2023.
EE#2 WAS PUSHING THE HOSPITAL BED INTO
ZONE 3, RATHER ASSISTING IN THE MANEUVERING
THE HOSPITAL BED INTO ZONE 3. THE HOSPITAL
BED HAD MOTORIZED CONTROLS. EE#2 STATED
EE#1 WALKED BACKWARDS AT THE HEAD OF
THE BED TO THE OPEN DOOR OF ZONE 4
AS PER THE MRI TECH'S INSTRUCTIONS AND
DID NOT STOP GOING BACKWARDS. EE#2
STATED EE#1 MOVED CONTINUED MOVING
UP TO THE MRI MACHINE. EE#2 THERE
WAS NO OBSTRUCTION / BARRIER BETWEEN EE#1
AND THE MRI MACHINE.

Signature:

[Handwritten Signature]

Date:

2/14/2023

Region

1

District

3

Ident. No.

C8043

Opt. Rept. No.

027.23

Insp. No.

1654644

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Tel. # (650) 573-3812 Fax # (650) 573-3817



NOTICE OF INTENT TO CLASSIFY CITATION AS SERIOUS

Via personal delivery, first class mail with proof of service, or fax

July 17, 2023

Kaiser Permanente
1100 Veterans Boulevard
Redwood City, CA 94063

Dear Employer:

An inspection was opened by Geraldine Tolentino at a place of employment located at 1100 Veterans Blvd., Redwood City, CA 94063 on 03/06/2023. The purpose of this form is to inform you that pursuant to Labor Code Section 6432, the Division intends to cite as "serious" the following alleged violation:

Prior to and during the course of the inspection, including but not limited to on February 23, 2023, the Employer failed to implement an effective Injury and Illness Prevention Program in the following instance:

- The Employer failed to identify, evaluate, and correct the hazard of not ensuring that the door to the MRI room (Zone IV) in the MRI suite was closed at all times as specified in the Employer's MRI Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6).

As a result, an employee was seriously injured when a hospital bed was pulled by the magnetic force of the MRI machine and pinned the employee between the bed and the machine.

This alleged violation may be cited as a violation of one or more of the following regulations of Title 8 of the California Code of Regulations, or any other applicable regulation:

Title 8 CCR Section §3203(a)(6). Injury and Illness Prevention Program.

The Division may also classify the violation as "willful serious" or "repeat serious".

You are encouraged to provide, in writing, any statements and supporting evidence showing that the Division should not classify the citation as "serious". Factors the Division may consider include the following:

1. Training for employees and supervisors relevant to preventing employee exposure to the hazard or to similar hazards
2. Procedures for discovering, controlling access to and correcting the hazard or similar hazards
3. Supervision of employees exposed or potentially exposed to the hazard
4. Procedures for communicating to employees about your health and safety rules and programs
5. Any additional information that you wish to provide such as:
 - a. An explanation of the circumstances surrounding the alleged violative events
 - b. Why you believe a serious violation does not exist
 - c. Why you believe your actions related to the alleged violative events were reasonable and responsible

Use "Employer's Signed Response to Notice of Intent to Classify Citation As Serious" form (attached). Additional statements and supporting evidence can be attached to the form. Use a separate form to respond to each "Notice of Intent to Classify Citation As Serious" received from the Division.

Please return the form, along with your additional statements and supporting evidence. Also, attach a copy of this notice. Information received by August 1, 2023 will be considered before the Division issues the citation. Information received after this date may not be considered before the Division issues the citation. If no information is received at all, the citation may still be issued.

If you have any questions, please contact me at the phone number or address in the letterhead.

Sincerely,



Barbara Kim
District Manager

0950613
RID

C8043
CSHO ID

027-23
Optional Report Nr.

1654644
Inspection Nr.

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Tel. # (650) 573-3812 Fax # (650) 573-3817

**Employer's Signed Response to Notice of Intent to Classify Citation As Serious**

(Please attach additional information and evidence as necessary to support your response and
a copy of the Division's "Notice of Intent to Classify Citation As Serious")

I have reviewed the forgoing statement and declare that it is true and correct to the best of my knowledge and that all submitted information, including supporting evidence, is accurate. I understand that pursuant to Labor Code section 6432, this statement and any additional statements and supporting evidence submitted by me can be used by the Division in support of any citation issued.

Employer: _____

Signature: _____ Date: _____

Name: _____ Title: _____

OFFICE USE ONLY

The above statement and attached document has been received and considered prior to issuance or non-issuance of proposed serious citation.

Compliance Safety and Health Officer: _____ Date: _____

District Manager: _____ Date: _____

Comments:

Please return form to address on the letterhead.

0950613
RID

C8043
CSHO ID

027-23
Optional Report Nr.

1654644
Inspection Nr.

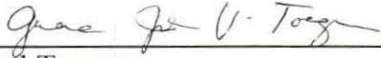
DECLARATION OF SERVICE BY MAIL

I, the undersigned, declare as follows:

I am a citizen of the United States, over the age of 18 years and not a party to the within action; my place of employment and business address is 1065 E. Hillsdale Boulevard, Suite 110, Foster City, California 94404.

On July 17, 2023, I served the attached **NOTICE OF INTENT TO CLASSIFY CITATION AS SERIOUS** dated July 17, 2023, by placing a true copy thereof in an envelope addressed to the person named below at the address set out immediately below each respective name, and by sealing and depositing said envelope in the United States Mail at Foster City, California, with postage thereon fully prepaid on the same day. There is delivery by United States Mail at each of the places so addressed, or there is regular communication by mail between the place of mailing and each of the places so addressed.

I declare under penalty of perjury that the foregoing is true and correct and that it was executed on 7/17/2023 at Foster City, California.



G. Jose Tongson
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404

**Kaiser Permanente
1100 Veterans Boulevard
Redwood City, CA 94063**



CITATION AND NOTIFICATION OF PENALTY

To:
Kaiser Foundation Hospitals Redwood City
Medical Center
and its successors
1100 Veterans Boulevard
Redwood City, CA 94063

Inspection #: 1654644
Inspection Date (s): 03/06/2023 - 08/04/2023
Issuance Date: 08/08/2023
CSHO ID: C8043
Optional Report #: 027-23
Reporting ID: 0950613

Inspection Site:
1100 Veterans Blvd.
Redwood City, CA 94063

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.

This Citation and Notification of Penalty (hereinafter Citation) is being issued in accordance with California Labor Code Section 6317 for violations that were found during the inspection/investigation. **This Citation or a copy must be prominently posted upon receipt by the employer at or near the location of each violation until the violative condition is corrected or for three working days, whichever is longer.** Violations of Title 8 of the California Code of Regulations or of the California Labor Code may result in some instances in prosecution for a misdemeanor.

YOU HAVE A RIGHT to contest this Citation and Notification of Penalty by filing an appeal with the Occupational Safety and Health Appeals Board. To initiate your appeal, you **must** contact the Appeals Board, in writing or by telephone, or online, within 15 working days from the date of receipt of this Citation. If you miss the 15 working day deadline to appeal, the Citation and Notification of Penalty becomes a final order of the Appeals Board, not subject to review by any court or agency.

Informal Conference - You may request an informal conference with the manager of the district office which issued the Citation within 10 working days after receipt of the Citation. However, if the citation is appealed, you may request an informal conference at any time prior to the day of the hearing. Employers are encouraged to schedule a conference at the earliest possible time to assure an expeditious resolution of any issues. At the informal conference, you may discuss the existence of the alleged violation(s), classification of the violation(s), abatement date or proposed penalty.

Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

The Occupational Safety and Health Appeals Board (Appeals Board) consists of three members appointed by the Governor. The Appeals Board is a separate entity from the Division of Occupational Safety and Health (Cal/OSHA or the Division) and employs experienced administrative law judges to hear appeals fairly and impartially. To initiate an appeal from a Citation and Notification of Penalty, you must contact the Appeals Board in writing, or by telephone, or online via the Board's OASIS system, within 15 working days from the date of receipt of a Citation.

After you have initiated your appeal, you must then file a completed appeal form with the Appeals Board, at the address listed below, or online via the Board's OASIS system, for each contested Citation. Failure to file a completed appeal form with the Appeals Board may result in dismissal of the appeal. Appeal forms are available to print online at: <https://www.dir.ca.gov/oshab/appealform.pdf>. You may also file the appeal through the Board's online OASIS system at: <https://www.dir.ca.gov/oshab/>. Hard copies can also be picked up from district offices of the Division, or from the Appeals Board:

Occupational Safety and Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
Telephone: (916) 274-5751 or (877) 252-1987
Fax: (916) 274-5785

If the Citation you are appealing alleges more than one item, you must specify on the appeal form which items you are appealing. The appeal form also asks you to identify the grounds for your appeal. Among the specific grounds for an appeal are the following: the safety order was not violated, the classification of the alleged violation (e.g., serious, repeat, willful) is incorrect, the abatement requirements are unreasonable or the proposed penalty is unreasonable.

Important: You must notify the Appeals Board, not the Division, of your intent to appeal within 15 working days from the date of receipt of the Citation. Otherwise, the Citation and Notification of Penalty becomes a final order of the Appeals Board not subject to review by any court or agency. An informal conference with Cal/OSHA or the Division **does not** constitute an appeal and **does not** stay the 15 working day appeal period. If you have any questions concerning your appeal rights, call the Appeals Board, at (916) 274-5751 or (877) 252-1987.

PENALTY PAYMENT OPTIONS

Penalties are due within 15 working days of receipt of this Citation and Notification of Penalty unless contested. If you are appealing any item of the Citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form for payment.

If you are paying electronically, please have the Penalty Remittance Form on-hand when you are ready to make your payment. The company name, inspection number, and Citation number(s) will be required in order to ensure that the payment is accurately posted to your account. Please go to: **www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html** to access the secure payment processing site. **Additionally, you must also mail the Penalty Remittance Form to the address below.**

If you are paying by check, return one copy of the Citation, along with the Notice of Proposed Penalties Sheet and the Penalty Remittance Form and mail to:

Department of Industrial Relations
Cal/OSHA Penalties
P. O. Box 516547
Los Angeles, CA 90051-0595

Cal/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

NOTIFICATION OF CORRECTIVE ACTION

For violations which you do not contest, you should notify the Division of Occupational Safety and Health promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation and Notification of Penalty. Please inform the district office listed on the Citation by submitting the Cal/OSHA 160 form with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for general violations has already been reduced by 50% on the presumption that the employer will correct the violations by the abatement date. The adjusted penalty for serious violations, if any, has already been reduced by 50% because abatement of those violations has been completed.

Note: Return the Cal/OSHA 160 form to the district office listed on the Citation and as shown below:

Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Telephone: (650) 573-3812
Fax: (650) 573-3817

EMPLOYEE RIGHTS

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under Labor Code Section 6310 or 6311. An employee who believes that he/she has been discriminated against may file a complaint no later than six (6) months after the discrimination occurred with the Division of Labor Standards Enforcement.

Employee Appeals - An employee or authorized employee's representative may, within 15 working days of the issuance of a citation, special order, or order to take special action, appeal to the Occupational Safety and Health Appeals Board the reasonableness of the period of time fixed by the Division of Occupational Safety and Health (Division) for abatement. An employee appeal may be filed with the Appeals Board or with the Division. No particular format is necessary to initiate the appeal, but the notice of appeal must be in writing.

If an Employee Appeal is filed with the Division, the Division shall note on the face of the document the date of receipt, include any envelope or other proof of the date of mailing, and promptly transmit the document to the Appeals Board. The Division shall, no later than 10 working days from receipt of the Employee Appeal, file with the Appeals Board and serve on each party a clear and concise statement of the reasons why the abatement period prescribed by it is reasonable.

Employee Appeal Forms are available from the Appeals Board, or from a district office of the Division.

Employees Participation in Informal Conference - Affected employees or their representatives may notify the District Manager that they wish to attend the informal conference. If the employer objects, a separate informal conference will be held.

DISABILITY ACCOMMODATION

Disability accommodation is available upon request. Any person with a disability requiring an accommodation, auxiliary aid or service, or a modification of policies or procedures to ensure effective communication and access to the programs of the Division of Occupational Safety and Health, should contact the Disability Accommodation Coordinator at the local district office or the Statewide Disability Accommodation Coordinator at 1-866-326-1616 (toll free). The Statewide Coordinator can also be reached through the California Relay Service, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY - Spanish).

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Phone: (650) 573-3812 Fax: (650) 573-3817

Inspection #: 1654644
Inspection Dates: 03/06/2023 - 08/04/2023
Issuance Date: 08/08/2023
CSHO ID: C8043
Optional Report #: 027-23



Citation and Notification of Penalty

Company Name: Kaiser Foundation Hospitals Redwood City Medical Center
Establishment DBA:

and its successors

Inspection Site: 1100 Veterans Blvd.
Redwood City, CA 94063

Citation 1 Item 1 Type of Violation: **Serious Accident Related**

Title 8 CCR Section §3203(a). Injury and Illness Prevention Program.

(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

(4) Include procedures for identifying and evaluating work place hazards including scheduled periodic inspections to identify unsafe conditions and work practices. Inspections shall be made to identify and evaluate hazards:

- (A) When the Program is first established;**
- (B) Whenever new substances, processes, procedures, or equipment are introduced to the workplace that represent a new occupational safety and health hazard; and**
- (C) Whenever the employer is made aware of a new or previously unrecognized hazard.**

(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:

- (A) When observed or discovered; and,**
- (B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.**

Prior to and during the course of the inspection, including but not limited to on February 23, 2023, the Employer failed to implement an effective Injury and Illness Prevention Program in the following instance:

- The Employer failed to identify, evaluate, and correct the hazard of not ensuring that the door to the MRI room (Zone IV) in the MRI suite was closed at all times as specified in the Employer's MRI

Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6).

As a result, an employee was seriously injured when a hospital bed was pulled by the magnetic force of the MRI machine and pinned the employee between the bed and the machine.

Date By Which Violation Must be Abated:

Corrected During Inspection

Proposed Penalty:

\$18000.00


Barbara Kim
Compliance Officer / District Manager

State of California
Department of Industrial Relations
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Phone: (650) 573-3812 Fax: (650) 573-3817



NOTICE OF PROPOSED PENALTIES

Company Name: Kaiser Foundation Hospitals Redwood City Medical Center
Establishment DBA: and its successors
Inspection Site: 1100 Veterans Blvd., Redwood City, CA 94063
Mailing Address: 1100 Veterans Boulevard, Redwood City, CA 94063
Issuance Date: 08/08/2023
Reporting ID: 0950613
CSHO ID: C8043

Summary of Penalties for Inspection Number 1654644

Citation 1 Item 1, Serious Accident Related	\$18000.00
TOTAL PROPOSED PENALTIES:	\$18000.00

Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form.

If you are paying electronically: Please have this form on-hand when you are ready to make your payment. The company name, reporting ID and Citation number(s) will be required to ensure that the payment is accurately posted to your account. Please go to: www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html to access the secure payment processing site. **Additionally, you must also mail the Penalty Remittance Form to the address below.**

If you are paying by check: Mail this Notice of Proposed Penalties, the Penalty Remittance Form, along with a copy of the Citation and Notification of Penalty to:

**DEPARTMENT OF INDUSTRIAL RELATIONS
CAL/OSHA PENALTIES
P. O. BOX 516547
LOS ANGELES, CA 90051-0595**

Cal/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions or endorsements do not exist.

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH – CAL/OSHA
Accounting Office - Cashiering Unit
Phone (415) 703-4310 or (415) 703-4308

PENALTY REMITTANCE FORM

CIVIL PENALTY INFO	INSPECTION NO.:	1654644	REPORTING ID:	0950613
COMPANY NAME:	Kaiser Foundation Hospitals Redwood City Medical Center		FEIN/SEIN:	UNKNOWN
ESTABLISHMENT DBA:				
CONTACT PERSON:	Umer Murtaza			
PHONE NO.:	(650) 299-2360		FAX NO.:	UNKNOWN
SITE ADDRESS:	1100 Veterans Blvd., Redwood City, CA 94063			
MAILING ADDRESS:	1100 Veterans Boulevard, Redwood City, CA 94063			
CITATION INFORMATION: Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this Citation, remittance is still due on all items that are not appealed.				
PAYMENT INSTRUCTIONS: For check or money order: please make check or money order payable to Department of Industrial Relations. Write the inspection number and total amount enclosed on the payment coupon below and on the check or money order. For credit card or EFT payment, go to: www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html				

----- Detach here and return bottom portion with check or money order payment -----

PAYMENT COUPON



Inspection No.: 1654644

Amount Enclosed: \$ _____

Mail payment to:

For credit card or EFT payment, go to:
www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html

DEPARTMENT OF INDUSTRIAL RELATIONS
CAL/OSHA PENALTIES
P.O. BOX 516547
LOS ANGELES, CA 90051-0595

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Tel. # (650) 573-3812 Fax # (650) 573-3817

**NOTICE OF VERIFICATION OF ABATEMENT OF SERIOUS VIOLATIONS**

Kaiser Foundation Hospitals Redwood City Medical Center
1100 Veterans Boulevard
Redwood City, CA 94063

During the course of an inspection or re-inspection at a place of employment located at:

1100 Veterans Blvd.
Street
Redwood City CA 94063
City State Zip

The Division has verified abatement of the following Citation(s) alleging a serious violation or Special Order(s) or Orders(s) to Take Special Action:

Citation or Order No.	Number of Instances	Date Division Verified Abatement
1	1	8/4/2023

Signature: 
Compliance Safety and Health Officer

Date of Issuance: 8/8/2023

This notice is provided to the employer in accordance with the provisions of California Labor Code Section 6318(b). The employer is required to post this notice for three (3) working days at or near the location of the alleged violation.

0950613

RID

1654644

Inspection Nr.

C8043

CSHO ID

027-23

Optional Report Nr.

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Tel. # (650) 573-3812 Fax # (650) 573-3817



NOTICE OF ACCIDENT-RELATED VIOLATION AFTER INVESTIGATION

Kaiser Foundation Hospitals Redwood City Medical Center
1100 Veterans Boulevard
Redwood City, CA 94063

An investigation of an industrial accident or occupational illness was conducted by Geraldine Tolentino at a place of employment located at 1100 Veterans Blvd., Redwood City, on 03/06/2023.

Describe the condition(s) inspected:

Incident which occurred on February 23, 2023.

It has been determined by the Division that the fatal or serious injury, illness or exposure described above was related to the following serious, willful or repeat violation:

Serious Accident Related

Classification of Violation

Signature

Compliance Safety and Health Officer

Title 8 CCR Section 3203(a)(6)

Title 8 CCR Section

Signature

District Manager

Date of issuance: 8/8/2023

Date investigation completed: 08/04/2023

Upon request, the Division will provide the employer with a copy of its inspection report pertaining to this investigation.

0950613

RID

C8043

CSHO ID

027-23

Optional Report Nr.

1654644

Inspection Nr.

USPS Tracking®

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Moving Through Network

In Transit to Next Facility

August 14, 2023

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August 10, 2023, 4:36 pm

Arrived at USPS Regional Facility

SAN FRANCISCO CA DISTRIBUTION CENTER

August 9, 2023, 9:45 pm

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City, State, ZIP+4®
Kaiser Foundation Hospitals
Redwood City Medical Center
1100 Veterans Boulevard
Redwood City, CA 94063
8.9.2023
OSHA-2; 161A; 170C
C8043-027-23 1654644 3/6/23

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kaiser Foundation Hospitals
Redwood City Medical Center
1100 Veterans Boulevard
Redwood City, CA 94063
8.9.2023
OSHA-2; 161A; 170C
C8043-027-23 1654644 3/6/23



9590 9402 8019 2305 9494 44

2. Article Number (Transfer from service label)

7022 3330 0000 0628 5807

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Collect on Delivery Restricted Delivery | |
| ☐ Insured Mail (over \$500) | |

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

Violation Worksheet

Print Date: August 8, 2023

		Inspection Number		1654644	
		Opt. Insp. Number		027-23	
Establishment Name	Kaiser Foundation Hospitals Redwood City Medical Center				
DBA Name					
Type Of Violation	Serious	Citation Number	1	Item/Group	1
Standard	3203(a)(6)				
Alleged Violation Description	Title 8 CCR Section §3203(a)(6). Injury and Illness Prevention Program. (a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum: (6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard: (A) When observed or discovered; and, (B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards. Prior to and during the course of the inspection, including but not limited to on February 23, 2023, the Employer failed to implement an effective Injury and Illness Prevention Program in the following instance: - The Employer failed to identify, evaluate, and correct the hazard of not ensuring that the door to the MRI room (Zone IV) in the MRI suite was closed at all times as specified in the Employer's MRI Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6). As a result, an employee was seriously injured when a hospital bed was pulled by the magnetic force of the MRI machine and pinned the employee between the bed and the machine.				
Recommended Abatement Action					
# Instances	1	# Exposed	1		
Special Enforcement Type		Related Event Code (REC)			
General Duty Key Words		Employer's Relation to Hazard			
Photo/Video Number		Substance Codes			

Penalty

Severity	High
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Severity Justification			
Carcinogen?	No		
Extent	Medium		
Extent Justification			
Likelihood	Medium		
Likelihood Justification			
# of Times Repeated			
Gravity	High	Gravity based Penalty	\$18,000.00
# of Times Repeated		No Abatement Credit?	Yes
Multiplier		Size	0%
Good Faith	0%	History	0%
Calculated Penalty	\$18,000.00	Proposed Penalty	\$18,000.00
Proposed Penalty Justification			

Abatement Details

# Days to Abate		Abatement Status	Corrected During Inspection
Abatement Due Date		Date Abated	08/04/2023
Abatement Documentation Required?	No	Date Verified	08/04/2023
Abatement Completed Description	Retraining was performed on proper procedures for MRI room.		

Multi-Step Abatement

Type/Other Type	# Days to Abate	Abatement Due Date	Completed (Status)	Verify Date
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Employee Exposure

Violation Instance	# Exposed to Instance	Employer	Name and Address Telephone Numbers	Job Title	Duration / Frequency	Proximity
		Kaiser Permanente	Erika Rodriguez Home Phone: Personal Mobile: Work Phone:			
		Kaiser Permanente	Ainah Cervantes  Home Phone:	Registered Nurse		

			Personal Mobile: [REDACTED] [REDACTED] Work Phone:			
--	--	--	--	--	--	--

Worksheet Details

- A) Hazards-Operation/Condition-Accident:**
- B) Equipment:**
- C) Location:**
- D) Injury/Illness (and Justifications for Severity and Probability):**
- E) Measurements:**
- F) Employer Knowledge:**
- G) Comments:**
- H) Other Employer Information:**

Supplemental Violation Worksheet

Establishment Name: Kaiser Foundation Hospitals Redwood City Medical Center		Inspection Number: 1654644
DBA Name: Kaiser Permanente Redwood City		Opt. Insp. Number: 027-23
Citation Number/Item Number: 1-1	Title 8 CCR: T8 3203(a)(6)	
Citation/Notice Type: Serious Check if Accident Related: ☒ Check if Failure-To-Abate: ☐	Date 1BY sent: 07/17/2018	CSHO ID: Click or tap here to enter text.

Penalty

Severity: Safety-High	Severity Justification: Safety-High-Requiring more than 24-hour hospitalization.
Extent: Safety-Moderate	Extent Justification: Safety-Moderate: When the occasional violation of the safety order occurs, or 15-50% of the units are in violation;
Likelihood: Medium	Likelihood Justification (1) The number of employees exposed to the violative condition AND: (2)E The extent to which the violation has in the past resulted in injury or illness to the employees of the inspected workplace or to industry in general, as shown by: experience 1 out of 2 MRI's work practices in violation

Text of Regulation and Alleged Violation Description:

Supplemental Violation Worksheet

Establishment Name: Kaiser Foundation Hospitals Redwood City Medical Center		Inspection Number: 1654644
DBA Name: Kaiser Permanente Redwood City		Opt. Insp. Number: 027-23
Citation Number/Item Number: 1-1	Title 8 CCR: T8 3203(a)(6)	
Citation/Notice Type: Serious Check if Accident Related: ☒ Check if Failure-To-Abate: ☐	Date 1BY sent: 07/17/2018	CSHO ID: Click or tap here to enter text.

Title 8 CCR Section §3203(a)(6). Injury and Illness Prevention Program.

(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:

(A) When observed or discovered; and,

(B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.

Prior to and during the course of the inspection, including but not limited to on February 23, 2023, the Employer failed to implement an effective Injury and Illness Prevention Program in the following instance:

- The Employer failed to identify, evaluate, and correct the hazard of not ensuring that the door to the MRI room (Zone IV) in the MRI suite was closed at all times as specified in the Employer's MRI Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6).

As a result, an employee was seriously injured when a hospital bed was pulled by the magnetic force of the MRI machine and pinned the employee between the bed and the machine.

Employer-Employee Relationship¹

CSHO will testify to all information received during opening conference confirming that victim was EE or ER. U. Murtaza, Safety Director, acknowledged V was an EE. Cal/OSHA Accident Report made by ER's Safety Director.

Employee Exposure within Six Months²

2/23/23

-The employee sustained serious injuries on 2/23/23. Victim and one other employee were exposed to an open door to a Zone 4 MRI room.

Supplemental Violation Worksheet

Establishment Name: Kaiser Foundation Hospitals Redwood City Medical Center		Inspection Number: 1654644
DBA Name: Kaiser Permanente Redwood City		Opt. Insp. Number: 027-23
Citation Number/Item Number: 1-1	Title 8 CCR: T8 3203(a)(6)	
Citation/Notice Type: Serious Check if Accident Related: ☒ Check if Failure-To-Abate: ☐	Date 1BY sent: 07/17/2018	CSHO ID: Click or tap here to enter text.

Cal/OSHA Accident Report made by ER's Safety Director.

A. Cervantes - RN

E. Rodriguez - PCT

Additional Witnesses:

Scope, Application, and Definition³

Employer is engaged in activities with employees working within the State of California in a hospital setting. No exceptions apply.

Elemental Analysis⁴

#	Element	How Violated/ How Applicable	Evidence
1.	Title 8 CCR Section §3203(a)(6). Injury and Illness Prevention Program.		
2.	(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:	Kaiser Permanente Redwood City did not establish an effective IIPP.	

Supplemental Violation Worksheet

Establishment Name: Kaiser Foundation Hospitals Redwood City Medical Center		Inspection Number: 1654644	
DBA Name: Kaiser Permanente Redwood City		Opt. Insp. Number: 027-23	
Citation Number/Item Number: 1-1		Title 8 CCR: T8 3203(a)(6)	
Citation/Notice Type: Serious Check if Accident Related: ☒ Check if Failure-To-Abate: ☐		Date 1BY sent: 07/17/2018	CSHO ID: Click or tap here to enter text.

3.	(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:	MRI Zone 4 door was kept open for other than necessary reasons in which where the procedure was to keep the door closed at all times.	Enter text here.
4.	(A) When observed or discovered; and	Employees have observed the Zone 4 door upon arrival	Enter text here.
5.	(B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.	It was a common practice for the MRI Zone 4 door to remain open which endangered people and objects to be pulled into the machine by the strong magnetic force	

Supplemental Violation Worksheet

Establishment Name: Kaiser Foundation Hospitals Redwood City Medical Center		Inspection Number: 1654644
DBA Name: Kaiser Permanente Redwood City		Opt. Insp. Number: 027-23
Citation Number/Item Number: 1-1	Title 8 CCR: T8 3203(a)(6)	
Citation/Notice Type: Serious Check if Accident Related: ☒ Check if Failure-To-Abate: ☐	Date 1BY sent: 07/17/2018	CSHO ID: Click or tap here to enter text.

Employer (Management) Knowledge⁵
☐ Evidence of employer knowledge (actual and/or constructive). Select all that apply:
☐ Knowledge of violative condition by a foreman, supervisor, manager, or owner
☒ Violation common practice at jobsite
☐ Employer received complaints from other Employees
☒ Proximity of supervisors to violation
☒ Violation readily visible to anyone passing by

☐ Obligation anticipated: foreseeable hazard(s) such as asbestos-containing construction materials in older buildings
☐ Condition existed long enough for employer awareness
☐ Accident at jobsite previously from same violation
☐ Special duty to inspect (e.g., competent person at excavation)
☐ With reasonable diligence ER could have known of the presence of the violation
☐ Other: Enter other reason here.

Enter supporting evidence stating why the employer knew or could have known of the violation(s):
 Prior to the incident, 3 employees interviewed by the Division stated they have observed the Zone 4 door open on more than one occasion

For Serious Violations — Competence to Testify⁶
 CSHO is up-to-date on mandated training and will testify to experience and training.
 PDTU letter.

For Serious Violations — Realistic Possibility⁷
 Yes, Being pulled by the MRI's magnetic force can cause crushing injuries, broken bones, internal-organ injuries, death, etc.
 Cal/OSHA Accident Report made by ER's Safety Director says EE was seriously injured.

For Serious Accident-Related Violations — Causation⁸
 Yes, if door to Zone 4 had been shut, EE#1 would have not been pulled into Zone 4 MRI room resulting in serious crushing injuries.

For Serious Accident-Related Violations — Evidence of Death or Serious Injury or Illness⁹
 ER's Safety Director reported serious injury to district office.

☐ For repeat violations, attach prior citations and abatement.

1 EMPLOYER Kaiser Foundation Hospitals Redwood City Medical Center		2A INITIAL INSPECTION IDENT.NO. C8043 CAL/OSHA 1 REP.NO. 027 REGION 1										1654644 FY 23 DISTRICT 3										2B FOLLOW-UP INSPECTION IDENT.NO. CAL/OSHA 1 REP.NO. 0 REGION DISTRICT									
SITE ADDRESS 1100 Veterans Blvd. Redwood City, CA 94063																															
MAILING ADDRESS 1100 Veterans Blvd. Redwood City, CA 94063																															
3	4	5	6	7	8	GRAVITY				13	14	15	16	17	18	19		20	21	22	23	24	25	26							
CITATION NUMBER	ITEM NUMBER	STANDARD ORDER, REGULATION OR CODE ALLEGEDLY VIOLATED	NUMBER EXPOSED	NUMBER OF INSTANCES	CLASSIFICATION OF VIOLATION	CARCINOGEN	SEVERITY	EXTENT	LIKELIHOOD	GRAVITY BASED PENALTY	REPEATED	WILLFUL	Less 20 % Adjustment Factor Less 0% for Accident Related and Less 0% for Serious Violations with Ineffective IIPP	ADJUSTED PENALTY	LESS 50% ABATEMENT CREDIT	PROPOSED PENALTY FOR EACH VIOLATION	ABATEMENT DATE	DATE OF FOLLOW-UP INSPECTION	NO. OF CAL. DAYS OVER ABATE. DATE	Less 0 % Adjustment Factor Less 0% for Accident Related and Less 0% for Serious Violations with Ineffective IIPP	ADJUSTED PENALTY	RESULTING PENALTY, INSTANCES UNABATED	RECISION OF ABATEMENT CREDIT	PROPOSED ADD. PENALTY FOR FAILURE TO ABATE							
																									FIG. 1	FIG. 2	FIG. 3				
1	1	3203(a)(6)	2	1	S A		18000	0	0	18000				18000		18000															
FIG.1		FIG. 2								TOTAL PROPOSED PENALTY \$ 18000				FIG. 3				26A TOTAL \$													
W = WILLFUL S = SERIOUS G = GENERAL RS = REPEAT, SERIOUS RG = REGULATORY GR= REPEAT, GENERAL ACC.RELATED/IIP PROGRAM		PENALTY ADJUSTMENT FACTORS (IN PERCENT)								27				PENALTY ADJUSTMENT FACTORS (IN PERCENT)				28													
		GOOD FAITH		SIZE				HISTORY		TOTAL		GOOD FAITH		SIZE				HISTORY		TOTAL											
		30	15	0	40	30	20	10	0	10	5	0	20	30	15	0	40	30	20	10	0	10	5	0							
		X						X	X																						
										ORIGINAL PREPARED BY DATE								FAIL-TO-ABATE PREPARED BY DATE													
										Geraldine d. Tolentino 08/07/23																					
										ORIGINAL APPROVED BY DATE								FAIL-TO-ABATE APPROVED BY DATE													

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

*W.C. Carrier :__Sedgewick__

NARRATIVE SUMMARY

Establishment Name: Kaiser Permanente	Inspection Number: 1654644
Management Contacted: 1. Umer Murtaza 2. Lola Barnes 3. Michele Grade 4. Josephine Reyes 5. John Fannin 6. Mari Faulve-Montojo 7. Shari Samuels 8. Dorothy Totah 9. Jelissa Cummings	Title(s): 1. Safety Director 2. Director Nursing Clinical Practice 3. Supervisor 4. Chief Nurse 5. COO 6. Area Quality Leader 7. Northern Director EH&S 8. Director Quality Services 9. Area Quality Leadr

Information on Injured

Covered by Workers' Compensation: Yes ☒ No ☐

Name, Address and Phone Number	Occupation
1. Ainah Cervantes, [REDACTED] [REDACTED] (EE#1)	Registered Nurse

Witness Name(s) and Title

*Check Box Preceding Name if Confidentiality is Given.

*	Name and Title	Address	Phone No.	Signed Statement?			
	Shauna Braun, Staff Nurse. Shop Steward		[REDACTED]	Yes		No	
	Liz Legaspi, CNA Shop Steward						
	Schanta Wilson, Senior Medical Assistant (SEIU UHW Shop Steward)	1150 Veterans Blvd., Redwood City, CA 94063	[REDACTED]				
	Ron Cook						
	Erika Rodriguez, PCT (EE#2)					x	
	Michael Taylor, MRI Tech Assistant (SEIU UHW Shop Steward)					x	
	Grace Lam, MRI Lead (EE#3)	[REDACTED]				x	
	Letichia Gomez, Imaging Assistant (EE#4)					x	
	Ron Cook, Transport (SEIU UHW Shop Steward)						

William Shashte, PCT (EE#1)						X	
Maria Kristine Aguilar – Gozum, Registered Nurse (EE#6)						X	
Agnes Rodil, Registered Nurse (ICU) (EE#7)						X	
Marilyn Jacinto, Registered Nurse (CNA Shop Steward)							
Grace Malasan, Registered Nurse							

Summary:

On February 23, 2023, an employee of Kaiser Foundation Hospitals dba Kaiser Permanente at 1100 Veterans Blvd., Redwood City suffered a serious injury. The Division was notified on February 23, 2023. EE#1 was admitted to Kaiser Permanente Redwood City for treatment of her injury.

On March 2, 2023, the District Manager assigned the undersigned Associate Safety Engineer (AE) to conduct an investigation.

CSHO interviewed the employee on April 14, 2023.

THE EMPLOYER

Kaiser Foundation Hospitals Redwood City Medical Center serves Redwood City and the surrounding cities. The medical center provides a variety of services such as primary care, urgent care, and emergency care. Adjacent to the hospital are medical offices and clinics.

THE INJURED EMPLOYEE

The 48 year old female had been employed as a registered nurse for 1-2 months with Kaiser Foundation Hospitals Redwood City Medical Center. EE#1 had been a traveling registered nurse performing the same duties since 1998 in various hospitals throughout California.

THE ACCIDENT

EE#1 and EE#2 were transporting a patient to the MRI room located on the first floor of 1100 Veterans Blvd. EE#1 was at the head of the hospital bed which had controls to control the motor and steer the bed. EE#2 was at the foot of the bed assisting EE#1. When EE#1 and EE#2 reached the MRI room, EE#3 instructed EE#1 and EE#2 to come in with the patients bed going in head first towards Zone 4 door. EE#1 followed EE#3's instructions and walked backwards towards the Zone 4 room. When EE#1 reached the doorway of the Zone 4 room while "driving" the hospital bed, EE#1 was pulled uncontrollably into the MRI machine. EE#1 suffered crushing injuries to her upper leg and abdomen area.

SITE EVALUATION

1100 Veterans Boulevard is a multi floor general acute care hospital. The MRI room is located on the first floor on the same level and down the hall from the Emergency Department. The MRI unit comprises of 4 zones. Zone 1 is located in the lobby near the Emergency Department. Zone 2 is the hallway leading into the MRI room. Zone 3 is the lobby area where patients are checked in by the MRI technicians prior to entering the Zone 4. Prior to entering Zone 3, employees and patients are only admitted into the room by MRI technicians. There is a door to Zone 4 that is under the Employer's policy that must be shut at all times. The distance between the entry door of Zone 3 to the entry door from Zone 4 measures a little longer in length than a hospital bed.

FINDINGS

Prior to EE#1 and EE#2 entered Zone 3 EE#1 noticed the door to Zone 4 was open and verbally stated the door to Zone 4 was left open for the MRI technician to hear. In EE#1's prior experiences at various hospitals as a traveling nurse, Zone 4 had always been separated by a wall or in a totally different room than Zone 3. This was the first time EE#1 had entered the MRI room. EE#1 works the night shift and MRI procedures are performed only in the day shift. On the day of February 23, 2023, the transporting of the patient occurred early in the day shift. There were no barriers between EE#1 and the MRI table. The MRI machine was on. The Division received statements from 3 other employees that the door to Zone 4 was propped open upon entry to Zone 3 while transporting patients on more than one occasion. After the incident, the Employer performed retraining on proper procedures and moved the checking in of patients to a separate room down the hallway. Going forward, patients are transferred to MRI safe beds prior to entering the lobby area before Zone 4.

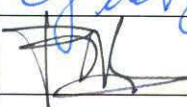
CONCLUSION

The Employer failed to ensure the door to Zone 4 remained closed and employees were following the Employer's MRI Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6). On more than one occasion with various employees transporting employees the door to Zone 4 was not shut exposing the hazard of the MRI. EE#1 suffered hospitalization and underwent surgery as a result of her injuries. The Employer reported the serious injury of the employee to the nearest district office in a timely manner.

REGULATORY ACTION

1. Serious Accident Related - Title 8 CCR Section §3203(a) → The Employer failed to identify, evaluate, and correct the hazard of not ensuring that the door to the MRI room (Zone IV) in the MRI suite was closed at all times as specified in the Employer's MRI Safety Guidelines NCAL Imaging Policy SAS-910 (Subsection 5.7.6).

Use additional sheet(s) as needed.

		Signature	Date
Prepared by:	CSE, IH		8/9/23
Reviewed by:	DM/SR. IH		8/9/2023
	Regional Manager		
	Deputy Chief		

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Kaiser Foundation Hospitals	08/08/2018 to 08/08/2023	all	all	CA

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Results 1 - 20 of 51

Result Page: 1 2 3 >

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#	Activity	Date Opened	RID	ST	Type	Scope	SIC	NAICS	Violations	Establishment Name
☐	1	<i>1631940.015</i>	11/02/2022	0950612	CA	Complaint	Partial	622110	4	Kaiser Foundation Hospitals
☐	2	1617469.015	08/23/2022	0950625	CA	Complaint	Partial	621493	1	Kaiser Foundation Hospitals
☐	3	1609966.015	07/21/2022	0950621	CA	Accident	Partial	622110	2	Kaiser Foundation Hospitals
☐	4	1598047.015	07/12/2022	0950611	CA	Accident	Partial	621340		Kaiser Foundation Hospitals
☐	5	1606981.015	07/11/2022	0950635	CA	Complaint	Partial	446110	3	Kaiser Foundation Hospitals
☐	6	1597453.015	05/19/2022	0950662	CA	Planned	Complete	493110	4	Kaiser Foundation Hospitals
☐	7	1582260.015	03/08/2022	0950631	CA	Accident	Partial	622110	1	Kaiser Foundation Hospitals
☐	8	1573755.015	01/20/2022	0950644	CA	Accident	Partial	622110	2	Kaiser Foundation Hospitals
☐	9	<i>1567459.015</i>	12/08/2021	0950635	CA	Accident	Partial	622110	2	Kaiser Foundation Hospitals
☐	10	1555515.015	09/30/2021	0950621	CA	Complaint	Partial	621330		Kaiser Foundation Hospitals
☐	11	1548546.015	08/18/2021	0950612	CA	Complaint	Partial	622110	3	Kaiser Foundation Hospitals, Inc.
☐	12	1548004.015	08/12/2021	0950621	CA	Fat/Cat	Partial	622110		Kaiser Foundation Hospitals

☐	#	Activity	Date	OSHA	State	Type	Complaint	Scope	SIC	NAICS	Violations	Establishment Name
☐	13	1528962.015	05/04/2021	0950612	CA	Accident	Partial			622110	4	Kaiser Foundation Hospitals; Site - Pharmacy Call Center
☐	14	1528962.015	05/04/2021	0950612	CA	Accident	Partial			622110	4	Kaiser Foundation Hospitals
☐	15	1528195.015	04/28/2021	0950633	CA	Accident	Partial			622110	1	Kaiser Foundation Hospitals
☐	16	1513606.015	02/05/2021	0950614	CA	Accident	Partial			541711		Kaiser Foundation Hospitals
☐	17	1513259.015	02/04/2021	0950612	CA	Accident	Partial			622110	2	Kaiser Foundation Hospitals
☐	18	1512533.015	01/28/2021	0950614	CA	Accident	Partial			622110	4	Kaiser Foundation Hospitals/Kaiser Permanente-Oakland Medical Center
☐	19	1511373.015	01/25/2021	0950621	CA	Fat/Cat	Partial			622110		Kaiser Foundation Hospitals
☐	20	1509590.015	01/12/2021	0950613	CA	Fat/Cat	Partial			622110	1	Kaiser Foundation Hospitals

Result Page: 1 2 3 >

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Results 21 - 40 of 51

Result Page: [<](#) [1](#) [2](#) [3](#) [>](#)Sort by: [Date](#) | [Name](#) | [Office](#) | [State](#)[Return to Search](#)[Get Detail](#) [Select All](#) [Reset](#)

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☐	21 1511445.015	01/08/2021	0950635	CA	Complaint	Partial		621491	9	Kaiser Foundation Hospitals
☐	22 1508745.015	01/06/2021	0950615	CA	Accident	Partial		621491	1	Kaiser Foundation Hospitals, Inc.
☐	23 1503950.015	11/25/2020	0950614	CA	Accident	Partial		622110		Kaiser Foundation Hospitals
☐	24 1503702.015	11/23/2020	0950615	CA	Complaint	Partial		621111	1	Kaiser Foundation Hospitals
☐	25 1500783.015	11/04/2020	0950614	CA	Accident	Partial		622110		Kaiser Foundation Hospitals
☐	26 1499765.015	10/28/2020	0950611	CA	Fat/Cat	Partial		622110	1	Kaiser Foundation Hospitals-San Francisco
☐	27 1498479.015	10/21/2020	0950611	CA	Accident	Partial		622110	5	Kaiser Foundation Hospitals
☐	28 1498235.015	10/20/2020	0950615	CA	Accident	Partial		622110		Kaiser Foundation Hospitals
☐	29 1495000.015	09/30/2020	0950621	CA	Complaint	Partial		622110		Kaiser Foundation Hospitals
☐	30 1494280.015	09/24/2020	0950635	CA	Accident	Partial		622110	5	Kaiser Foundation Hospitals
☐	31 1491395.015	09/04/2020	0950613	CA	Complaint	Partial		622110	1	Kaiser Foundation Hospitals
☐	32 1490747.015	09/01/2020	0950621	CA	Accident	Partial		622110	4	Kaiser Foundation Hospitals

☐ 33	1491759.015	08/28/2020	0950647	CA	Accident	Partial	SIC	621399	4	Kaiser Foundation Hospitals
#	Activity	Date Opened	RID	ST	Type	Scope		NAICS	Violations	Establishment Name
☐ 34	1490465.015	08/28/2020	0950635	CA	Fat/Cat	Partial		622110	5	Kaiser Foundation Hospitals
☐ 35	1488938.015	08/19/2020	0950615	CA	Accident	Partial		622110	3	Kaiser Foundation Hospitals
☐ 36	1490783.015	08/19/2020	0950644	CA	Accident	Partial		622110	2	Kaiser Foundation Hospitals
☐ 37	1494286.015	08/12/2020	0950633	CA	Accident	Partial		622110	5	Kaiser Foundation Hospitals
☐ 38	1486133.015	07/31/2020	0950615	CA	Accident	Partial		622110	6	Kaiser Foundation Hospitals
☐ 39	1510890.015	06/29/2020	0950633	CA	Complaint	Partial		622110	3	Kaiser Foundation Hospitals
☐ 40	1481075.015	06/29/2020	0950615	CA	Complaint	Partial		622110		Kaiser Foundation Hospitals

Result Page: < 1 2 3 >

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Results 41 - 51 of 51

Result Page: [1](#) [2](#) [3](#)Sort by: [Date](#) | [Name](#) | [Office](#) | [State](#)[Return to Search](#)[Get Detail](#) [Select All](#) [Reset](#)

	#	Activity	Date Opened	RID	ST	Type	Scope	SIC	NAICS	Violations	Establishment Name
☐	41	1479549.015	06/18/2020	0950614	CA	Accident	Partial	622110	4		Kaiser Foundation Hospitals
☐	42	1478378.015	06/11/2020	0950615	CA	Accident	Partial	622110	3		Kaiser Foundation Hospitals
☐	43	1478389.015	06/10/2020	0950614	CA	Complaint	Partial	622110	1		Kaiser Foundation Hospitals
☐	44	1476388.015	05/27/2020	0950615	CA	Complaint	Partial	622110	5		Kaiser Foundation Hospitals
☐	45	1476167.015	05/22/2020	0950632	CA	Complaint	Partial	622110	2		Kaiser Foundation Hospitals
☐	46	1475605.015	05/14/2020	0950613	CA	Complaint	Partial	622110	4		Kaiser Foundation Hospitals Redwood City Medical Center
☐	47	1474630.015	05/08/2020	0950614	CA	Complaint	Partial	622110	3		Kaiser Foundation Hospitals/Kaiser Permanente - Oakland Medical Center
☐	48	1443223.015	11/06/2019	0950662	CA	Planned	Complete	493110			Kaiser Foundation Hospitals
☐	49	1430155.015	09/11/2019	0950612	CA	Complaint	Partial	622110	3		Kaiser Foundation Hospitals
☐	50	1421265.015	08/07/2019	0950641	CA	Accident	Partial	622110	2		Kaiser Permanente/Kaiser Foundation Hospitals

	#	Activity	Date Opened	RI	ST	Type	Scope	SIC	NAICS	Locations	Establishment Name
☐	51	1402967.015	05/17/2019	0950615	CA	Accident	Partial		621491	3	Kaiser Foundation Hospitals

Result Page: < 1 2 3

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Department of Industrial Relations
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
PROPOSED PENALTY WORKSHEET

1 EMPLOYER Kaiser Permanente Redwood City						2A INITIAL INSPECTION IDENT.NO. C8043 CAL/OSHA 1 REP.NO. REGION 1								1654644 027 FY 23 DISTRICT 3				2B FOLLOW-UP INSPECTION IDENT.NO. CAL/OSHA 1 REP.NO. 0 REGION DISTRICT											
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MAILING ADDRESS 1100 Veterans Blvd. Redwood City, CA 94063																													
3	4	5	6	7	8	GRAVITY				13	14	15	16	17	18	19	20	21	22	23	24	25	26						
CITATION NUMBER	ITEM NUMBER	STANDARD ORDER, REGULATION OR CODE ALLEGEDLY VIOLATED	NUMBER EXPOSED	NUMBER OF INSTANCES	CLASSIFICATION OF VIOLATION	CARCINOGEN	SEVERITY	EXTENT	LIKELIHOOD	GRAVITY BASED PENALTY	REPEATED	WILLFUL	Less 20 % Adjustment Factor Less 0% for Accident Related and Serious Violations with Ineffective IIPP	ADJUSTED PENALTY	LESS 50% ABATEMENT CREDIT	PROPOSED PENALTY FOR EACH VIOLATION	ABATEMENT DATE	DATE OF FOLLOW-UP INSPECTION	NO. OF CAL. DAYS OVER ABATE. DATE	Less 0 % Adjustment Factor Less 0% for Accident Related and Serious Violations with Ineffective IIPP	ADJUSTED PENALTY	RESULTING PENALTY, INSTANCES UNABATED	RECISION OF ABATEMENT CREDIT	PROPOSED ADD. PENALTY FOR FAILURE TO ABATE					
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PENALTY ADJUSTMENT FACTORS (IN PERCENT)						27						PENALTY ADJUSTMENT FACTORS (IN PERCENT)						28											
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																								FAIL-TO-ABATE APPROVED BY DATE					

Tolentino, Geraldine@DIR

From: Microsoft Outlook
To: Umer Murtaza
Sent: Monday, July 17, 2023 10:58 AM
Subject: Relayed: Notice of Intent to Classify Citation as Serious

Delivery to these recipients or groups is complete, but no delivery notification was sent by the destination server:

[Umer Murtaza \(Umer.X.Murtaza@kp.org\)](mailto:Umer.X.Murtaza@kp.org)

Subject: Notice of Intent to Classify Citation as Serious

Tolentino, Geraldine@DIR

From: Tolentino, Geraldine@DIR
Sent: Monday, July 17, 2023 10:58 AM
To: Umer Murtaza
Subject: Notice of Intent to Classify Citation as Serious
Attachments: Notice to Classify Citation as Serious T8 3203 1654644.pdf

Importance: High

Hi Umer,

Please find the attached Notice. A hardcopy will follow.

Is the legal name of this location "Kaiser Permanente"? In the past with different Kaiser locations there were different names.

Please feel free to call me for any questions,

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

Kaiser RWC – IEE Interview – 1654644 – Ainah Cervantes

1. Name: Ainah Cervantes
2. Address:
3. Phone number:
4. Name of Employer: Kaiser Permanente Redwood City
5. Job Title: Registered Nurse
6. How long with Kaiser: 1 2months
7. Prior to Kaiser were you a registered nurse: Yes, since 1998.
8. Did perform the same did you duties in terms of assisting patients to the MRI? yes
9. Name of Union: CNA
10. What is the name of unit you are assigned to: Neuro ICU
11. Present:
12. Avery Fuerst.
13. Shauna Braun. Staff Nurse. Kaiser RWC. Shop Steward. [REDACTED]
14. Work schedule: 11pm - 730am; Sun-Mon. Fri-Sat. Wed-Thurs.
15. What department do you work in: Answered above.
16. How long have you worked for this Employer:
17. How long have you been performing the duties you were performing on February 23, 2023?
 - The first 3 months is orientation. Whoever is tasked to go would go.Avery: I thought the transporter would take the patients.
AC: Some orders say to go with nurse or can go without a nurse. It depends on patient's condition.
18. What was the name of your direct supervisor for February 23, 2023?
 - a. Charles Morato
19. What are the names of the employees who were working with you in the MRI room on February 23, 2023?
 - a. Erika Rodriguez. Helped push bed down. Grace. And one additional person assuming training in MRI>

20. What job duties did you need to perform in the MRI room?
- When there is a nurse, the moment you are inside MRI, it's basically the MRI tech in charge there. So basically my role is to take the patient to MRI and then do what MRI tech says.
21. Are you trained on the hazards of the MRI?
- Yes.
22. Who trained you on your job duties you performed in the MRI? (Hand on)
- Letty (passed away). Training is mainly healthstream or KP Nurse.
23. How often do you bring patients to the MRI room?
- Not quite often because that is usually scheduled during day shift. I've only gone there twice. I became R1 which is relief Charge 1. I've set up the patient to do MRI, checklist, etc.
24. Are you assigned to help transfer patients to the MRI table?
- Correct. That is one of the things to do. When the MRI tech tells you, you go with them.
25. How often do you help transfer patients to a MRI table? Per day? Per week? Per month?
- once
26. How long have you been helping transfer patients to a MRI table?
- Outside of Kaiser, every since I've started, I cannot count.
27. What area to patients gets transferred from the hospital bed to the MRI table? In the patient preparation area right outside the room that houses the MRI? In the main hallway before entering the patient preparation area of the MRI room?
- The zone that houses the MRI is zone 4. Zone 1 is where the patient is screened.
28. What are the steps in transferring a patient to a MRI table?
- Zones 1 – Zone 3 are before Zone 4. Patients is screened then goes onto the table.
29. Is anyone responsible for leading the steps in the MRI room? Does MRI tech typically direct what occurs in MRI room?
- Yes.
30. Is the door to the MRI room from the patient preparation area usually left open or closed?
- Unfortunately it was left open the day I was there and the previous time. My coworkers have told me the door has always been left open.
31. Do you know it's left open?
- I have no idea.

AC: Grace said: Come in, come in. (From the ER Hallway). Head first, head first. I'm the driver as going backwards. Then she goes to control room. That room is Zone 1 – 3 combined. I looked back and said: Oh! The door is open. The first thing I felt was the bed was moving and I told Erika to stop. Grace went back to Control Room. So of course I have to stand there. Whatever we dictate we do. Next thing I know I was getting pushed by the bed. Basically I was running backwards. If I didn't run the bed would smash me underneath.

32. If the door to the MRI room from the patient preparation area was already open when you arrived with the patient in the hospital bed, do you know why the door was left open?
 - a. No.
33. Is it common practice for the door to the MRI room from the patient preparation room to be left open?
 - a. Yes it was the first time and the second time and when my coworkers visited me in patient, they have been saying that the doors have always been open.
34. Do you know names of the nurses?
 - a. Sesley, Christine, Agnes (day), Shilou, Maricella, Kim, Candace
35. Were you screened prior to entering MRI Zone 3?
 - a. No because there was no Zone 3
36. Where were the other employees located?
 - a. Erika was on foot of the bed. Grace is in Control room.
37. Please describe to the best of your recollection what occurred on February 23, 2023 in the MRI room.
 - a. Answered
38. What do you think could have prevented the incident?
 - a. Zone 1 – 3 should have been way bigger. We are told to respect the MRI because of it's power. Even if the door is closed, who is to say it doesn't suction anyone metallic. If there is any malfunction to the magnet, it is definite direct to the bed.
 - b. Most of the MRI's I've been to, again they have all been closed. There is a wall not direct to MRI outlet.
39. Do you think the door being closed would have also helped?
 - a. For sure.
40. Do you remember seeing the MRI table?
 - a. Yes, the MRI table was inside Zone 4.
41. Can you say the MRI table was not blocking the door to Zone 4?
 - a. Yes, it was not blocking.

That would be a lie. My training I stop at Zone 1. I stop at Zone 1 because that is what I am used to.

Where is the patient?

On the bed.

The report said the patient is in the control room

No ma'am.

From my understanding there have been close calls.

Name: Letichia Gomez

Name of Employer: Kaiser

Job title: Imaging Assistant

Name of Union: SEUI UWH

Union representative present:

Union contact information:

How long with Employer: 2 years

Name of direct supervisor: Michelle Grade

What shift do you work on what days?

M-F 630am – 3pm

What are your job duties:

Help the tech as much as possible getting patient from registration, getting prepared for procedure, going back to room, stocking linen, cleaning room, stocking room, making sure we have everything we need to run smoothly

Have you been trained in the safety hazards of the MRI?

Yes.

Who trained you in the safety hazards of the MRI?

We had tutorials modules and also hands on training.

How often do you work in MRI Room (IN98)?

Everyday Monday – Friday 630am – 3pm – since February 2022

Would you be able to draw arrows for showing Zones 1-4 on this floor map of the MRI Room (IN98)?

(Done)

Can you show me where on the floor map does a patient gets transferred from the hospital bed to the MRI table?

Zone 3

When personnel walks into the hallway door into the patient preparation area while transporting a patient, is the door to Zone 4 normally already propped open?

No. It's closed all the time.

What are the procedures for checking in a patient? Who stands where? What doors are open? Where is the patient transferred onto the MRI table? Where does the hospital bed stay parked?

That would be in Zone 3. The hospital bed is in Zone 3, the patient is screened in Zone 3.

What doors are left open?

No doors are left open except for the Control Room unless the patient has COVID and that door is closed.

The patient is transferred onto the MRI table in Zone 3?

Correct

Is the Zone 4 door closed while the patient is scanned on the MRI table?

Yes.

Would you be able to describe what you know what might have occurred on February 23, 2023?

I as on the phone with the patient, the tech (Grace) opened the door (Zone 2 to Zone 3) for the patient, nurse, and pct. I heard shuffling and I started hearing screaming. When I ran in I saw the nurse stuck between the MRI machine and the bed. So went to phone and phone calls were coming through I end leaving the room and ran to ED and said we needed help we have a nurse stuck in the room with a bed. I came back and the nurse got loose, her clothes were mangled, I couldn't see she was bent over. I ran and got her a gown, she said "You need to call code, you need to call code." The phone rang, it was Alice. (One of the Assistant Managers for Radiology), she was asking what was going on.

I have been told the Zone 4 door has been propped open when some nurses have transported patients in from the hallway. Is this common practice to leave the door to Zone 4 open?

It's not common practice. I know that if we were waiting for a patient.

If the patient could walk then we wand the patient down and let them walk into Zone 4.

Is Zone 4 where the patient gets onto the table?

Yes. When they are ambulatory.

How about when the patient is not ambulatory?

We would have to open the door, get them off the bed, transfer them from the gurney to the bed (MRI table).

Was there a reason why the door to Zone 4 was left open on February 23, 2023 at 830am, the date and time of the incident?

From my recollection, they (ICU) were running late. The MRI table was prepared and placed between zone 3 and zone 4.

So was Aina supposed to go left when she entered the room?

Correct.

So the MRI table was in there and you would slide the patient from the bed to the MRI table?

Yes.

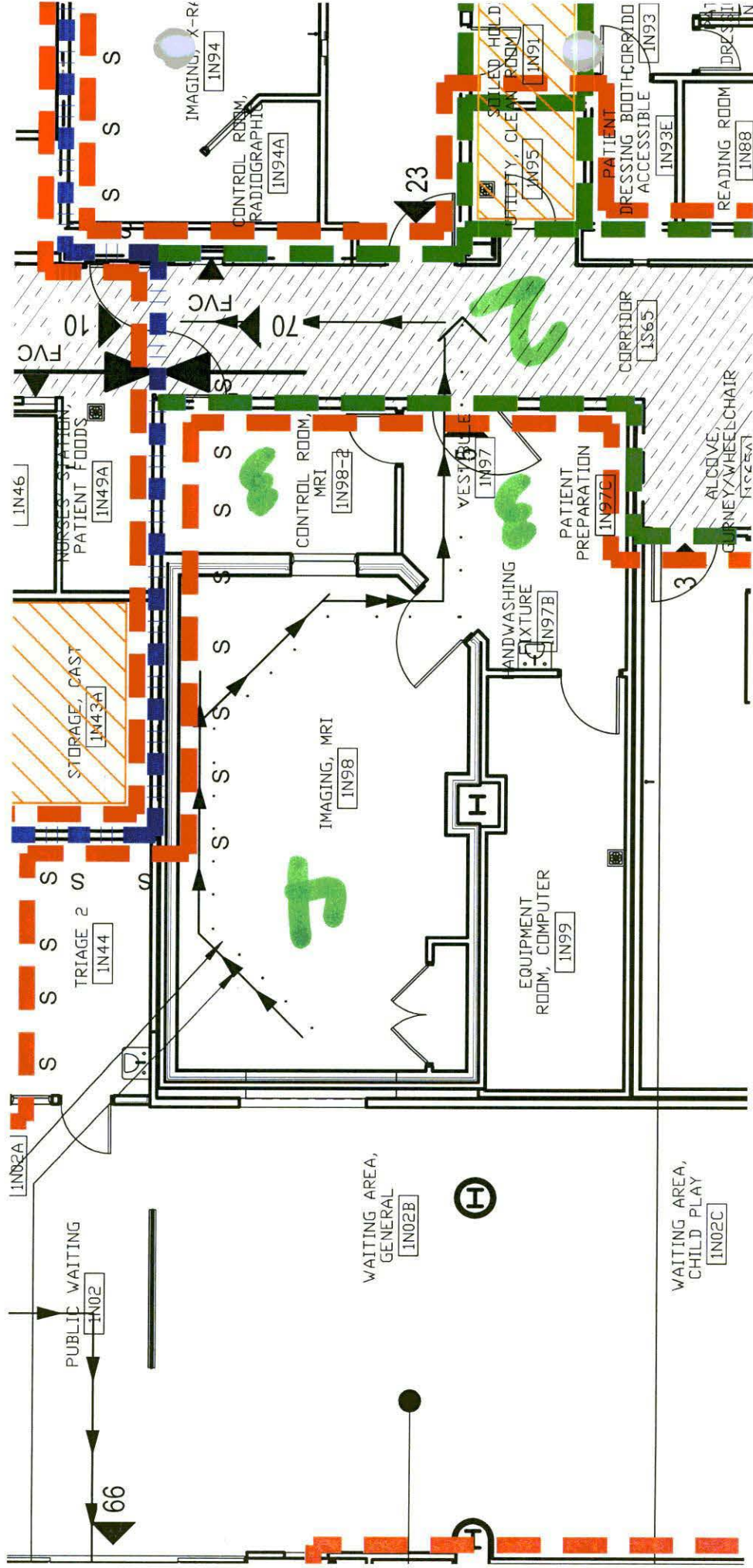
What do you think could have prevented the incident from occurring?

Better communication.

Address: [REDACTED]

Phone: [REDACTED]

COPY



157

Kaiser EE Interview – LeShandra Sesley

1. Name: LeShandra Sesley
2. Name of Employer: Kaiser RWC
3. Name of Union: CNA
4. Contact information for Union Representative: Avery
5. Job title: RN Staff Nurse II
6. How long have you worked for Kaiser: 5 years
7. What department do you work in? ICU
8. What shift do you work: NOC 11 - 7
9. What is the name of direct supervisor: Tina Dipierro
10. Job duties: Bedside nurse
11. Have you transported patients into the Hospital Building MRI room prior to February 23, 2023?
 - a. Only once during my orientation. Night shift we rarely. March or April 2018
12. When you have transported patients to the Tower Building MRI room prior to February 23, 2023, have you seen the door to Zone 4 open while you were walking into Zone 3?
 - a. I don't. I don't transport patients.
13. Would you be able to give me an estimate how many patients? (Did not ask)
14. When you walk into Zone 3, have you been trained where to stand prior to the incident on February 23, 2023? For example, do you stand in front of the Zone 4 door or do you step in Zone 3 and move to the far wall opposite the observation room and furthest away from the Zone 4 door? (Did not ask)

15. Would you happen to know if any management from any department is knowledgeable?

a. (Did not ask)

16. Have you ever mentioned to any management that the door to Zone 4 was open when you entered Zone 3 while transporting a patient?

a. (Did not ask)

17. Address: [REDACTED]

18. Phone: [REDACTED]

Kaiser EE Interview – Maria Kristine Aguilar

1. Name: Maria Kristine Aguilar - Gozum
2. Name of Employer: Kaiser
3. Name of Union: CNA
4. Contact information for Union Representative: Avery
5. Job title: RN
6. Hired: Hired 2015
7. What shift do you work: NOC
8. What is the name of direct supervisor: Tina D
9. Job duties: Primary Nurse, Rapid Response Team, Charge Nurse
10. Have you transported patients into the Tower Building MRI room where the incident occurred on February 23, 2023?
 - a. Yes, I have actually transported multiple times since being hired here in 2015. Between 6am – 7am. More than a handful.
11. When you have transported patients to the MRI room where the incident occurred on February 23, 2023 have you seen the door to Zone 4 open while you were walking into Zone 3?
 - a. To be honest is almost non-existent because it's always open
12. Would you happen to remember who would be working in the MRI room?
 - a. I would remember Grace. She would be the one calling the patients down there and the one screening.
13. When you walk into Zone 3, have you been trained where to stand prior to the incident on February 23, 2023? For example, do you stand in front of the Zone 4 door or do you step in Zone 3 and move to the far wall opposite the observation room and furthest away from the Zone 4 door?
 - a. What we have been taught once we take patient to Zone 3 is sign in and leave badges, we get patients settled.
 - b. All of this was happening in front of Zone 4 door
14. Would you happen to know if any management from any department is knowledgeable?
 - a. I'm guessing no because that would be not following compliance.
15. Have you even told management that you observed the Zone 4 door would be left open?
 - a. It never crossed my mind to report something.
16. Address: [REDACTED]
17. Phone: [REDACTED]

Kaiser EE Interview – William Shashte

1. Name: William Shaste
2. Name of Employer: Kaiser Permanente
3. Name of Union: SEIU UHW
4. Contact information for Union Representative: Kenda Simpson-Kennon [REDACTED]
 - a. Employee of Kaiser – Contract Specialist- 905 Maple Street, RWC, CA 94063
5. Job title: PCT – CAN
6. How long have you worked for Kaiser: 23 years
7. What is the name of your direct supervisor: Mineta Relecca
8. Job duties: Assist the nurse with transporting patients, taking vital signs,
9. Have you transported patients into the MRI room (Tower Building) where the incident occurred on February 23, 2023?
 - a. Yes
10. When you have transported patients to the MRI room in the Tower Building where the incident occurred on February 23, 2023 have you seen the door to Zone 4 open while you were walking into Zone 3?
 - a. Yes
11. How often would you say the room had been open?
 - a. More than 3 less than 5.
12. When you walk into Zone 3, have you been trained where to stand prior to the incident on February 23, 2023? For example, do you stand in front of the Zone 4 door or do you step in Zone 3 and move to the far wall opposite the observation room and furthest away from the Zone 4 door?
 - a. Furthest away from Zone 4 door
13. You have been trained to do that? Trained when you walk in to go furthest away from Zone 4 door?
 - a. That is correct, yes.
14. What shift do you work when you transported patients into Tower Building MRI room?
 - a. Night shift but towards end of day. 6am – 7am
15. When the you have transported the patients into the Tower Building MRI room, do you remember who the MRI tech was?
 - a. No.
16. Have you had training on transporting patients into the MRI room?
 - a. Yes
17. In your training did you know the Zone 4 door was supposed to be closed?
 - a. No.
18. What do you think could have prevented the accident?
 - a. Not bringing the patient bed.
 - b. The nurse was always with me. The tech told me not to get close to the door. We were in that area, we never got close with the bed.

Do you know if anyone from management was aware that the door to Zone 4 is left open?

I can only speak for my manager in ICU and I can say they were not aware.

Address: [REDACTED]

Phone: [REDACTED]

1. Name: Agnes Rodil
2. Name of Employer: Kaiser Permanente Redwood City Medical Center
3. Name of Union: CNA
4. Contact information for Union Representative: Shauna
5. Job title: RN in ICU
6. How long have you worked for Kaiser: 13 Years in SoCal
7. What department do you work in? ICU
8. What shift do you work: 7am – 3pm
9. What is the name of direct supervisor: Tina D
10. Job duties: take care of patients, assess them, right medications
11. Have you transported patients into the Tower Building MRI room prior to February 23, 2023?
 - a. Yes, several times.
12. When you have transported patients to the Tower Building MRI room prior to February 23, 2023, have you seen the door to Zone 4 open while you were walking into Zone 3?
 - a. Yes. It's always open every time I go there.
13. Would you be able to give me an estimate how many patients?
 - a. 2 -3 times a month the Zone 4 door is open
 - b. MRI tech – Grace, lack of communication, lack of education, they don't tell us to remove our badge
14. When you walk into Zone 3, have you been trained where to stand prior to the incident on February 23, 2023? For example, do you stand in front of the Zone 4 door or do you step in Zone

3 and move to the far wall opposite the observation room and furthest away from the Zone 4 door?

- a. There is no specific place for me. It depends on what the patient has. I have to protect the patient.

15. Would you happen to know if any management from any department is knowledgeable?

- a. No

16. Have you ever mentioned to any management that the door to Zone 4 was open when you entered Zone 3 while transporting a patient?

- a. No

17. Address: [REDACTED]

18. Phone: [REDACTED]

Name: Grace Lam

Name of Employer: Kaiser Permanente

Job title: MRI Lead

Name of Union: SEIU UHW

Union representative present: Mike Taylor

Union contact information: [REDACTED]

Michael.A.Taylor@kp.org

Tech Assistant – MRI

Works in both MRI (Outpatient and inpatient)

How long with Employer: 33 years

Name of direct supervisor: Michelle Grade

What shift do you work on what days? M-F 530am – 2pm

What are your job duties:

Lead the technologies, scanning patients

Have you been trained in the safety hazards of the MRI?

Yes

Who trained you in the safety hazards of the MRI?

Under KP Learn and Healthstream, I also take classes

How often do you work in MRI Room (IN98)?

M-F 530am – 9am

Would you be able to draw arrows for showing Zones 1-4 on this floor map of the MRI Room (IN98)?

(Done)

Can you show me where on the floor map does a patient get transferred from the hospital bed to the MRI table?

In the patient preparation area.

When personnel walks into the hallway door into the patient preparation area while transporting a patient, is the door to Zone 4 normally already propped open?

No.

What are the procedures for checking in a patient? Who stands where? What doors are open? Where is the patient transferred onto the MRI table? Where does the hospital bed stay parked?

Zone 3 where the preparation room is.

Is the Zone 4 door closed while the patient is scanned on the MRI table?

Yes.

I have been told the Zone 4 door has been propped open when some nurses have transported patients in from the hallway. Is this common practice to leave the door to Zone 4 open?

If we are Zone 4 it is open. We do not close the door while we are in Zone 4.

Was there a reason why the door to Zone 4 was left open on February 23, 2023 at 830am, the date and time of the incident?

I had the MRI table inside Zone 4 to prep.

How come the door could not be closed?

The door is in the way because the door opens in.

Could you have left it closed?

Probably I shouldn't have put the table out there, yes.

What do you think could have prevented the incident from occurring?

Not prepare myself. Not prop the table by the door.

How about keeping the door closed?

Yah.

Would you be able to describe to what occurred on February 23, 2023?

I opened the door for her to come in, then I walk into the control room to enter the patient information. As I go in less than a minute I hear screaming.

Do you remember giving directions to the nurse before brining patient in?

Head in first.

Do you remember what else you told her?

No.

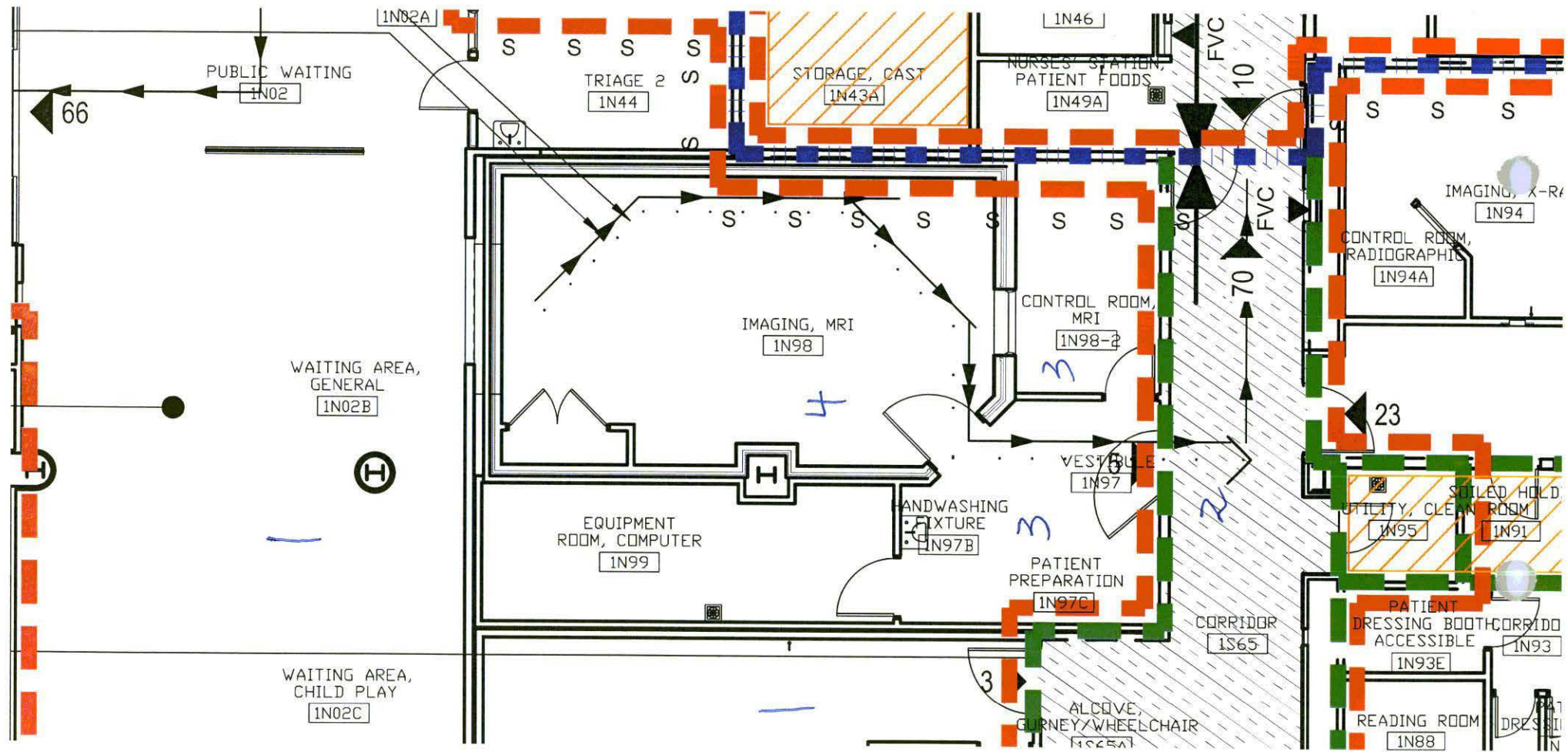
I read the procedures for MRI. It stated the MRI tech would direct people where to go. Normally do you tell the nurses and transport where to go?

I don't. Normally they park in Zone 3.

Address:

Phone number:

COPY



Name: Ron Cook

Name of Employer: Kaiser

Job title:Transport

Name of Union: SEIU UHW

Union representative present:

Union contact information:

How long with Employer: 21 years

Name of direct supervisor: Yvette Acosta Coleman

What shift do you work on what days? 530am – 2pm MF

What are you job duties:

Transporting patients, responding to different codes if a patient falls

Have you been trained in the safety hazards of the MRI?

Yes

Who trained you in the safety hazards of the MRI?

Module. When we go there the tech says what to do.

How often do you transport in MRI Room (IN98)?

Pretty much everyday.

Would you be able to draw arrows for showing Zones 1-4 on this floor map of the MRI Room (IN98)?

Can you show me where on the floor map does a patient gets transferred from the hospital bed to the MRI table?

When we come into the Zone 2 /3 door we go to the left with the bed/gurney/wheelchair. The Zone 4 door technicians have to open up. When they open the door, we would be all the way to the left. The tech would get the MRI table outside of Zone 4 into Zone 3. The MRI table is placed next to the bed and the patient is transferred there.

When personnel walks into the hallway door into the patient preparation area while transporting a patient, is the door to Zone 4 normally already propped open?

No, it's closed.

What are the procedures for checking in a patient? Who stands where? What doors are open? Where is the patient transferred onto the MRI table? Where does the hospital bed stay parked?

When I ring the doorbell, when I come in, the MRI tech or the Imaging Aid Tech they would step into Zone 3 to the right and come out. I would take my bed/wheelchair/gurney to the left.

Is the Zone 4 door closed while the patient is scanned on the MRI table?

Yes.

I have been told the Zone 4 door has been propped open when some nurses have transported patients in from the hallway. Is this common practice to leave the door to Zone 4 open?

No.

So you've never seen it open?

No.

When they are in between patients they clean the MRI table and bring it out to Zone 3. They try to have it done before we get there.

Was there a reason why the door to Zone 4 was left open on February 23, 2023 at 830am, the date and time of the incident?

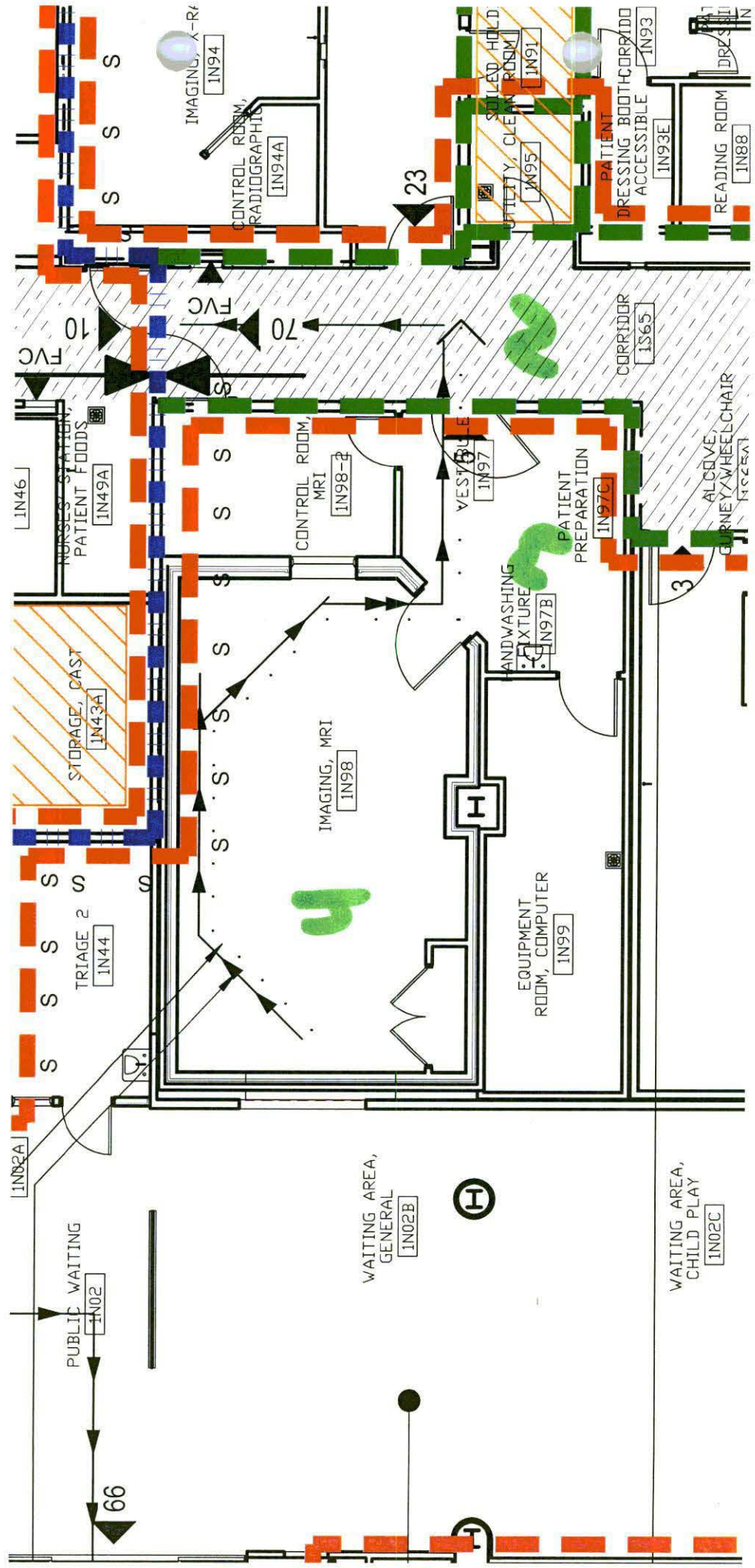
I wasn't here that day.

What do you think could have prevented the incident from occurring?

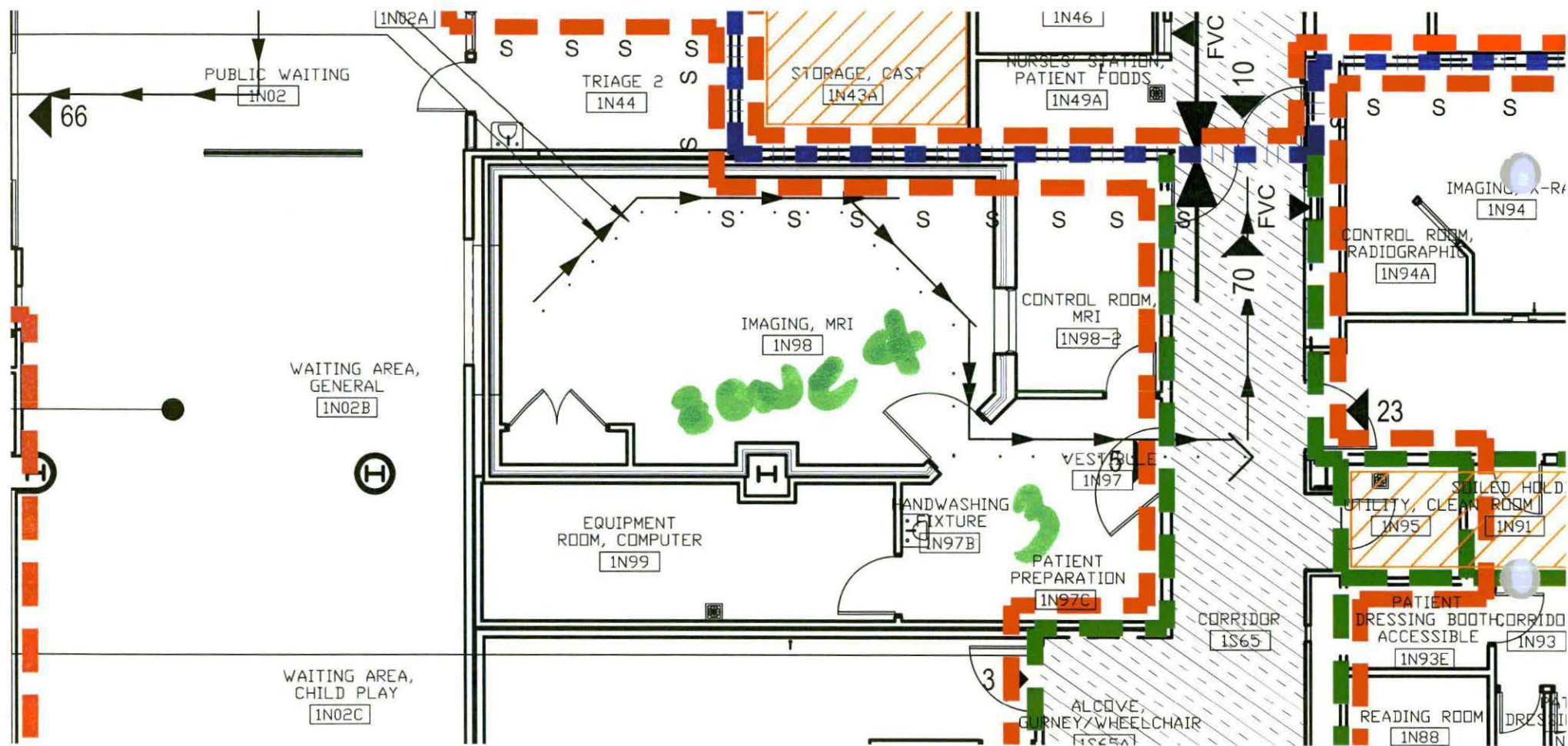
The door closed.

COPY

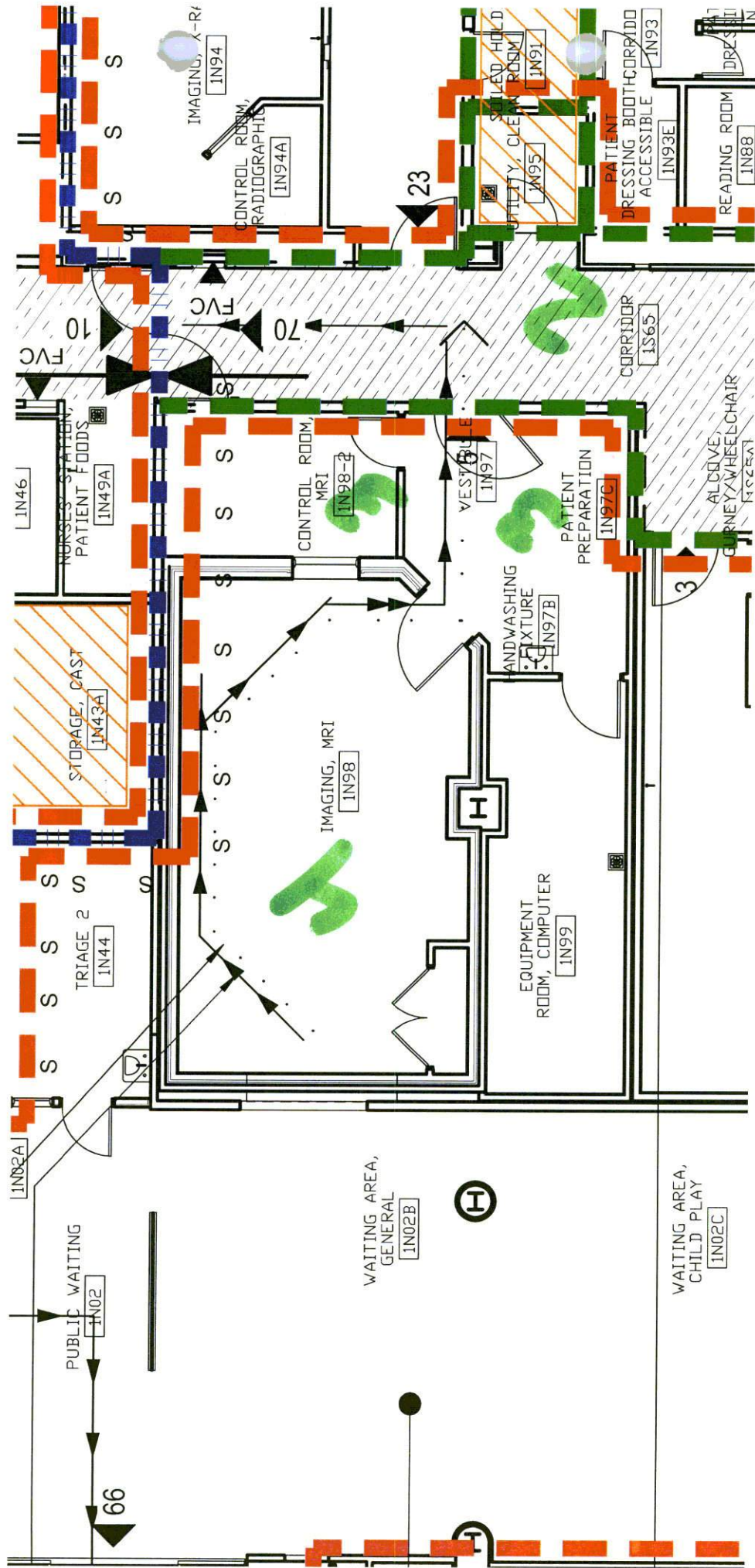
22



COPY



ER



Name: Michelle Grade

Name of Employer: Kaiser Permanente

Name of Direct Supervisor: Madeline Papica

Are you part of a Union? No

Job title: Imaging Services Director

Work hours: M-F 8am – 5pm

Do you provide training on the hazards of the MRI here in Kaiser RWC?

Yes.

How often do you walk into the MRI Room (1N98) to check on how things are going?

Almost daily. 1-3 times a day.

I have a floor map here of MRI Room (1N98). Would you be able to draw arrows to show me where Zones 1-4 are?

Outside of the department is Zone 1

What is the mandated practice in MRI Room (1N98) in terms of transferring a patient from a hospital bed to an MRI table? Does that occur in the patient preparation room?

In Zone 3. Patient preparation area.

Is the door to Zone 4 mandated to be closed at all times other than transporting a patient inside and outside of Zone 4?

Except when there is an employee in the room taking care of the patient. Room is Zone 4.

Has anyone expressed any concerns to you about the door to Zone 4 being left propped open when they enter from the hallway (Zone2) to the patient preparation room (Zone3) and they are transporting a patient?

No one has ever expressed that concern to me.

For incident that occurred on February 23, 2023, at 830am, was there a reason why the door to Zone 4 was propped open and not shut?

I cannot answer that question. It should have been closed.

Is it common practice to prop the door open to Zone 4 when a patient is expected to arrive?

I have never seen the door to Zone 4 propped open when they are waiting for someone to come in.

Do you know if there were any disciplinary actions taken for the incident that occurred on February 23, 2023 at 830am?

Currently that is pending.

Present:

Michelle Grade

Umer Murtaza

Maddy Papica

Lola Barnes

Tolentino, Geraldine@DIR

From: Shari A Samuels <Shari.A.Samuels@kp.org>
Sent: Wednesday, August 2, 2023 12:54 PM
To: Tolentino, Geraldine@DIR
Subject: Accepted: Kaiser Permanente Redwood City Closing Conference

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Tolentino, Geraldine@DIR

From: John Fannin <John.X.Fannin@kp.org>
Sent: Wednesday, August 2, 2023 2:52 PM
To: Tolentino, Geraldine@DIR
Subject: Accepted: Kaiser Permanente Redwood City Closing Conference

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Tolentino, Geraldine@DIR

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Wednesday, August 2, 2023 12:50 PM
To: Tolentino, Geraldine@DIR
Subject: Accepted: Kaiser Permanente Redwood City Closing Conference

CAUTION: [External Email]

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Tolentino, Geraldine@DIR

From: Jelissa J Cummings <Jelissa.M.Walker@kp.org>
Sent: Wednesday, August 2, 2023 2:19 PM
To: Tolentino, Geraldine@DIR
Subject: Tentative: Kaiser Permanente Redwood City Closing Conference

CAUTION: [External Email]

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Tolentino, Geraldine@DIR

From: Josephine Jorge-reyes <Josephine.J.Reyes@kp.org>
Sent: Wednesday, August 2, 2023 12:49 PM
To: Tolentino, Geraldine@DIR
Subject: Accepted: Kaiser Permanente Redwood City Closing Conference

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Tolentino, Geraldine@DIR

From: Dorothy W Totah <Dorothy.Totah@kp.org>
Sent: Wednesday, August 2, 2023 1:09 PM
To: Tolentino, Geraldine@DIR
Subject: Accepted: Kaiser Permanente Redwood City Closing Conference

CAUTION: [External Email]

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ER SUBMITTALS

Tolentino, Geraldine@DIR

From: Tolentino, Geraldine@DIR
Sent: Friday, April 7, 2023 4:02 PM
To: AFuerst@CalNurses.Org
Subject: RE: Cal OSHA Inspection Kaiser RWC

Importance: High

Hi Avery,

I don't know if you have contacted the injured employee. I will contact the employee and would like to know what your availability is to sit in on the interview.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

From: Tolentino, Geraldine@DIR
Sent: Thursday, March 23, 2023 4:36 PM
To: AFuerst@CalNurses.Org
Subject: Cal OSHA Inspection Kaiser RWC

Hi Avery,

I currently have an inspection at Kaiser RWC involving a Nurse injury with an MRI. The nurse's name is Ainah Cervantes.

Are you familiar with the incident? I would like to schedule an interview with her. Kaiser RWC provided me with your email address as her Union Representative. Should I contact her and ask her for her email address so we can coordinate a date/time convenient for all of us?

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement

Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

Tolentino, Geraldine@DIR

From: Tolentino, Geraldine@DIR
Sent: Wednesday, April 12, 2023 3:51 PM
To: Umer Murtaza
Subject: RE: Cal OSHA Employer Interviews

Hi Umer,

Absolutely. This is my availability of the week of the 24th.

Monday: 9am – 3pm
Tuesday: 9am – 3pm
Wednesday: 9am – 3pm
Thursday: 9am – 3pm

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Wednesday, April 12, 2023 3:47 PM
To: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Subject: Re: Cal OSHA Employer Interviews

CAUTION: [External Email]

This email originated from outside of our DIR organization. Do not click links or open attachments unless you recognize the sender and know the content is expected and is safe. If in doubt reach out and check with the sender by phone.

Hello Geraldine.

I am off next week Thursday and Friday due to a religious holiday . Is it OK with if we can schedule this the following week? The week of 24th?

I apologize about any inconvenience this regard.

Get [Outlook for iOS](#)

From: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>

Sent: Wednesday, April 12, 2023 3:40:44 PM

To: Umer Murtaza <Umer.X.Murtaza@kp.org>

Subject: Cal OSHA Employer Interviews

Caution: This email came from outside Kaiser Permanente. Do not open attachments or click on links if you do not recognize the sender.

Hi Umer,

I would like the set up in person interviews with Grace Lam, Leitchia Gomez, and Erika Rodriguez along with their respective Union representatives. What is the best way to do this?

I am free next week:

Monday: 9am – 3pm

Tuesday: 9am – 12noon

Thursday: 9am – 3pm

Friday: 11am – 3pm

We do not have to have all interviews on the same day, we can do one each day or two on one day and one on the other. I am open to what works.

I would also like to request documentation of any near misses with the MRI withing the past three years. I would also like to interview the Imaging Services Director.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

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Tolentino, Geraldine@DIR

From: Tolentino, Geraldine@DIR
Sent: Wednesday, April 12, 2023 3:41 PM
To: Umer Murtaza
Subject: Cal OSHA Employer Interviews

Hi Umer,

I would like the set up in person interviews with Grace Lam, Leitchia Gomez, and Erika Rodriguez along with their respective Union representatives. What is the best way to do this?

I am free next week:

Monday: 9am – 3pm
Tuesday: 9am – 12noon
Thursday: 9am – 3pm
Friday: 11am – 3pm

We do not have to have all interviews on the same day, we can do one each day or two on one day and one on the other. I am open to what works.

I would also like to request documentation of any near misses with the MRI withing the past three years. I would also like to interview the Imaging Services Director.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

Tolentino, Geraldine@DIR

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Wednesday, April 19, 2023 10:15 AM
To: Tolentino, Geraldine@DIR
Subject: Re: Cal OSHA Employer Interviews

CAUTION: [External Email]

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Hello Geraldine,

Happy Thursday.

Just wanted to confirm our meeting for the next week, Monday (04/24/2023) from 10-2pm. Please let me know if any other help is required from my end.

Michele Grade (Radiology Director), 10am-11am
Letichia Gomez, 11a-12p with (Ron Cook, Shop Steward)
Grace Lam, 12-1p with (Mike Taylor, Shop Steward)
Erika, 1-2pm with (Ron Cook, Shop Steward)

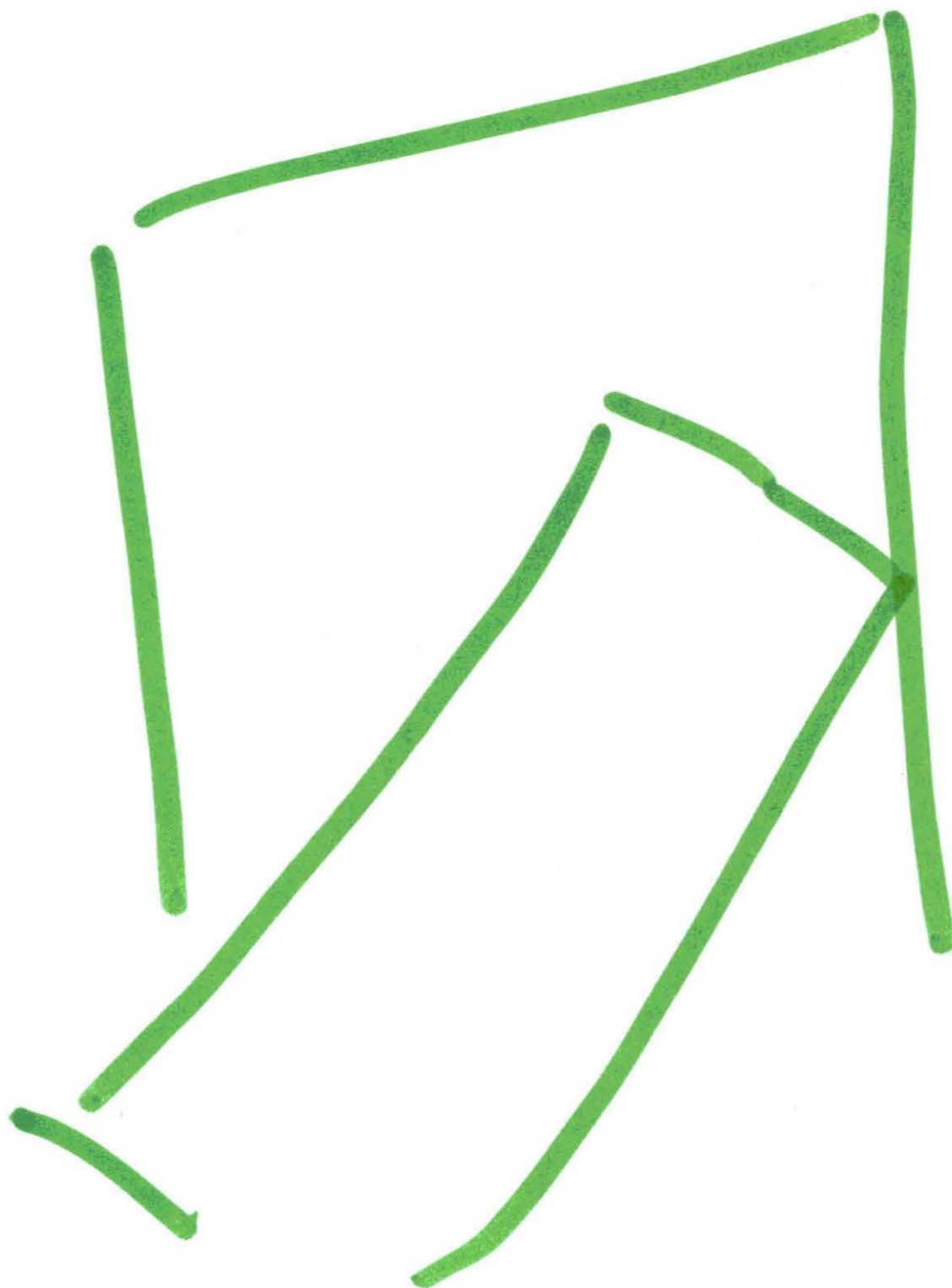
I will be welcoming you at the hospital lobby at 10am.

Umer Murtaza, MS (EOHS), HEM
Safety Operations Practice Leader
Redwood City Medical Center
Kaiser Permanente Northern California
Mobile: (650)-269-8648
Work: (650)-299-3269
SharePoint: [RWC-WPS](#)
Keep Safety in mind, focus on one day at a time.
Safety Everywhere, Everyone, Every time!

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Monday, April 17, 2023 3:03 PM
To: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Subject: Re: Cal OSHA Employer Interviews

Hello Geraldine,

Please find the requested information below:



Tolentino, Geraldine@DIR

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Monday, July 3, 2023 9:38 AM
To: Tolentino, Geraldine@DIR
Subject: Re: Document Request
Attachments: MRI Checklist for Transporters.pdf

CAUTION: [External Email]

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File #1

Umer Murtaza, MS (EOHS), HEM
Safety Operations Practice Leader
Redwood City Medical Center
Kaiser Permanente Northern California
Mobile: (650)-269-8648
Work: (650)-299-3269
SharePoint: [RWC-WPS](#)
Keep Safety in mind, focus on one day at a time.
Safety Everywhere, Everyone, Every time!

From: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Sent: Monday, July 3, 2023 9:17 AM
To: Umer Murtaza <Umer.X.Murtaza@kp.org>
Subject: RE: Document Request

Hi Umer,

Yes, one file at a time should be able to work.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Monday, July 3, 2023 9:16 AM
To: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Subject: Re: Document Request

CAUTION: [External Email]

This email originated from outside of our DIR organization. Do not click links or open attachments unless you recognize the sender and know the content is expected and is safe. If in doubt reach out and check with the sender by phone.

Hello Geraldine,

I have tried multiple times but due to the file load it's unable to transfer to your email address. I will try sending one file at a time. Does that work for you?

Umer Murtaza, MS (EOHS), HEM
Safety Operations Practice Leader
Redwood City Medical Center
Kaiser Permanente Northern California
Mobile: (650)-269-8648
Work: (650)-299-3269
SharePoint: [RWC-WPS](#)
Keep Safety in mind, focus on one day at a time.
Safety Everywhere, Everyone, Every time!

From: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Sent: Monday, July 3, 2023 8:50 AM
To: Umer Murtaza <Umer.X.Murtaza@kp.org>
Subject: RE: Document Request

Hi Umer,

I am unable to open the attachment. This is what I have.

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812



Pick an account

Selected user account does not exist
'Kaiser Permanente' and cannot access
application '00000003-0000-Off1-ce
000000000000' in that tenant. The user
be added as an external user in the
Please use a different account.



Tolentino, Geraldine@DIR
GTolentino@dir.ca.gov
Connected to Windows



Use another account

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Tuesday, June 27, 2023 11:15 PM
To: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Subject: Re: Document Request

CAUTION: [External Email]

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Hello Geraldine,

Please find the attached training content for patient transportation.. The attached files include Level 1 and Level 2 trainings and MRI transport checklist.

I hope you are enjoying your time off.

Thank you

 [RE CAL-OSHA Doc Request - ICU KP Learn Module \(1\).zip](#)

Umer Murtaza, MS (EOHS), HEM
Safety Operations Practice Leader
Redwood City Medical Center
Kaiser Permanente Northern California
Mobile: (650)-269-8648
Work: (650)-299-3269
SharePoint: [RWC-WPS](#)
Keep Safety in mind, focus on one day at a time.
Safety Everywhere, Everyone, Every time!

From: Tolentino, Geraldine@DIR <GTolentino@dir.ca.gov>
Sent: Friday, June 16, 2023 3:17 PM
To: Umer Murtaza <Umer.X.Murtaza@kp.org>
Subject: Document Request

Caution: This email came from outside Kaiser Permanente. Do not open attachments or click on links if you do not recognize the sender.

Hi Umer,

The employee interviews went well. Thank you for coordinating those.

I would like to request a copy of the training modules transporting patients to the MRI dated before February 23, 2023.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

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Transporter (Print Name): _____

Date: _____

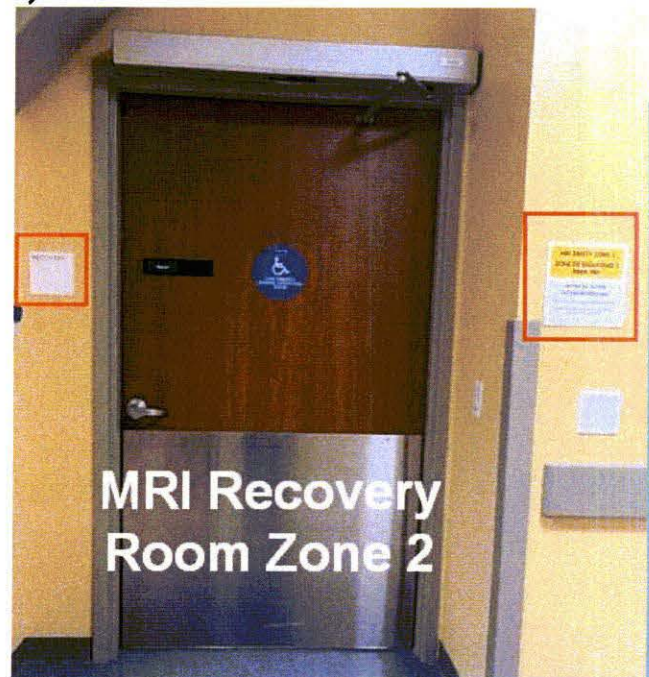
Patient Room #:: _____

MRI CHECKLIST FOR TRANSPORTERS

- ☐ **Confirm** pick up time with patient's nurse
- ☐ Nurse Leader will ask if you:
 - Completed MRI Safety Training on KPLearn
 - Attended MRI Department Orientation
- ☐ Transport the patient using either (check one):
 - ☐ MRI Gurney
 - ☐ MRI Wheelchair
 - ☐ Non-MRI equipment (pt will be transferred to MRI compatible equipment in MRI zone 2 Recovery Room)
- ☐ Upon confirmation, transport patient to **MRI Zone 2 Recovery Room** (Do **NOT** go to MRI Zone 3)



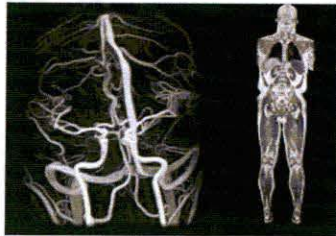
- ☐ Call x**7818** and notify MRI staff of patient's arrival



MRI Safety Level 1

1. Home

1.1 Home



MRI Safety Training – Level 1

- Introduction
- MRI Safety Zones
- MRI Personnel
- Injury Prevention

Click **Next** to begin.



Estimated completion time: 30 minutes

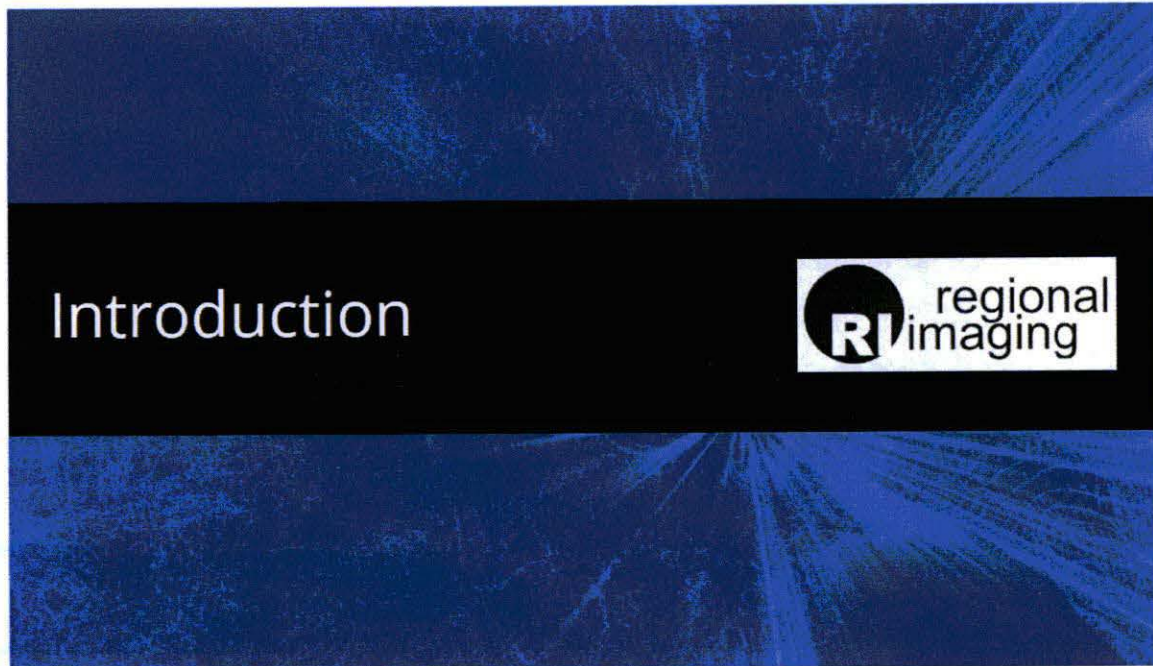
Notes:

1-1

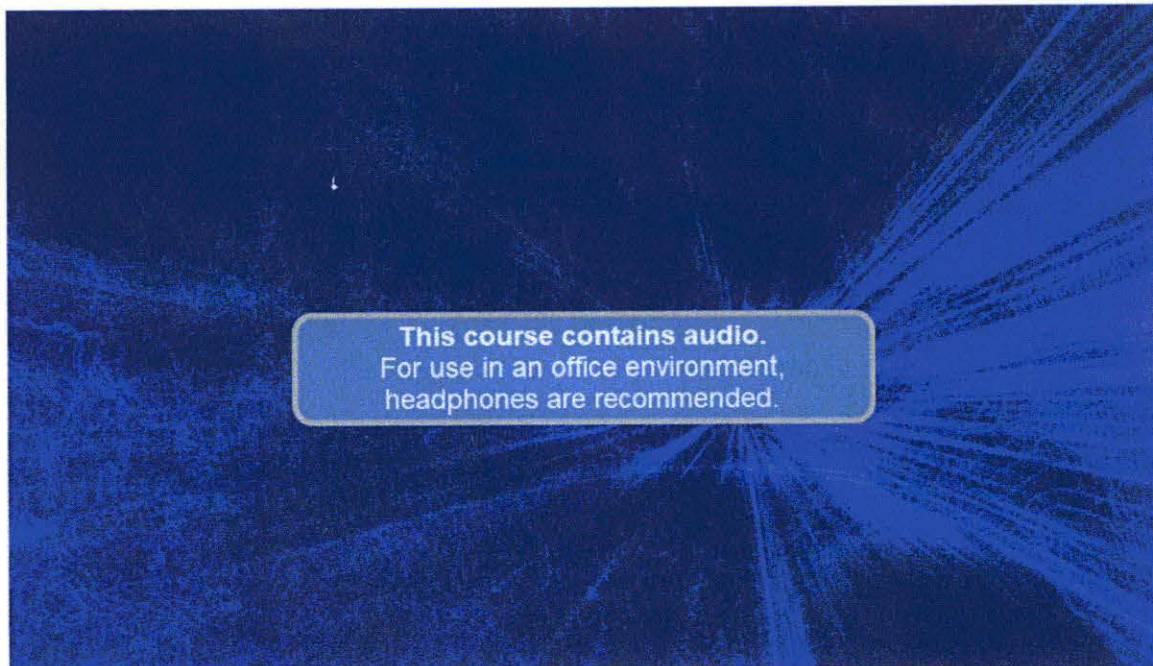
Audio: Welcome to the Northern California MRI safety training, which provides education and support to help you work safely within the magnetic resonance imaging (MRI) environment.

2. Introduction

2.1 Introduction



2.2 Audio Notice



Notes:

2-2

Audio: [Use standard boilerplate audio instructions.]

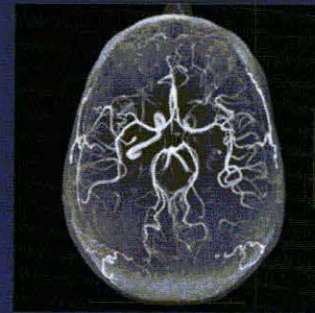
2.3 Learning Objectives

Learning Objectives

Slide 3 of 43

When you complete this training, you'll be able to do the following:

- Explain the concept of the four MRI safety zones and the progressive and specific restrictions for each zone.
- Perform your MRI responsibilities consistent with your level of training (Level 1 or Level 2).
- Take appropriate action in an MRI emergency or a patient distress (Code Blue) situation.
- Follow the important safety guidelines for working in the vicinity of the MRI scanner.
- Obtain additional information and support about MRI safety.



Notes:

2-3

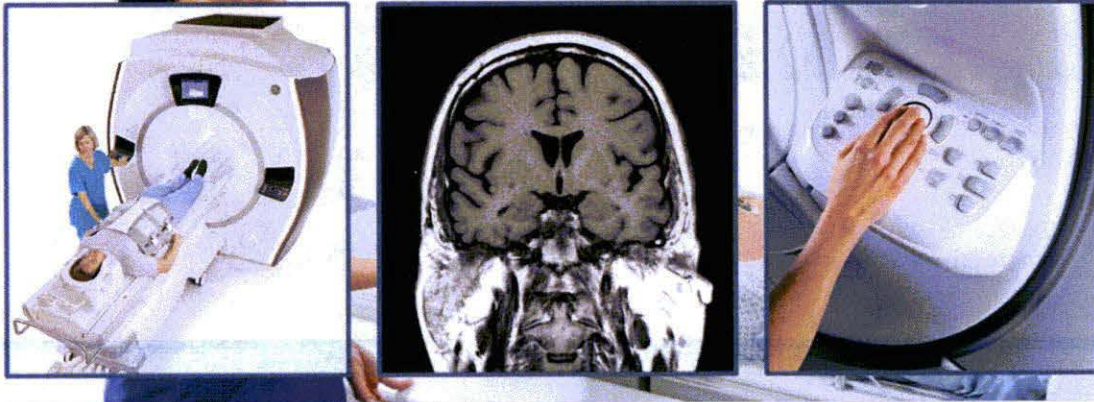
Audio: Take a few minutes to review the course objectives.

2.4 Magnetic Resonance Imaging (MRI)

Magnetic Resonance Imaging (MRI)

Slide 4 of 43

If you're working in the vicinity of the MRI scanner, it's important to know how to work safely to prevent injury to yourself and others.

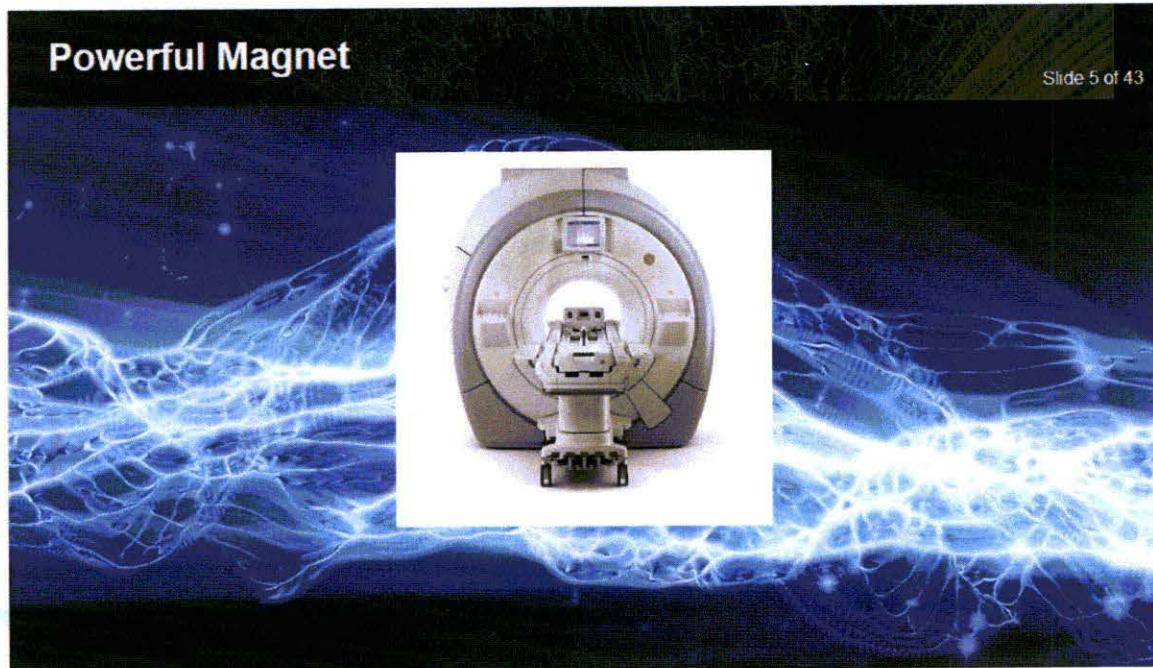


Notes:

2-4

Audio: In this course, we focus on the MRI scanner, which is a valuable diagnostic tool in the hands of a medical professional, but it needs to be treated with respect.

2.5 Powerful Magnet



Notes:

2-5

Audio: The MRI Scanner exerts a powerful magnetic field over the MRI unit and surrounding area.

2.6 The Magnet Is Always On

The Magnet Is Always On

Slide 6 of 43

“The magnet is always on!”



Notes:

2-6

Audio: During this course, you'll often hear these words: The magnet is always on. . . . There's a good reason why

2.7 Always Remember

Always Remember

Slide 7 of 43

If you remember nothing else about this course,
remember these words...

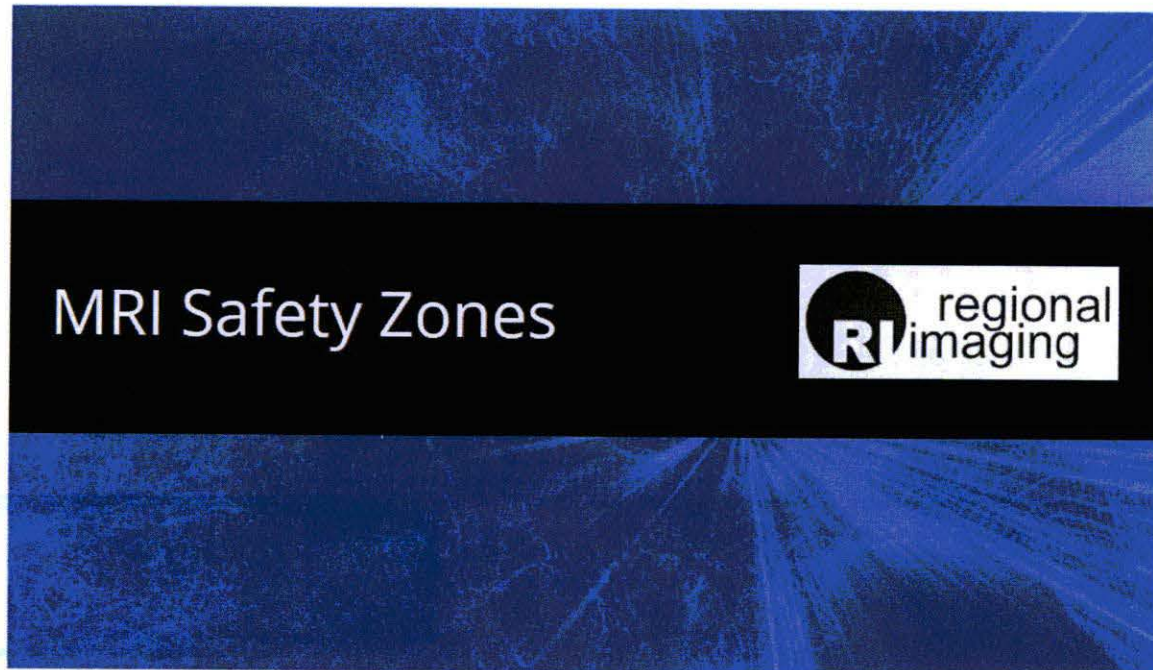


Notes:

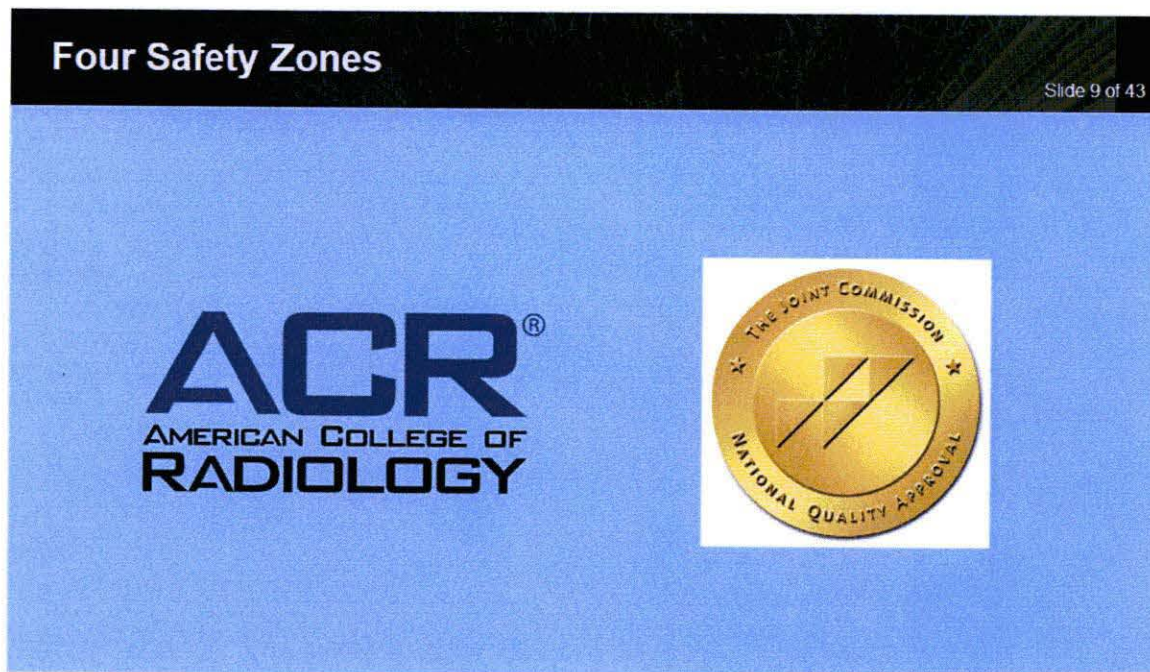
Audio: You'll want to keep these words in mind whenever you enter the MRI suite.

3. MRI Safety Zones

3.1 MRI Safety Zones



3.2 Four Safety Zones

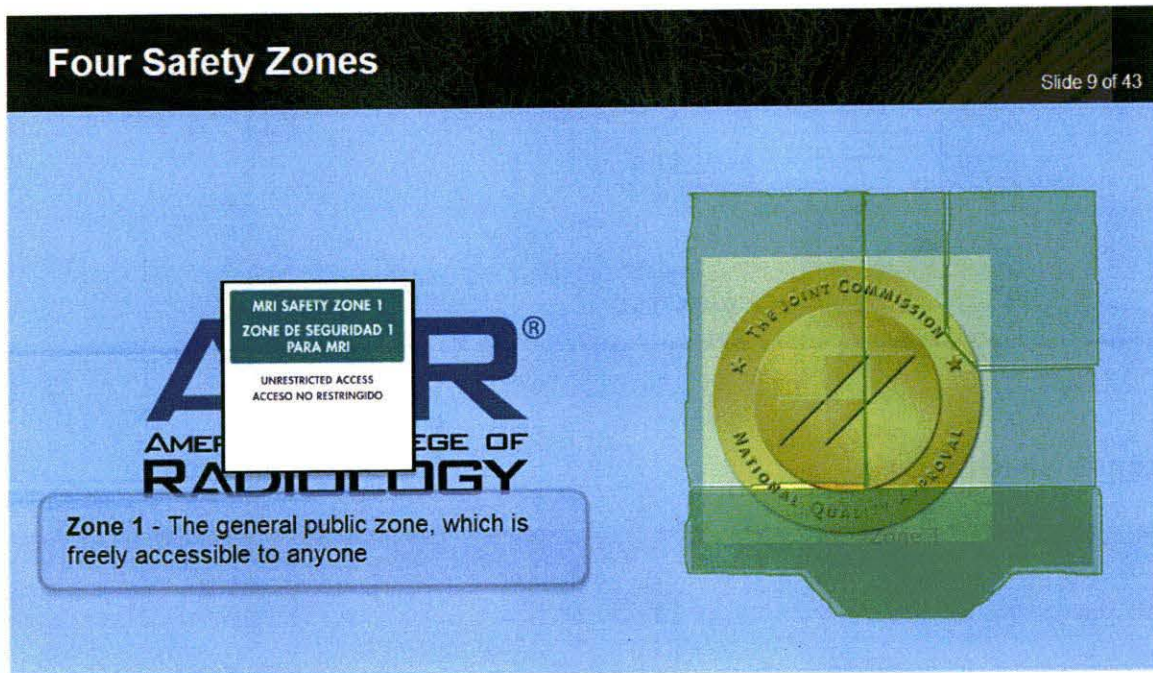


Notes:

3-2

Audio: To provide strict guidance on access to the MRI environment, the American College of Radiology and The Joint Commission have implemented the Four Zone concept.

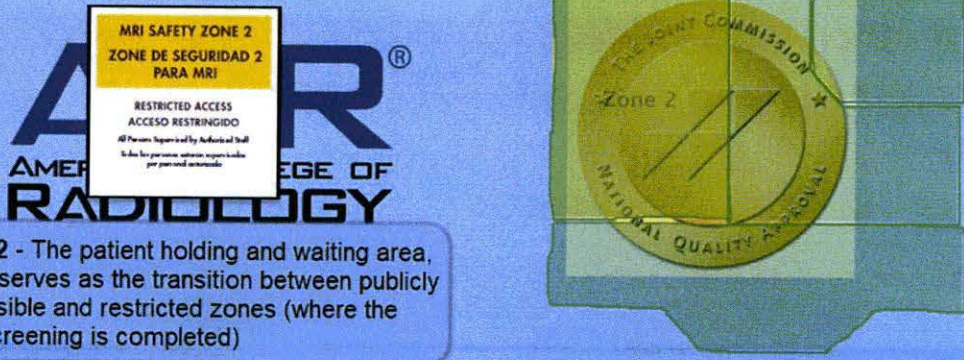
zone1 (Slide Layer)



zone2 (Slide Layer)

Four Safety Zones

Slide 9 of 43



The image shows a yellow sign for MRI Safety Zone 2 and a corresponding diagram. The sign is rectangular with a yellow background and black text. It reads: "MRI SAFETY ZONE 2", "ZONE DE SEGURIDAD 2 PARA MRI", "RESTRICTED ACCESS", "ACCESO RESTRINGIDO", and "All Persons Supervised by Authorized Staff". The diagram shows a cross-section of an MRI suite with a yellow circular area labeled "Zone 2" in the center. The circular area is divided into four quadrants by a vertical and a horizontal line. The text "THE JOINT COMMISSION" is at the top and "NATIONAL QUALITY APPROVAL" is at the bottom of the circle. The background of the diagram is a light blue grid.

Zone 2 - The patient holding and waiting area, which serves as the transition between publicly accessible and restricted zones (where the first screening is completed)

zone3 (Slide Layer)

Four Safety Zones

Slide 9 of 43



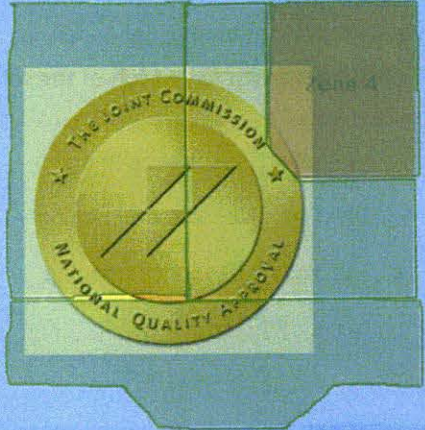
The image shows an orange sign for MRI Safety Zone 3 and a corresponding diagram. The sign is rectangular with an orange background and black text. It reads: "MRI SAFETY ZONE 3", "ZONE DE SEGURIDAD 3 PARA MRI", "RESTRICTED ACCESS", "ACCESO RESTRINGIDO", and "All Persons and Objects must be screened and accepted by MRI Authorized Staff". The diagram shows a cross-section of an MRI suite with an orange circular area labeled "Zone 3" in the center. The circular area is divided into four quadrants by a vertical and a horizontal line. The text "THE JOINT COMMISSION" is at the top and "NATIONAL QUALITY APPROVAL" is at the bottom of the circle. The background of the diagram is a light blue grid.

Zone 3 - The second screening area, where all persons are screened a second time, educated on magnet safety, and approved before they're allowed to enter the MRI scanning room (Zone 4)

zone4 (Slide Layer)

Four Safety Zones

Slide 9 of 43



Zone 4 - The MRI exam suite, where the MRI unit emits a **strong magnetic field** and where all persons are **accompanied** by specially trained (Level 2) MRI personnel for the safety of all individuals entering Zone 4

Error (Slide Layer)

Four Safety Zones

Slide 9 of 43

Click each zone on the floor diagram.



3.3 Knowledge Check

(Multiple Choice, 0 points, 1 attempt permitted)

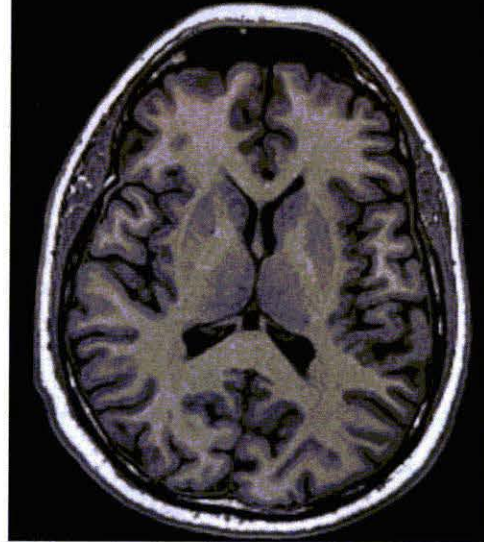
Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

MRI is an acronym for which of the following:

- ☐ Magnified Resonance Imaging
- ☐ Maximum Resonance Imaging
- ☒ Magnetic Resonance Imaging
- ☐ None of the above



Correct	Choice
	Magnified Resonance Imaging
	Maximum Resonance Imaging
X	Magnetic Resonance Imaging
	None of the above

Feedback when correct:

Congratulations. The correct answer is Magnetic Resonance Imaging.

Feedback when incorrect:

That's incorrect. The correct answer is Magnetic Resonance Imaging.

Notes:

Audio: Before we proceed, let's do a quick knowledge check.

Correct (Slide Layer)

Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

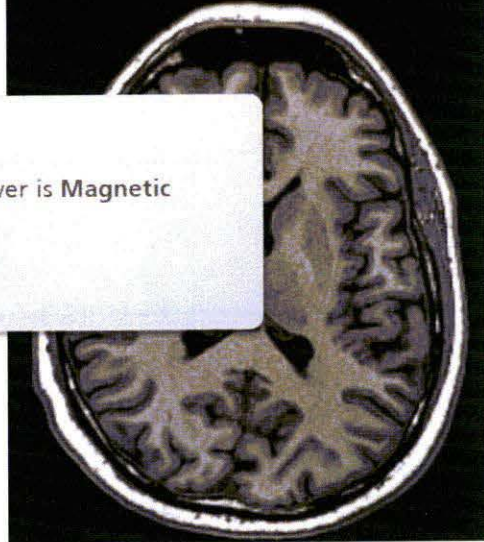
MRI is an acronym for which of the following:

- ☐ Magnified
- ☐ Maximum
- ☒ Magnetic
- ☐ None of the

Correct

Congratulations. The correct answer is **Magnetic Resonance Imaging**.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

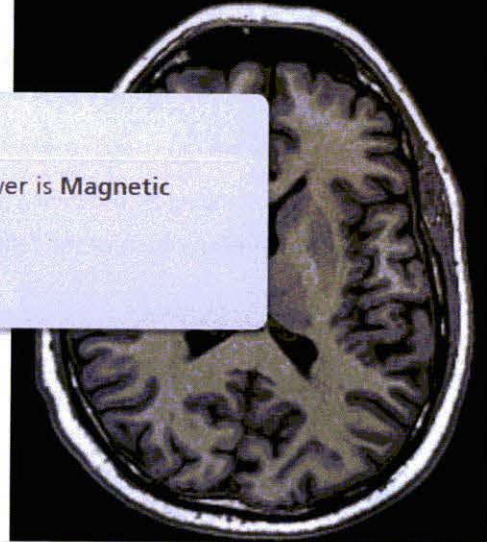
MRI is an acronym for which of the following:

- ☐ Magnified
- ☐ Maximum
- ☒ Magnetic
- ☐ None of the

Incorrect

That's incorrect. The correct answer is **Magnetic Resonance Imaging**.

Continue



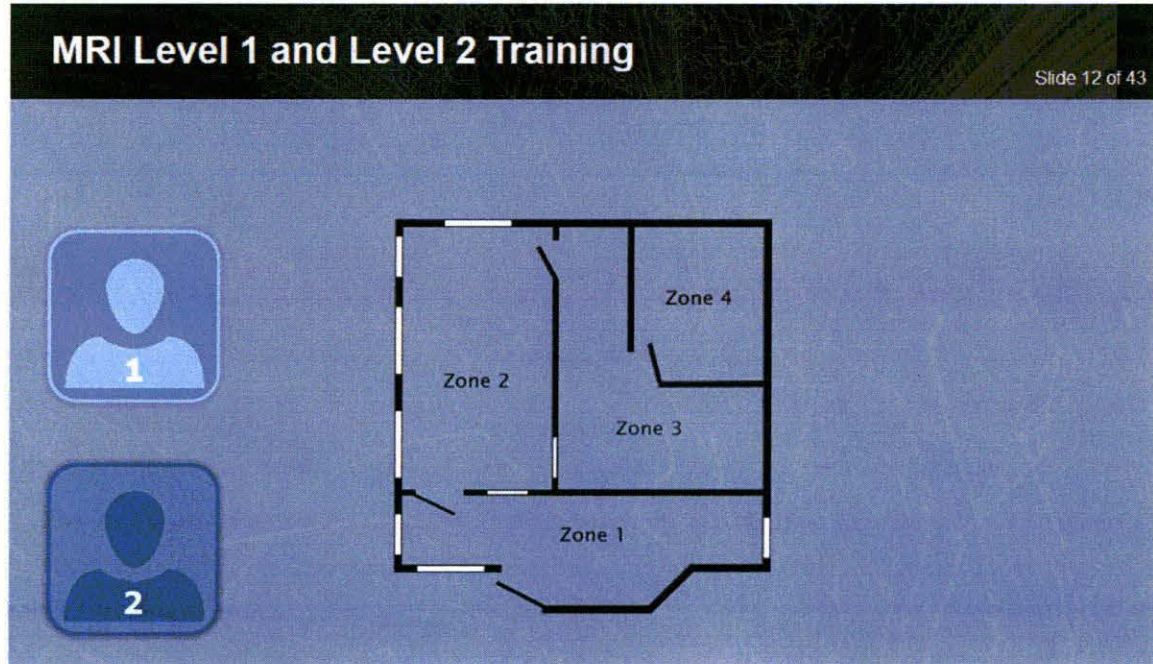
4. MRI Personnel

4.1 MRI Personnel

MRI Personnel



4.2 MRI Level 1 and Level 2 Training



Notes:

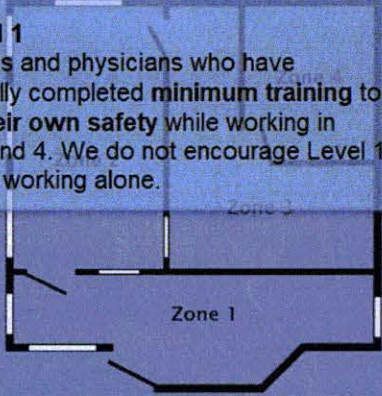
Audio: Access to the four MRI safety zones depends on whether you have completed safety training to earn either MRI Level 1 or Level 2 status.

Untitled Layer 1 (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43

MRI Level 1
Employees and physicians who have successfully completed **minimum training** to ensure **their own safety** while working in Zones 3 and 4. We do not encourage Level 1 personnel working alone.



The diagram shows a floor plan with four zones. Zone 1 is a large central area. Zone 2 is a smaller area to the left of Zone 1. Zone 3 is a narrow corridor above Zone 1. Zone 4 is a small room to the right of Zone 1. A person icon labeled '1' is shown next to the Level 1 text, and a person icon labeled '2' is shown next to the Level 2 text.

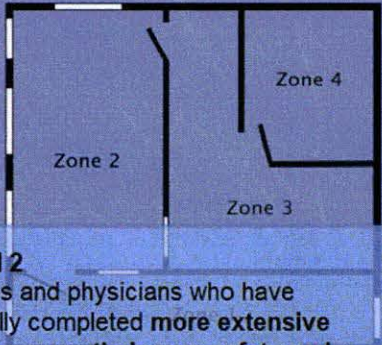


Untitled Layer 2 (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43

MRI Level 2
Employees and physicians who have successfully completed **more extensive training** to ensure **their own safety and the safety of others** in Zones 3 and 4



The diagram shows a floor plan with four zones. Zone 1 is a large central area. Zone 2 is a smaller area to the left of Zone 1. Zone 3 is a narrow corridor above Zone 1. Zone 4 is a small room to the right of Zone 1. A person icon labeled '1' is shown next to the Level 1 text, and a person icon labeled '2' is shown next to the Level 2 text.

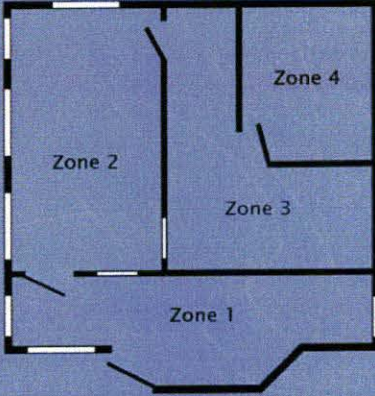


Error (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43

Click both icons below.



4.3 MRI Level 1 Personnel

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



Notes:

No audio

Untitled Layer 1 (Slide Layer)

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



Level 1: Activities and responsibilities

- Allowed unsupervised access throughout Zones 1-4 as long as they are not accompanying non-MR personnel
- Explicitly permitted to be responsible for accompanying non-MRI personnel into and throughout Zone 3, **but not Zone 4**
- Not permitted to directly admit, or be designated responsible for, non-MRI personnel or patients in Zone 4

Error (Slide Layer)

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



4.4 MRI Level 2 Personnel

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



Notes:

No audio

Untitled Layer 1 (Slide Layer)

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



Level 2: Activities and responsibilities

- Required to accompany and monitor non-MRI personnel who are under his or her immediate supervision with visual or verbal contact during their entire time within Zones 3 and 4
- Not allowed to authorize a Level 2 MRI technologist to relinquish his or her responsibility to supervise non-MRI personnel within Zones 3 or 4 unless such supervision has been formally transferred to another Level 2 MRI technologist
- Must screen all equipment and every individual who enters MRI Zone 4 (every time, all the time)

The Level 2 technologist and radiologist have the highest authority.

Error (Slide Layer)

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



4.5 Non-MRI Personnel

Non-MRI Personnel

Slide 15 of 43



Notes:

4-5

Audio: Staff members with MRI Level 1 or Level 2 status have different responsibilities with regard to non-MRI personnel.

1 (Slide Layer)

Non-MRI Personnel

Slide 15 of 43

May I accompany my husband into the exam room?

Zone 2

Zone 1

Unaccompanied access to Zones 1 and 2 is permitted.

2 (Slide Layer)

Non-MRI Personnel

Slide 15 of 43

Can my wife be with me in the MRI scanning room?

Unaccompanied access to Zones 3 and 4 is not permitted. Level 2 personnel must first perform an MRI screening of all individuals before they are permitted supervised access to Zone 3 or Zone 4.

Error (Slide Layer)

Non-MRI Personnel

Slide 15 of 43

Click the figures below to reveal how requests from non-MRI personnel are handled.

4.6 Knowledge Check

(Multiple Choice, 0 points, 2 attempts permitted)

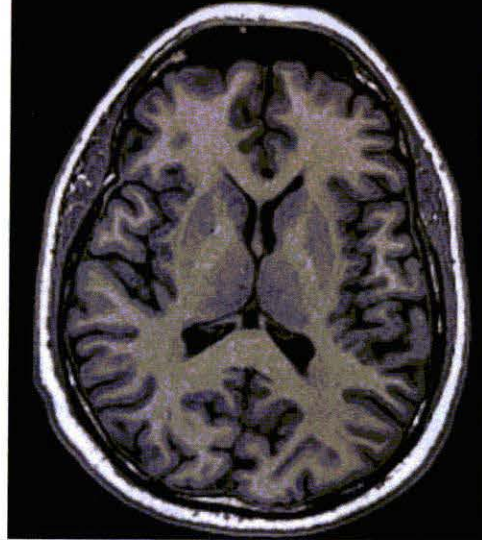
Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above



Correct	Choice
X	Zones 1 and 2
	Zones 2 and 3
	Zones 3 and 4
	None of the above

Feedback when correct:

Congratulations. The correct answer is Zones 1 and 2.

Feedback when incorrect:

That's incorrect. The correct answer is Zones 1 and 2.

Correct (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

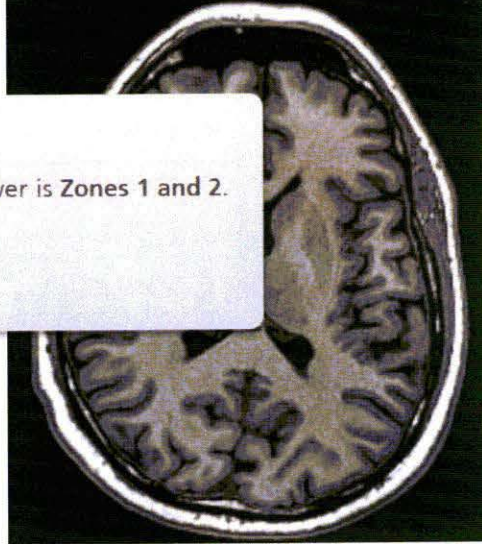
Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Correct

Congratulations. The correct answer is Zones 1 and 2.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

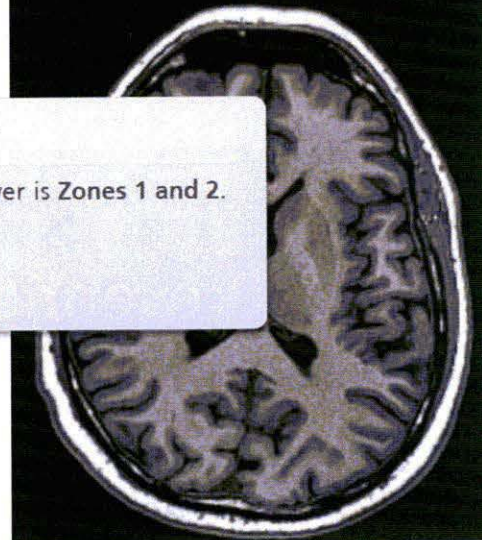
Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Incorrect

That's incorrect. The correct answer is Zones 1 and 2.

Continue



Try Again (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

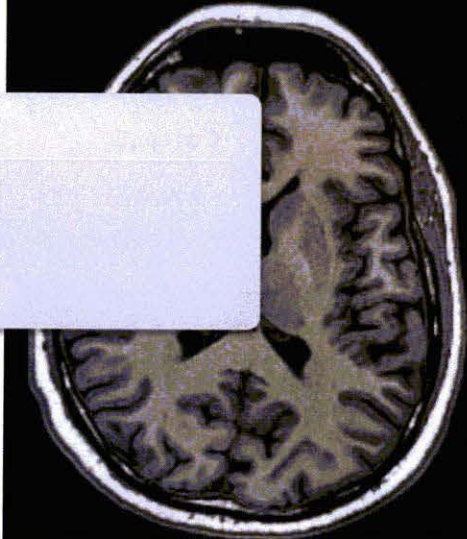
Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Incorrect

That is incorrect. Please try again.

Try Again



5. Injury Prevention

5.1 Injury Prevention

Injury Prevention

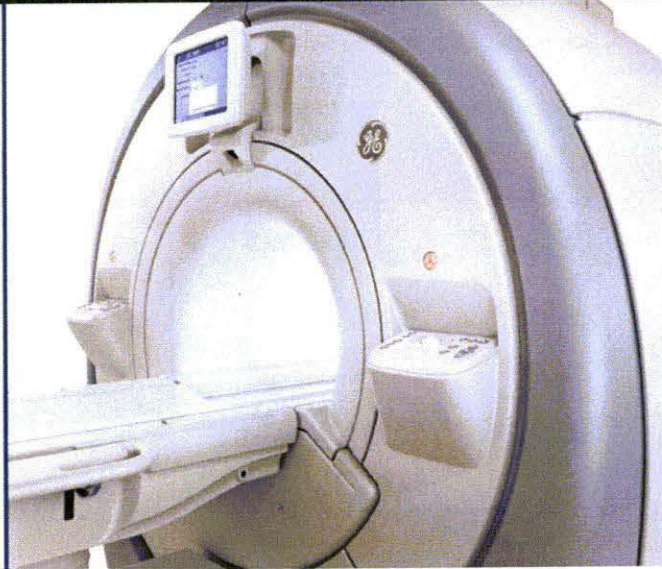


5.2 MRI-Related Incidents

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



Notes:

5-2

Audio: MRI-related accidents can and do happen. You need to take precautions to prevent injuries and other dangerous incidents.

60 man (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



A 60-year-old man sustained fractures to his face when an oxygen canister became wedged in the machine, pressing against his head.

Police (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



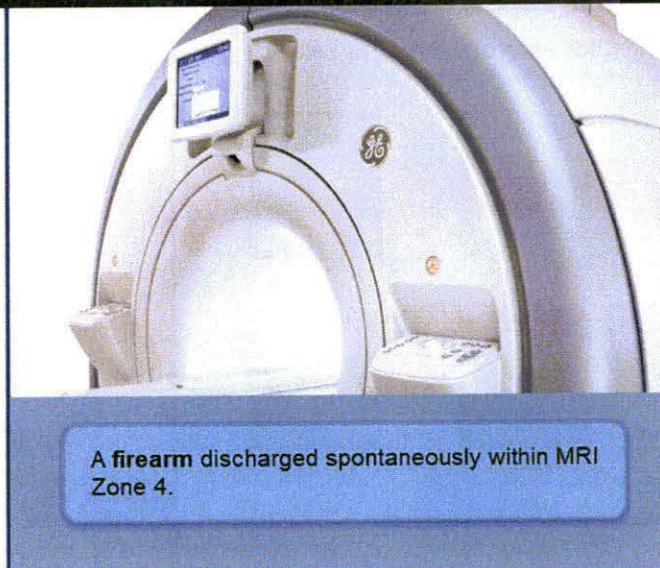
A police officer had her service gun wrenched from her hand while responding to a burglary in the medical center.

Firearm (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



Gurney (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



Error (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



5.3 Potential MRI Injuries

Potential MRI Injuries

Slide 19 of 43



Notes:

5-3

Audio: When the MRI guidelines are ignored, injuries may result. In some cases, these injuries can be serious.

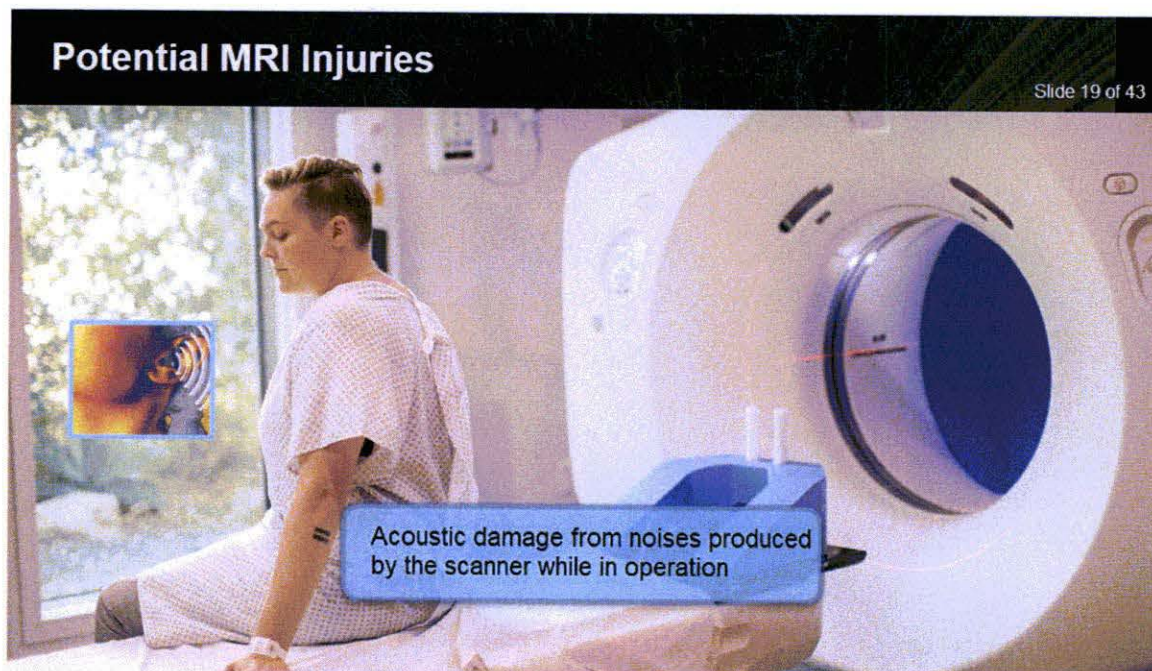
Pacemaker-Heart (Slide Layer)



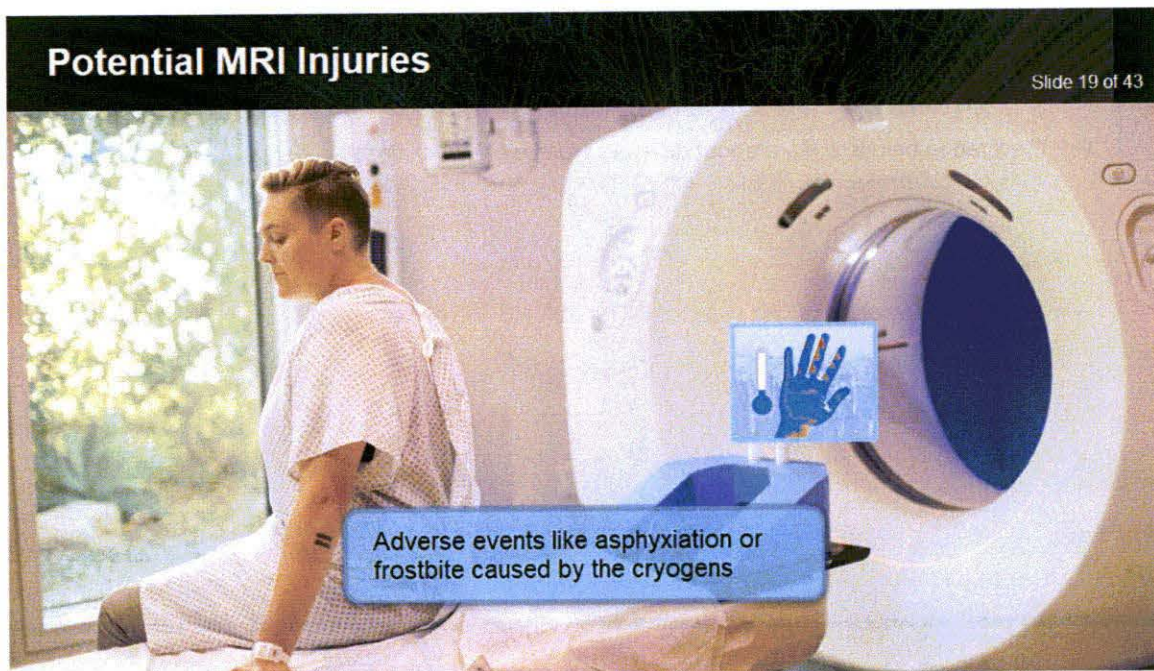
Burn (Slide Layer)



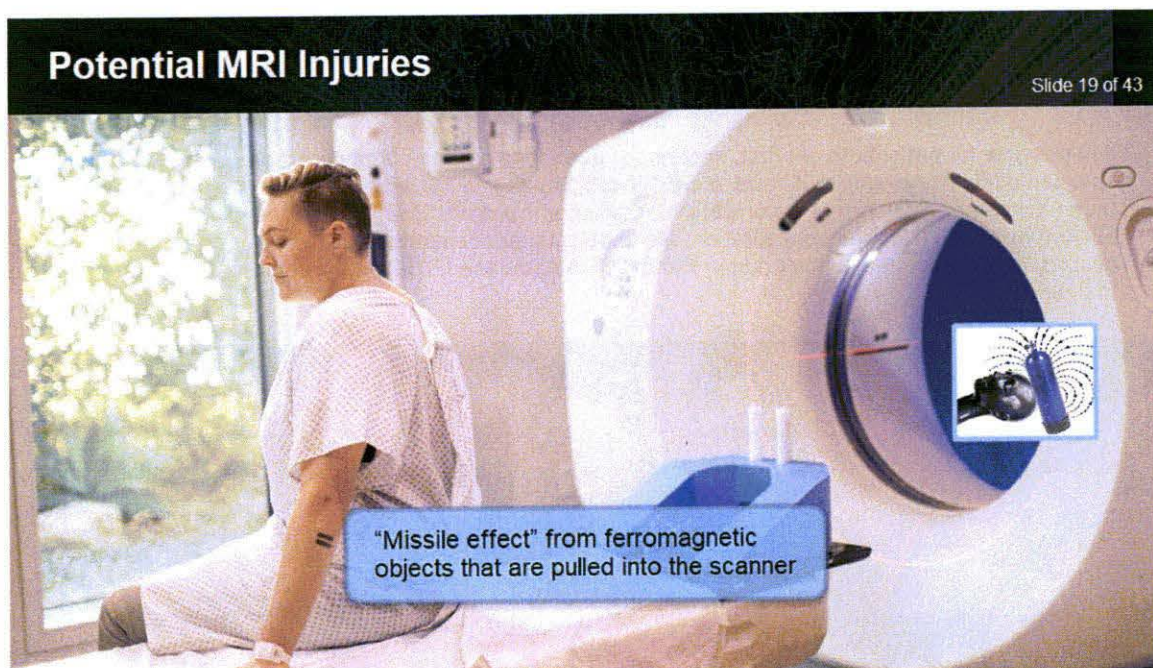
Ear (Slide Layer)



Frostbite (Slide Layer)



Missile effect (Slide Layer)

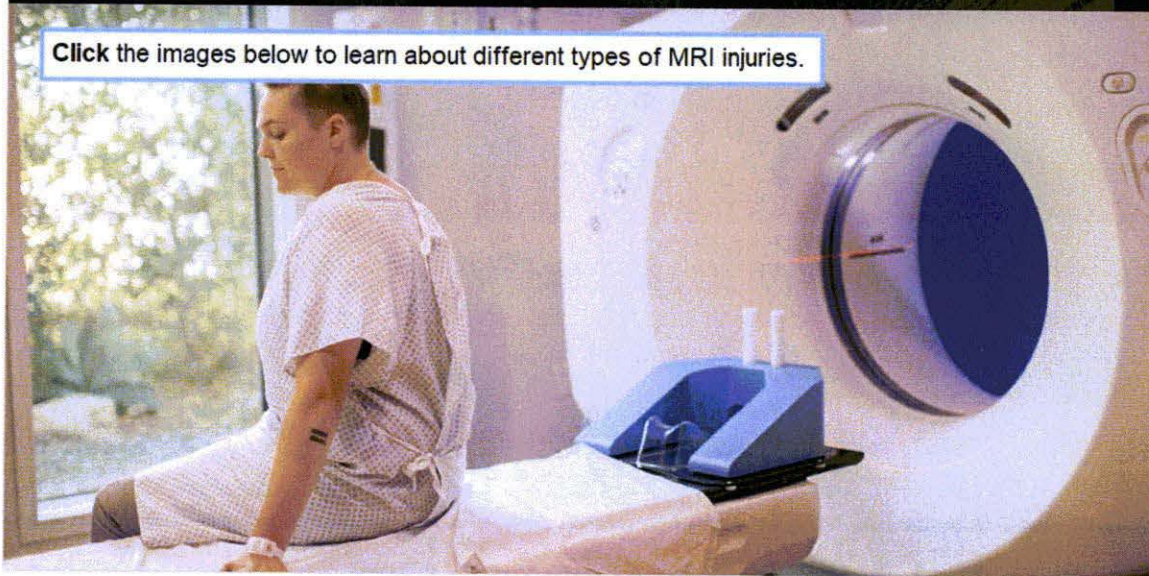


Error (Slide Layer)

Potential MRI Injuries

Slide 19 of 43

Click the images below to learn about different types of MRI injuries.



5.4 Burns

Burns

Slide 21 of 43

It is possible for patients to get first, second, or even third degree burns during an MRI procedure. This can occur, for example, if items like ECG cables become looped and contact the patient's skin (even if these devices are MRI compatible). Cables **should not** touch a patient's skin directly and **should not** be in a looped configuration. Metal objects that contact the skin, such as snaps or buttons, can also cause serious burns. Per the FDA database, 70% of MRI complications are related to thermal burns.



Click the image on the left to read about a serious burn incident that occurred in the MRI scanning room.

Notes:

Audio: Let's look more closely at a few of these potential hazards.

Untitled Layer 1 (Slide Layer)



Florian Bancelier and his mother Fabrice.
Image courtesy of David Vanhoy, *Canada Press*.

August 11, 2015 -- A 13-year-old French boy lost his thumb during a routine MRI examination of the pancreas, according to a report in the *Courier Picard* newspaper. An apparent error at the CHU hospital in Amiens, France, left patient Florian Bancelier in the scanner with a monitoring device attached to his thumb, which the report said was "burned through to the bone."

The boy was under anesthesia during the scan and did not notice the burning until it was too late, when he started screaming in pain, according to his mother. She claims that the medical staff failed to inform her of the accident, and that her son, who has Down syndrome, spent several tortured hours screaming in the emergency room, according to the article published on 4 August. "I guess they forget something on the finger that was not compatible with MRI," a senior French radiologist told *AmidMindsEurope.com*. "August is a favorable period for problems. Regular workers are on vacation and therefore, inexperienced people are sometimes used." The radiologist also added "this is just a thought, and no proof is available."

"It's very difficult for the Bancelier family. Florian has a big problem with his pancreas and doctors cannot

5.5 "Missile Effect"

"Missile Effect"

Slide 20 of 43

The static magnetic field of an MRI scanner exerts forces on ferromagnetic or other ferrous materials that are unrestrained, causing these objects to become airborne (such as an oxygen canister or a pair of scissors), which may result in injuries to anyone (including patients) in Zone 4.



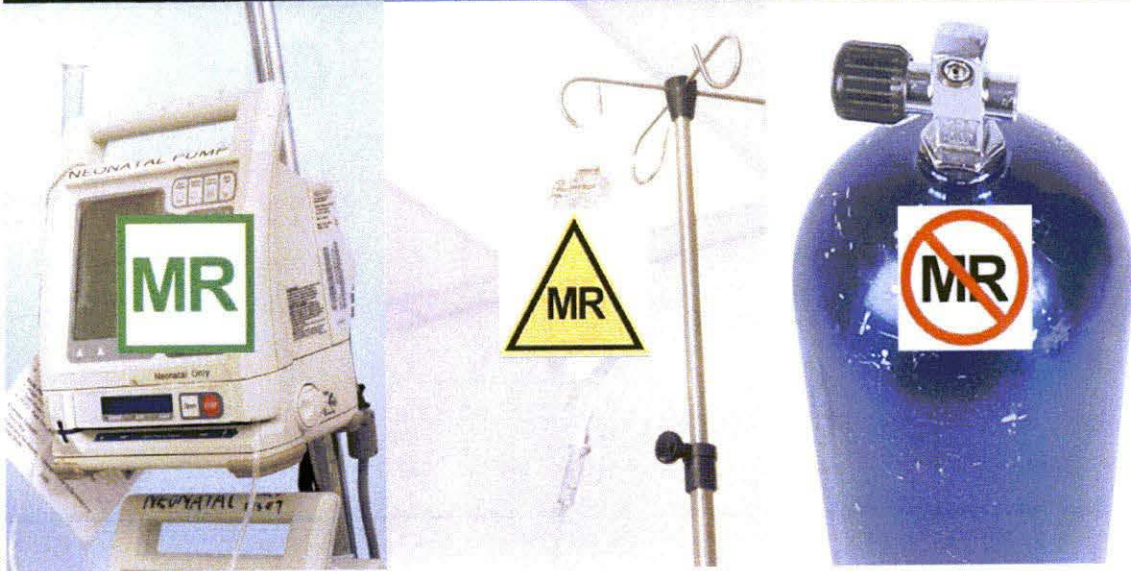
Notes:

NO AUDIO

5.6 Equipment Labels

Equipment Labels

Slide 22 of 43



Notes:

5-6

Audio: Sometimes, it's hard to know whether an item, device, or piece of equipment is a hazard in the MRI suite. It helps when equipment is clearly labeled, either by the manufacturer or MRI personnel.

MRI Safe (Slide Layer)

Equipment Labels

Slide 22 of 43



MRI Safe: No known safety hazard in any MRI environments. This classification can only be applied to products that do not contain any metallic elements.

MRI Unsafe (Slide Layer)

Equipment Labels

Slide 22 of 43



MRI Unsafe: A known safety hazard; cannot be brought into the MRI environment. Any MRI Unsafe product will always have this clearly specified in the instructions for use that accompany the product.

MRI NO (Slide Layer)

Equipment Labels

Slide 22 of 43



If an MRI Conditional device must be maintained, per the manufacturer's guidelines, at a designated gauss level relative to the MRI system, the area or gauss line must be clearly demarcated on the floor of the MRI scanning room, and all employees must be educated regarding the importance of maintaining the device at or behind this specifically marked area.

A sign must be posted on the unit regarding the acceptable conditions of use. For example, the label may state, "Do not position closer than 200 gauss from the MRI system." The sign should also indicate that the staff has carefully reviewed the specific MRI Conditional information provided by the manufacturer of the device prior to its use.

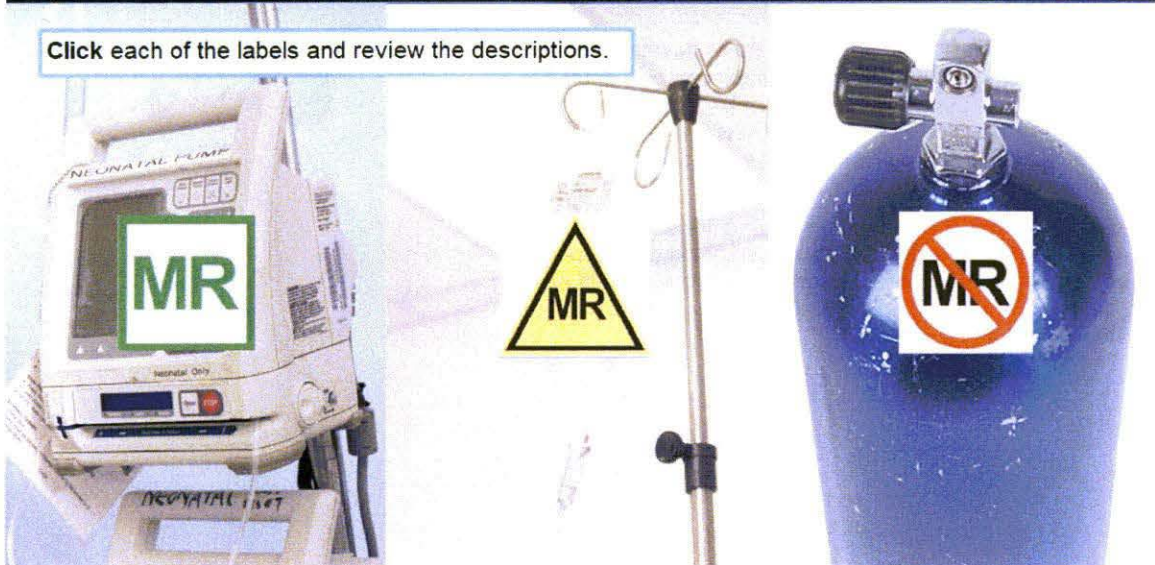
Reminder: Non-MRI Level 2 personnel and equipment must be approved entrance into MRI Zone 4 prior to the individual or equipment leaving MRI Zone 3.

Error (Slide Layer)

Equipment Labels

Slide 22 of 43

Click each of the labels and review the descriptions.



MRI Conditional (Slide Layer)

Equipment Labels

Slide 22 of 43



MRI Conditional: No known safety hazard in a specified MRI environment under specified conditions of use and with the necessary precautions as recommended by the manufacturer.

For more detailed information click [here](#).

5.7 Metal Objects

Metal Objects

Slide 23 of 43

All portable metallic or partially metallic devices that are on or external to the patient (such as oxygen cylinders) are to be positively identified in writing as MRI Unsafe, and are not permitted into MRI Zones 3 or 4. Alternatively, MRI Safe or MRI Conditional equipment is to be identified and labeled before being permitted into Zone 3.

For all device or object screening, verification and positive identification are required prior to allowing devices or objects into MRI Zone 4. Examples of devices that need to be positively identified include fire extinguishers, oxygen tanks, and aneurysm clips.



Notes:

5-7

Audio: Special care needs to be taken with all portable metallic or partially metallic objects.

5.8 Clothing Embedded With Metal Fibers

Clothing Embedded With Metal Fibers

Slide 24 of 43

To avoid the possibility of burns caused by metal objects or clothing embedded with metallic microfibers, take the following precautions:

- Remove metal objects in the patients' possession.
- Dress all patients in MRI-appropriate attire.
- For the safety of the patient and others in MRI Zone 4, patients will be asked to remove all clothing and footwear prior to entering MRI Zone 3.
- All patients must remove all clothing and footwear, and be provided with a metal-free gown and slip-proof booties (or asked to remove shoes when getting onto the MRI table). Shoes and sandals are removed because they may contain metal shanks, which would be unsafe in the Zone 3 environment.

Patient attire



Notes:

5-7

Audio: Sometimes it not easy to know whether an item is metallic or contains metal.

5.9 Knowledge Check

(True/False, 0 points, 1 attempt permitted)

Knowledge Check

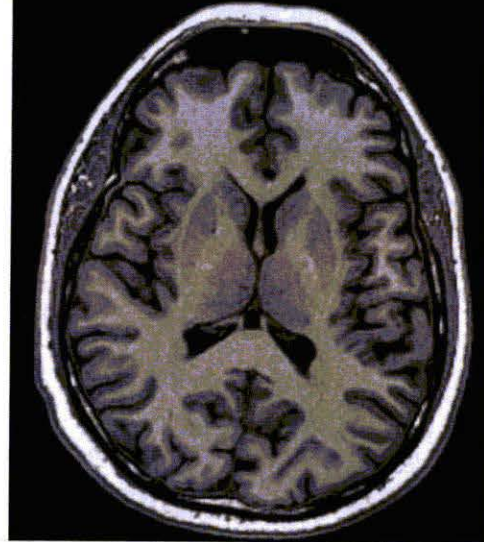
Slide 25 of 43

Check your understanding by answering this question:

The “missile effect” refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

☒ True

☐ False



Correct	Choice
X	True
	False

Feedback when correct:

Congratulations. The correct answer is True.

Feedback when incorrect:

That's incorrect. The correct answer is True.

Correct (Slide Layer)

Knowledge Check

Slide 25 of 43

Check your understanding by answering this question:

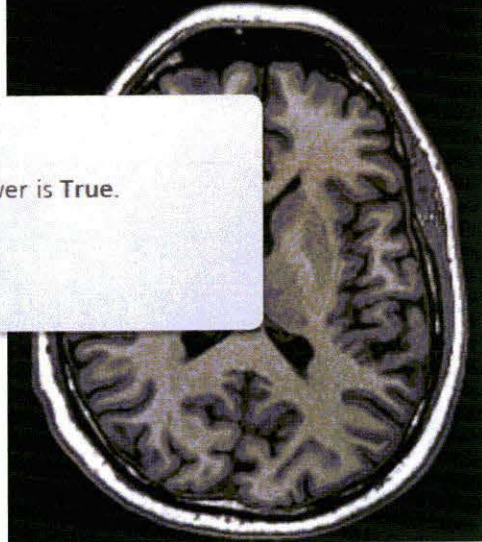
The "missile effect" refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

- ☒ True
- ☐ False

Correct

Congratulations. The correct answer is True.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 25 of 43

Check your understanding by answering this question:

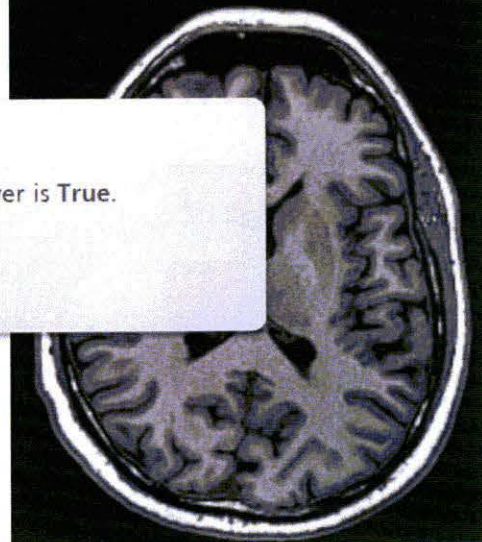
The "missile effect" refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

- ☒ True
- ☐ False

Incorrect

That's incorrect. The correct answer is True.

Continue

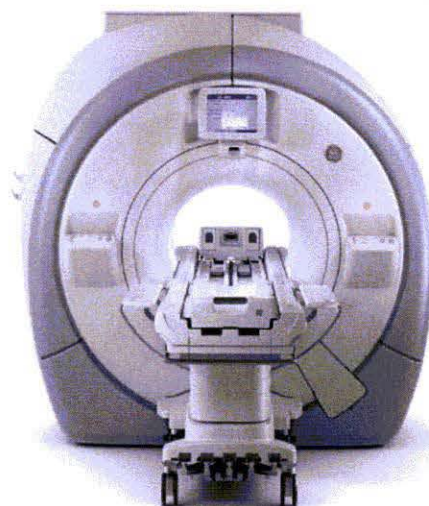


6. Emergency Situations

6.1 Emergency Situations



6.2 What to Do?

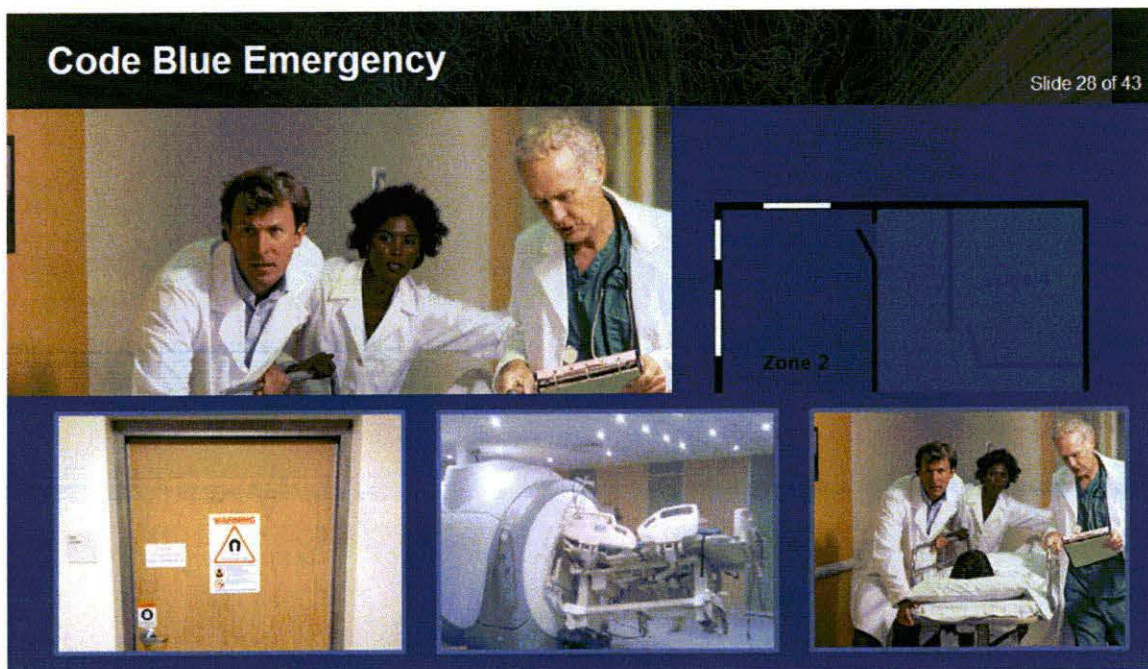


Notes:

6-2

Audio: : If an emergency develops in the MRI scanning room, follow the MRI Safety Guidelines policy to resolve the situation.

6.3 Code Blue Emergency



Notes:

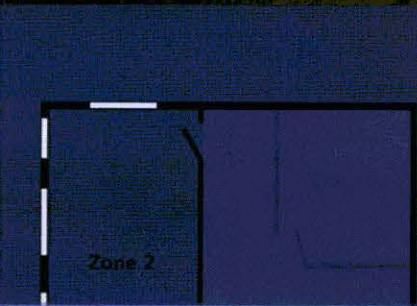
6-3

Audio: Whenever a patient or visitor is in medical distress while in safety zones 3 or 4, the situation is considered "code blue." This is an emergency, and that means the local facility operator must take appropriate action quickly. **The technologist should immediately undock the table and bring the patient into Zone 3.**

Do Not (Slide Layer)

Code Blue Emergency

Slide 28 of 43



Do not do the following:

1. Do not bring the crash cart into MRI Zone 4, where the cart could become a projectile and be drawn forcefully into the scanner and injure someone (missile effect).
2. Do not, **under any circumstances**, allow a code team or member to enter MRI Zone 4.

Note: All emergency care is performed outside the magnet environment (Zone 4).

DO (Slide Layer)

Code Blue Emergency

Slide 28 of 43



Do the following:

1. Move the patient or visitor safely and quickly from MRI Zone 4 into Zone 3 or Zone 2.
2. Close the door to prevent re-entry (lock the door and pull the chain across).
3. Activate the Code Blue button (local Code Blue workflows vary by site).

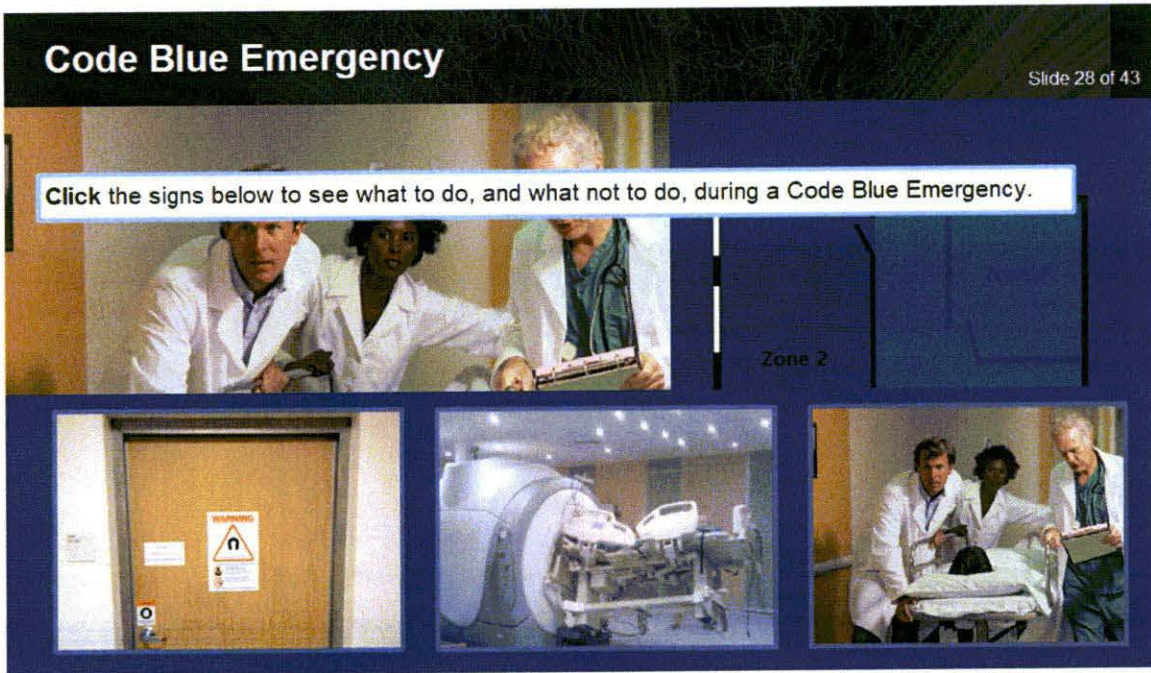
Note: Local Code Blue training and mock drills are recommended.

Error (Slide Layer)

Code Blue Emergency

Slide 28 of 43

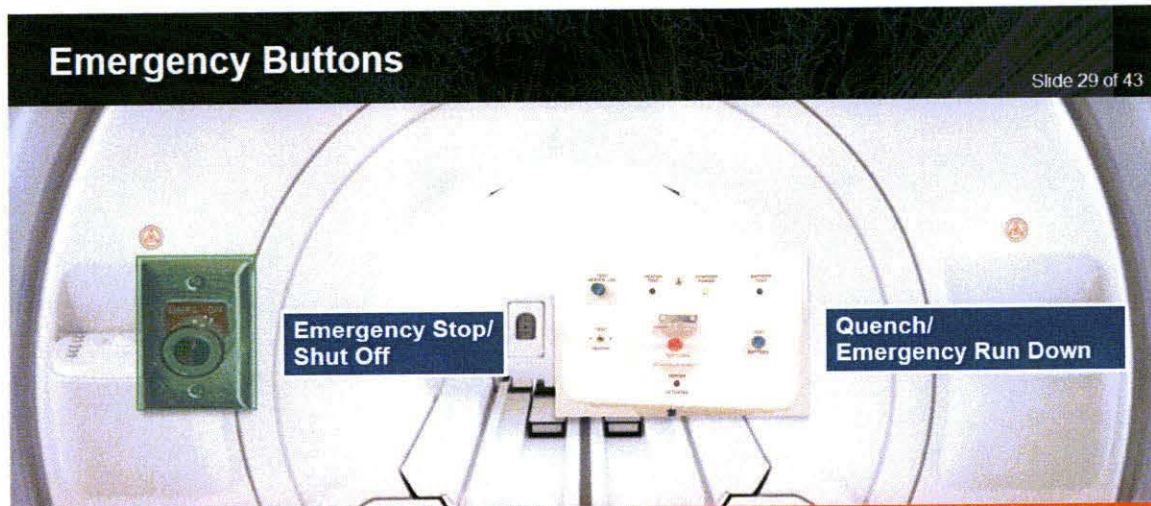
Click the signs below to see what to do, and what not to do, during a Code Blue Emergency.



6.4 Emergency Buttons

Emergency Buttons

Slide 29 of 43



**Emergency Stop/
Shut Off**

**Quench/
Emergency Run Down**

**Familiarize yourself with these buttons.
Know the difference!**

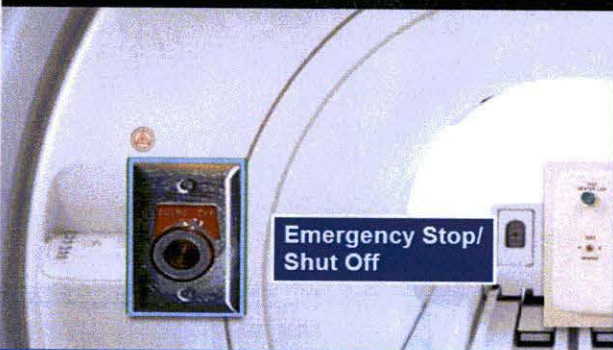
Notes:

Audio: You should also know that the magnet is equipped with two emergency buttons--the **Emergency Stop/Shut Off** button and the **Quench/Emergency Run Down** button. You need to understand what these buttons do and how they are different. Let's look at each one.

Emergency (Slide Layer)

Emergency Buttons

Slide 29 of 43



Emergency Stop/Shut Off

MRI Level 1 and MRI Level 2 personnel are authorized to take this action.

Note: The MRI scanner also has an Emergency Stop/Shut Off switch located on the keyboard



Emergency Stop/Shut Off

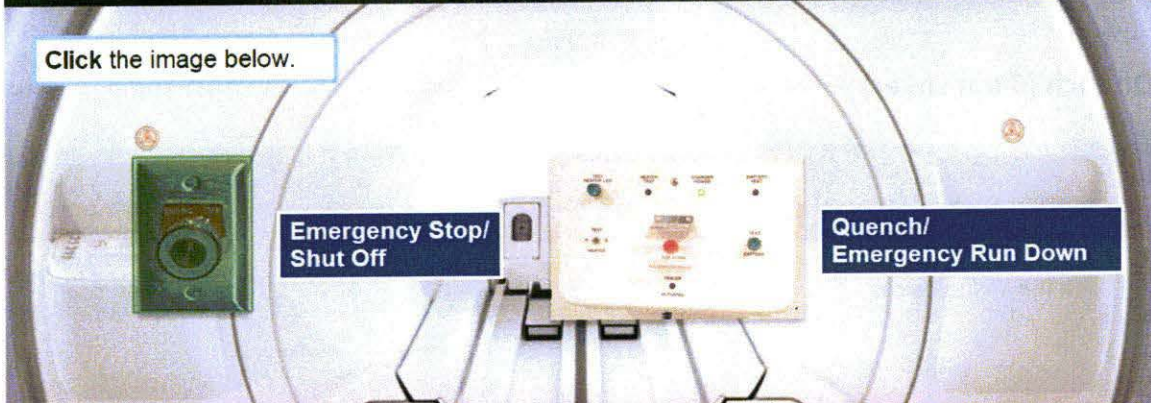
- **What it does:** Pressing this button turns off all incoming electrical power to the magnet Power Distribution Unit (PDU).
- **When to use:** Press when you need to shut down power to the PDU to prevent life-threatening situations (fire in the computer room; fire, sparks, or loud noises from the scan room; flooding caused by activation of the sprinkler system; or catastrophic equipment failure).
- **What to expect:** Power is shut down, but this action does not initiate a quench. **The magnet remains on!**

Error (Slide Layer)

Emergency Buttons

Slide 29 of 43

Click the image below.



Emergency Stop/
Shut Off

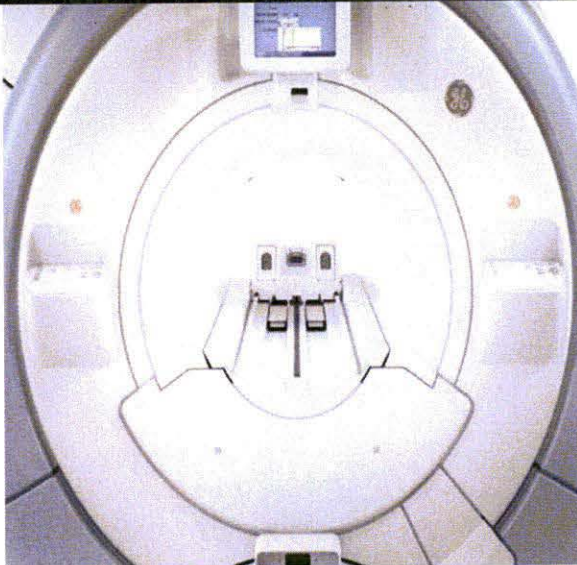
Quench/
Emergency Run Down

**Familiarize yourself with these buttons.
Know the difference!**

6.5 Emergency Buttons 2

Emergency Buttons

Click the image below.



Quench/Emergency Run Down

Notes:

Audio: You should also know that the magnet is equipped with two emergency buttons--the **Emergency Stop/Shut Off** button and the **Quench/Emergency Run Down** button. You need to understand what these buttons do and how they are different. Let's look at each one.

Quench (Slide Layer)

Emergency Buttons

Slide 30 of 43

Click the image below.



Quench/Emergency Run Down

MRI Level 2 personnel are authorized to take this action.

Quench/Emergency Run Down

- **What it does:** Pressing this button causes immediate collapse of the superconductive magnetic field within minutes.
- **When to use:** Initiate in case of a true emergency (in which a magnetic object has pinned or impaled a person against the magnet and no other means are available to prevent further injury).
- **What to expect:** This action causes severe and irreparable damage to the superconducting coils (magnet), several days of downtime, and very expensive damage to the MRI system.

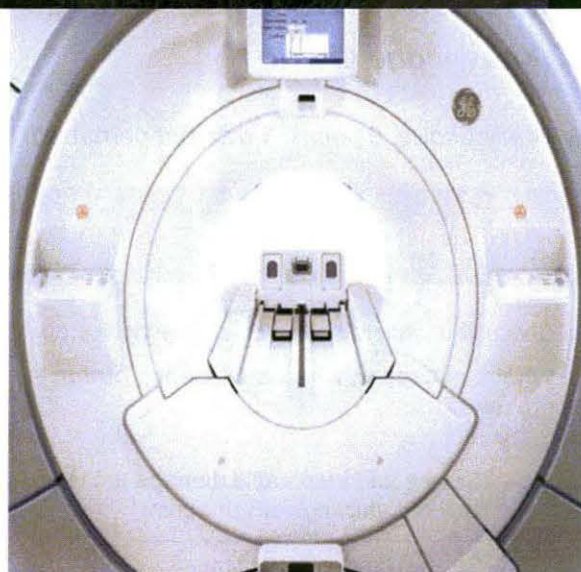
Error (Slide Layer)

Emergency Buttons

Click the image below.



Quench/Emergency Run Down



6.6 Quench/Emergency Run Down

Quench/Emergency Run Down

Slide 31 of 43

Review what to do—and what not to do—in quench emergency (and non-emergency) situations.

Emergency (patients or employees at risk)

- If possible, remove the patient from the scanning room before determining if a manual quench is required.
- **Do not** attempt to pull large magnetic objects (such as an oxygen tank) from the magnet. The object may change its magnetic polarity, re-align itself on the magnet, and become a projectile, causing injury.
- **Do not** touch a quenched magnet. (Under certain conditions, an electrical potential of **more than 1,000** volts can exist on the surface of the magnet.)

Non-emergency (patients or employees not at risk)

- Contact the appropriate service personnel. They have the specialized tools to handle non-emergency situations.

Only MRI Level 2 personnel are authorized to take this action.



Notes:

Audio: A Quench / Emergency Run Down situation can occur spontaneously or can be initiated manually. In either case, be sure to take the necessary actions.

6.7 Knowledge Check

(Multiple Choice, 0 points, 1 attempt permitted)

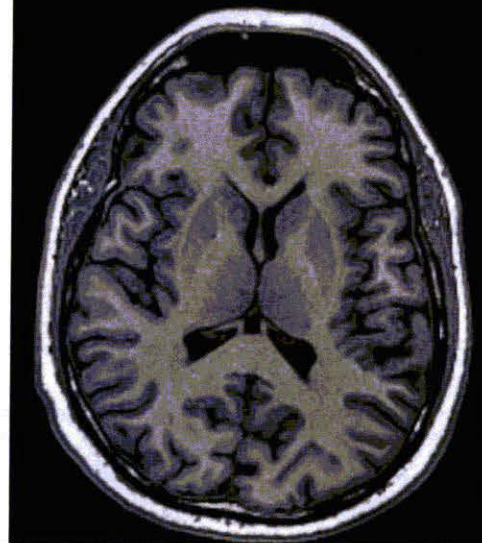
Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

What can happen when the Quench button is pressed?

- ☐ Severe and irreparable damage to the superconducting coils (magnet)
- ☐ Several days of downtime
- ☐ Very expensive damage to the MRI system
- ☒ All of the above
- ☐ None of the above



Correct	Choice
	Severe and irreparable damage to the superconducting coils (magnet)
	Several days of downtime
	Very expensive damage to the MRI system
X	All of the above
	None of the above

Feedback when correct:

Congratulations. The correct answer is

All of the above.

Feedback when incorrect:

That's incorrect. The correct answer is

All of the above.

Correct (Slide Layer)

Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

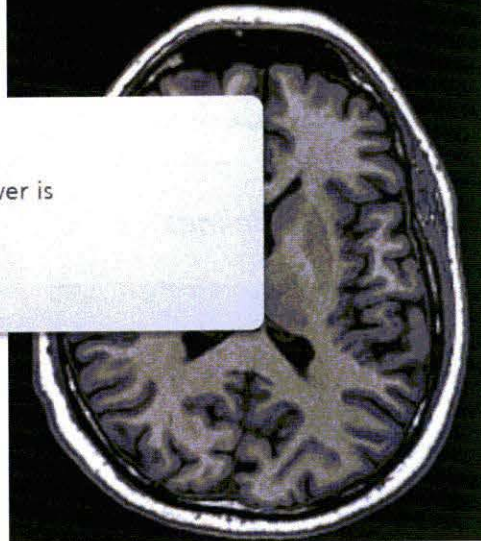
What can happen when the Quench button is pressed?

- ☐ Severe and superconducting magnet
- ☐ Several days of downtime
- ☐ Very expensive repairs
- ☒ All of the above
- ☐ None of the above

Correct

Congratulations. The correct answer is
All of the above.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

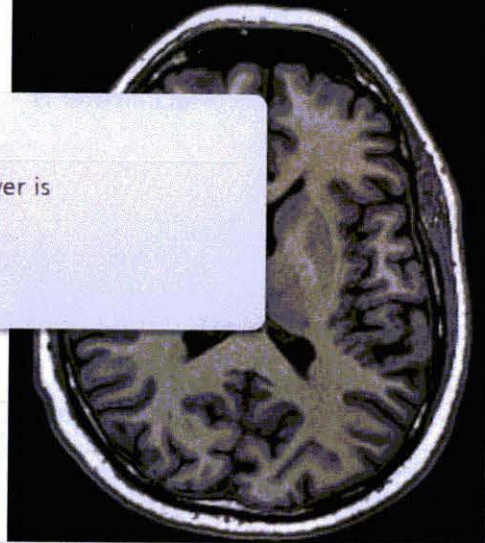
What can happen when the Quench button is pressed?

- ☐ Severe and superconducting
- ☐ Several days
- ☐ Very expensive
- ☒ All of the above
- ☐ None of the above

Incorrect

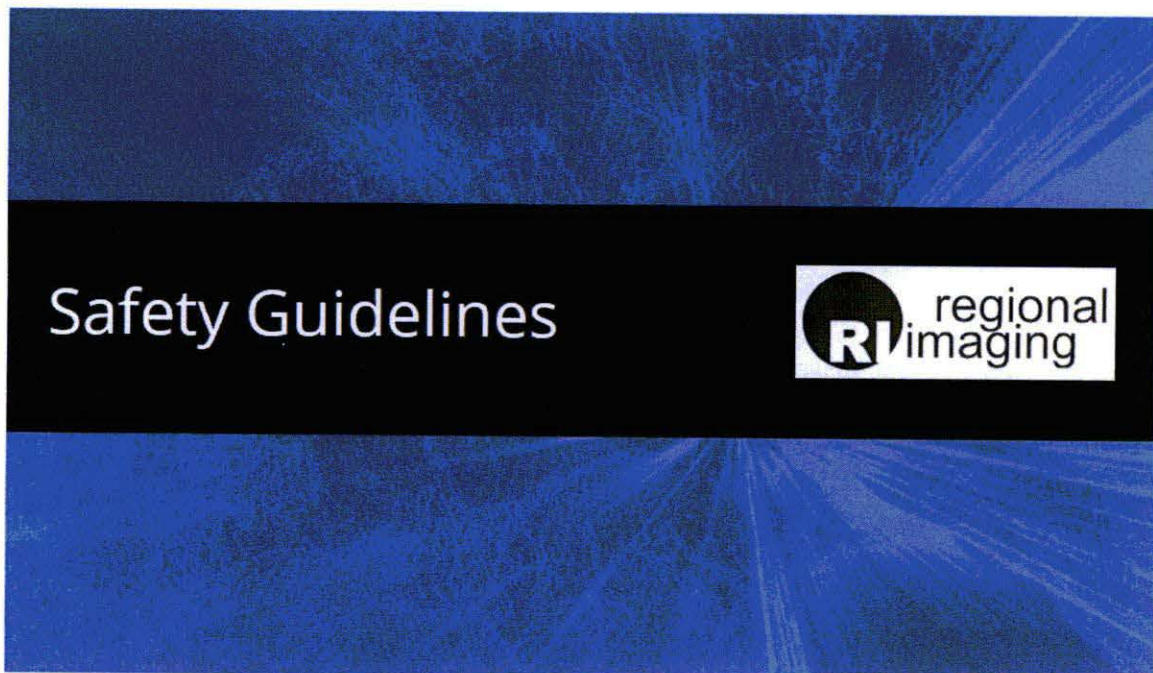
That's incorrect. The correct answer is All of the above.

Continue

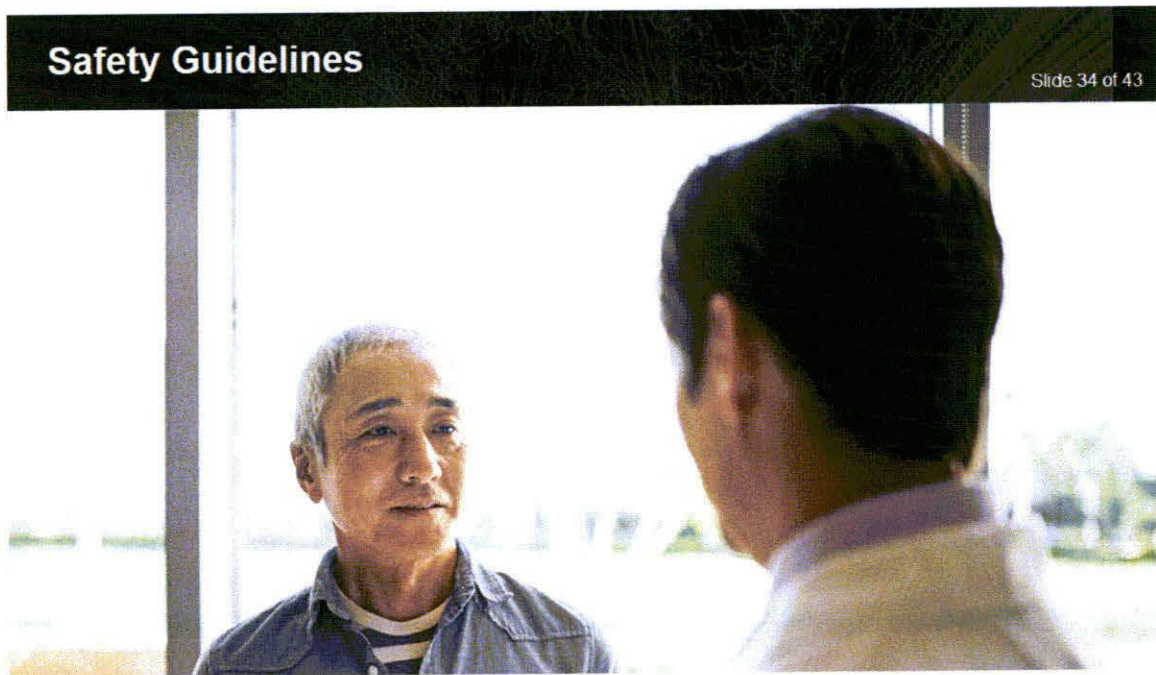


7. Safety Guidelines

7.1 Safety Guidelines



7.2 Safety Guidelines



Notes:

7-2

Audio: Ensuring the safety of patients and others in the MRI environment is your number one priority.

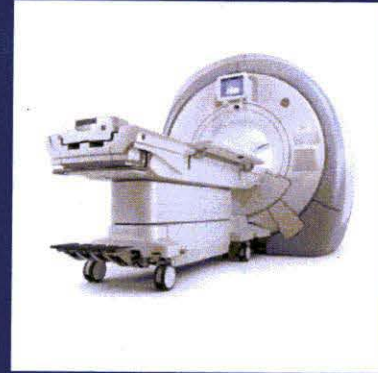
7.3 Safety Guidelines 2

Safety Guidelines

Slide 35 of 43

When you're **inside** the MRI scanning room, make sure to:

- Verify that a Level 2 MRI staff person (MRI technologist or radiologist) is present to oversee MRI safety when the magnet room is accessed.
- Use only MRI Conditional or MRI Safe patient monitoring equipment.
- Use the wall oxygen outlet in the magnet room where available.
- If needed, use patient suction with extended tubing to the stationary wall unit located inside and outside the magnet room.



Notes:

Audio: Ensuring the safety of patients and others in the MRI environment is your number one priority.

7.4 Special Considerations

Special Considerations

Slide 36 of 43

Pregnancy

- For all female patients of childbearing age, screen the patient prior to the MRI exam.
- For all patients who are pregnant and receiving contrast, notify the patient's referring physician or radiologist to determine the risk-health benefit to the patient prior to performing the MRI exam.



Notes:

7-4

Audio: Take special precautions with pregnant patients.

7.5 Environmental Services

Environmental Services

Slide 37 of 43

Review the MRI safety guidelines for Environmental Services (EVS).

General guidelines

At some sites, the EVS staff cleans the control room (Zone 3) and the scan room (Zone 4). The staff waxes the floor using a nonmetallic, handheld mop. (No buffers or pails are allowed.) In other facilities, the MRI staff is responsible for daily cleaning. The cleaning occurs during the day and the doors are locked at night.



Notes:

7-5

Audio: Special safety guidelines are used to help the Environmental Services (EVS) team do its job.

7.6 Environmental Services 2

Environmental Services

Slide 38 of 43

An MRI Level 2 trained MRI technologist or radiologist is responsible for ensuring all safety guidelines are followed:

- Screens all EVS personnel before cleaning begins, which means screening both the EVS employee who will work in MRI Zones 3 and 4 and the cleaning equipment that will be used in Zone 4
- Monitors the room when non-MRI personnel have access
- Checks to be sure that no metallic devices are brought into the room
- Ensures that no cleaning devices are brought into the room when a patient is on the table (unless the technologist has granted approval beforehand)



The MRI technologists ensure the scan room (Zone 4) is cleaned every day it is used.

Notes:

NO AUDIO

7.7 Knowledge Check

(True/False, 0 points, 1 attempt permitted)

Knowledge Check

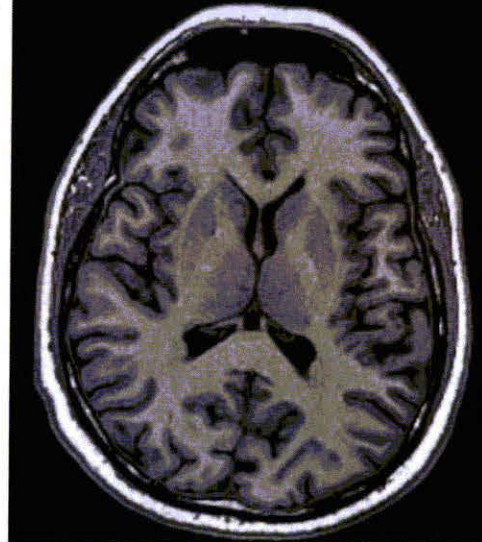
Slide 39 of 43

Check your understanding by answering this question:

A Level 2 MRI staff person (MRI technologist or radiologist) must be present to oversee MRI safety when the scan room (Zone 4) is accessed.

☒ True

☐ False



Correct	Choice
X	True
	False

Feedback when correct:

Congratulations. The correct answer is True.

Feedback when incorrect:

That's incorrect. The correct answer is True.

Correct (Slide Layer)

Knowledge Check

Slide 39 of 43

Check your understanding by answering this question:

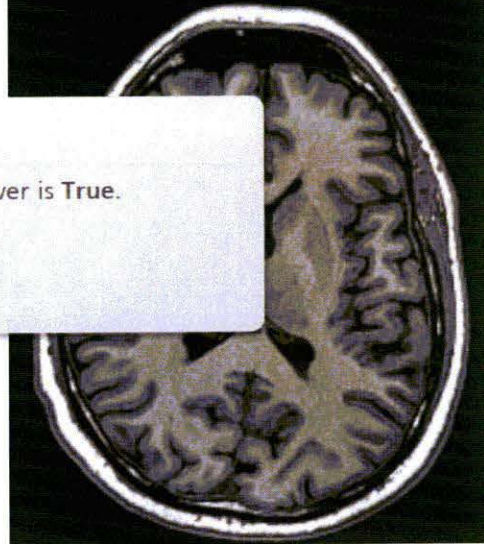
A Level 2 MRI staff person (MRI technologist or radiologist) must be present to ensure MRI safety when the scan is performed.

- ☒ True
☐ False

Correct

Congratulations. The correct answer is True.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 39 of 43

Check your understanding by answering this question:

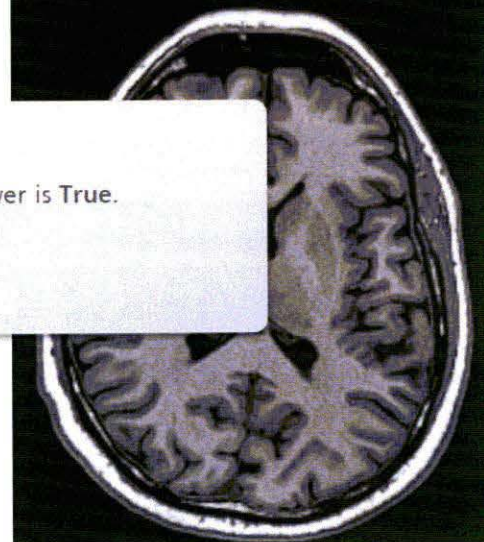
A Level 2 MRI staff person (MRI technologist or radiologist) must be present to ensure MRI safety when the scan is performed.

- ☒ True
☐ False

Incorrect

That's incorrect. The correct answer is True.

Continue



8. Summary

8.1 Summary



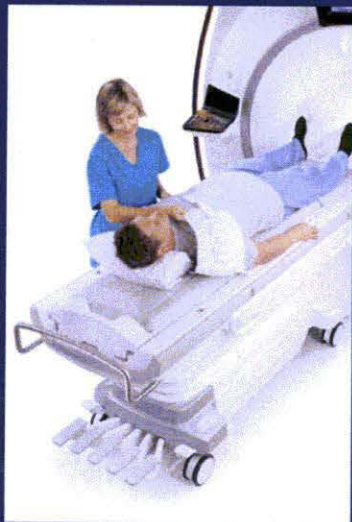
8.2 Review

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

- The magnet is always on!
- There are four MRI safety zones: 1, 2, 3, and 4.
- All personnel are screened to enter Zones 3 and 4.
- There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.
- Processes are in place to handle emergencies effectively.
- The ACR MRI safety guidelines provide instructions for safe operations.



Notes:

Audio: We've now come to the end of our training on MRI safety and we've covered a lot of material. Let's do a quick review.

1 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

- The magnet is always on!
- There are four MRI safety zones: 1, 2, 3, and 4.
- All personnel are screened to enter Zones 3 and 4.
- There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.
- Processes are in place to handle emergencies effectively.
- The ACR MRI safety guidelines provide instructions for safe operations.



MRI produces images using an extremely powerful superconducting magnet, which is on all the time (24/7/365).

2 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

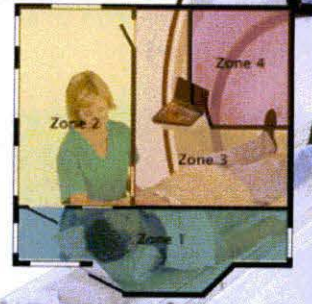
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



The Four Zone concept provides progressive restrictions for everyone within close proximity to the MRI scanner.

3 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



The screening process minimizes the possibility of accidents and injuries when working in the magnet room.

4 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.

MRI Level 1 and MRI Level 2 personnel have different responsibilities.



Access to the four zones depends on whether you have completed training to earn Level 1 status (basic safety training) or Level 2 status (advanced safety training).

5 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

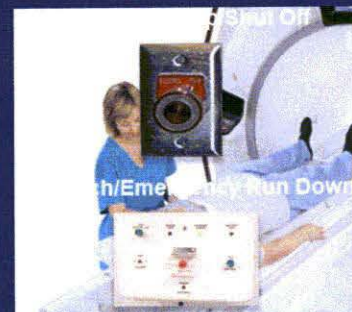
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



Two emergency buttons are available to shut down the system in case of life-threatening emergencies.

6 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

- The magnet is always on!
- There are four MRI safety zones: 1, 2, 3, and 4.
- All personnel are screened to enter Zones 3 and 4.
- There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.
- Processes are in place to handle emergencies effectively.
- The ACR MRI safety guidelines provide instructions for safe operations.



The guidelines help to ensure the safety of patients and others in the MRI environment.

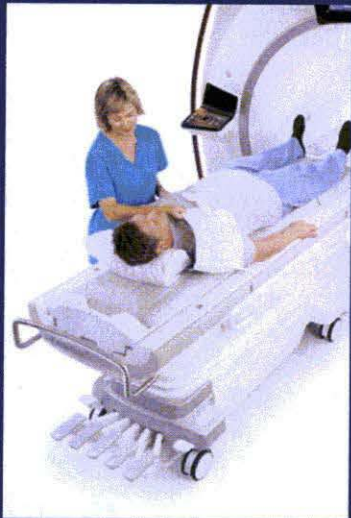
Error (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

- The magnet is always on!
- There are four MRI safety zones: 1, 2, 3, and 4.
- All personnel are screened to enter Zones 3 and 4.
- There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.
- Processes are in place to handle emergencies effectively.
- The ACR MRI safety guidelines provide instructions for safe operations.



8.3 Resources

Resources

Slide 42 of 43

To obtain any of these documents, contact your immediate supervisor.

- MRI Safety Guidelines, SAS-910
- GE/Siemens Medical Systems MRI Safety Guides
- Interrelating Sentinel Event Alert #38
- ACR Guidance Document on MR Safe Practices: 2013
- ASRT Radiologic Technologist Best Practices for MR Safety 2018 (Supplement)



Notes:

8-6

Audio: If you'd like more information about the MRI scanner, other resources are available.

8.4 Course Conclusion Level 1

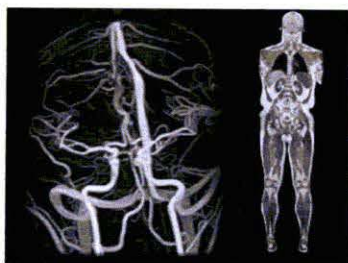
Congratulations!

You have successfully completed Level 1 MRI Safety Training.

To receive successful completion status in KP Learn, close this browser window.

You will be directed to a brief survey.

For more information about how to print a Certificate of Completion, click [here](#).



Notes:

No audio

9. Resources

9.1 About

About

This MRI Safety Training provides education and support to help you work safely within the Magnetic Resonance Imaging (MRI) environment.

The course was produced and developed by:

Northern California Regional Imaging
The Imaging Gateway
<https://wiki.kp.org/wiki/display/imaging/Home>

and

Learning Solutions
[Visit our website](#)

 KAISER PERMANENTE®

Notes:

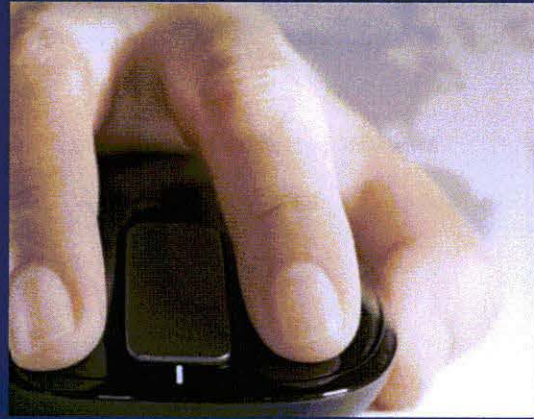
9.2 Resources

Resources

More information about this topic is available at [The Imaging Gateway](#):

You'll find links to the following:

- Protocols
- Frequently asked questions
- Regulatory & Compliance
- Reporting guidelines



Notes:

9.3 Help

Help

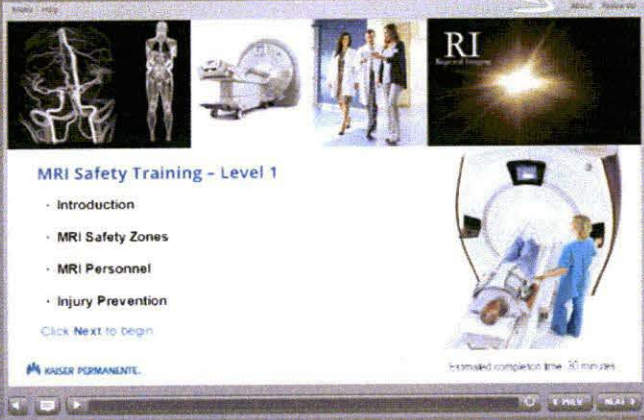
Click **Menu** to navigate to any screen in this course.

Click **About** for information about this course.

Click **Resources** for additional information on this topic.

Click the **X** in the upper right to leave the course.

Use these navigation controls to move back, replay, and move forward.

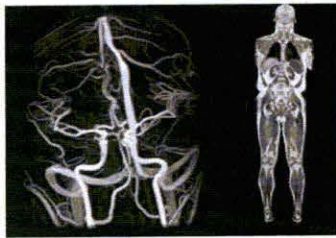


The screenshot shows a web-based training interface for 'MRI Safety Training - Level 1'. At the top, there are four icons: a brain scan, a person, a person in a lab coat, and a person in a lab coat. Below these icons is a list of topics: Introduction, MRI Safety Zones, MRI Personnel, and Injury Prevention. A 'Click Next to begin' link is present. The interface also includes a 'Menu' button, an 'About' button, and a 'Resources' button. A progress bar at the bottom indicates 'Estimated completion time: 30 minutes'. The interface is branded with 'KASER PERMANENTE'.

MRI Safety Level 2

1. Home

1.1 Home



MRI Safety Training – Level 2

- Introduction
- MRI Safety Zones
- MRI Personnel
- Injury Prevention
- Emergency Situations
- Safety Guidelines
- Summary

Click **Next** to begin



Estimated completion time: 45 minutes

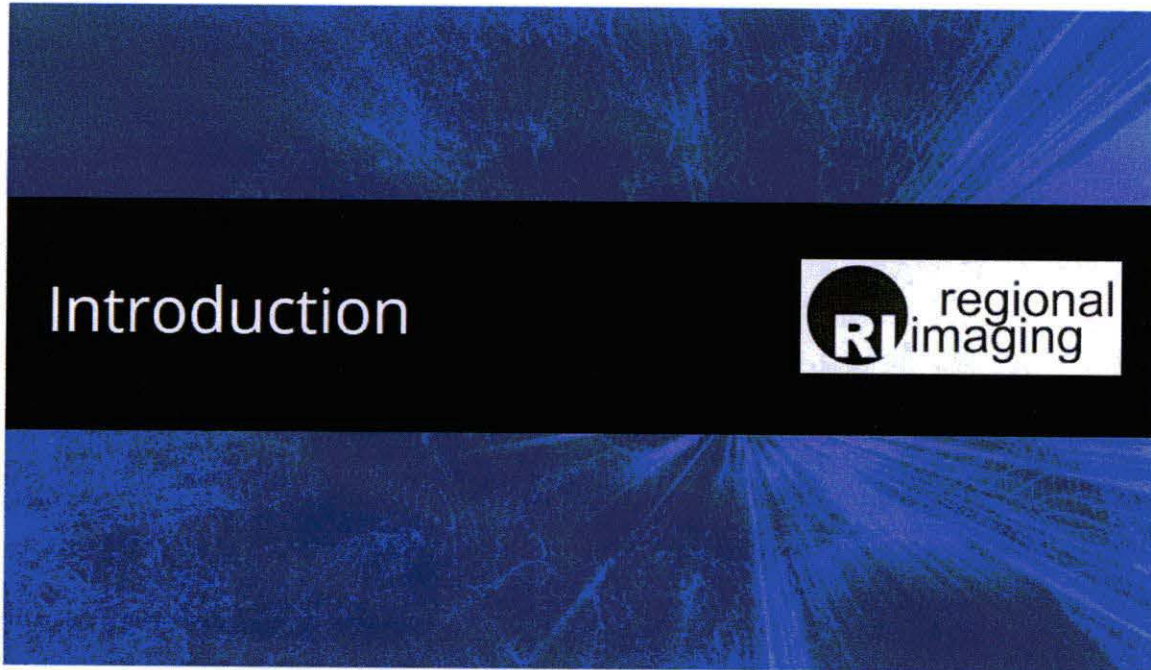
Notes:

1-1

Audio: Welcome to the Northern California MRI safety training, which provides education and support to help you work safely within the magnetic resonance imaging (MRI) environment.

2. Introduction

2.1 Introduction



2.2 Audio Notice



10.5 Course Conclusion Level2

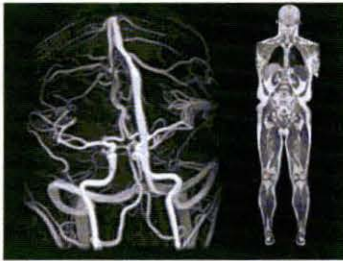
Congratulations!

You have successfully completed Level 2 MRI Safety Training.

To receive successful completion status in KP Learn, close this browser window.

You will be directed to a brief survey.

For more information about how to print a Certificate of Completion, click [here](#).



Notes:

No audio

Success (Slide Layer)

Results

Your Score: %Results.ScorePercent% %

Passing Score: %Results.PassPercent% %

Result:

 Congratulations, you passed. Click next to go to the course conclusion and receive credit for this course.

[Review Quiz](#)

Failure (Slide Layer)

Results

Your Score: %Results.ScorePercent% %

Passing Score: %Results.PassPercent% %

Result:

 Unfortunately, you did not pass. To receive MRI Level 2 certification, you must achieve a passing score of 80 percent. You will need to take this course again and pass the Knowledge Review. You may re-register for this course at any time. Click the X button in the upper right to close this session.

[Review Quiz](#)

Results

Your Score:

%Results.ScorePercent% %

Passing Score:

%Results.PassPercent% %

Result:

Review Quiz

Results for
10.3 Draw from Question Bank 1

Result slide properties

Passing80%

Score

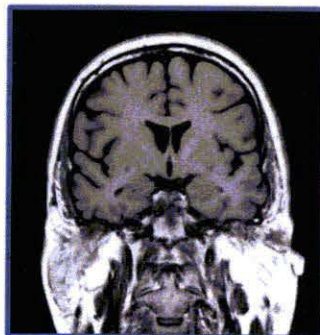
10.2 MRI Safety Training Quiz - Level 2

MRI Safety Training Quiz - Level 2

MRI Safety Training Quiz for MRI Level 2 employees

Only employees designated by their manager to complete MRI Level 2 training are authorized to take this quiz.

Click Next to take the quiz (20 questions).



Notes:

10-2

Audio: To complete your training and receive credit for this course, you'll need take a brief knowledge review, which consists of 20 questions. It should take only a few minutes to complete.

[This is for level 2 personnel only.]

10.3 Draw from Question Bank 1

Draw 20 questions randomly from Question Bank 1

10.4 Results Slide

(Results Slide, 0 points, 1 attempt permitted)

9.3 Help



10. Knowledge Review

10.1 Knowledge Review



9.2 Resources

Resources

More information about this topic is available at
The Imaging Gateway:

You'll find links to the following:

- Protocols
- Frequently asked questions
- Regulatory & Compliance
- Reporting guidelines



Notes:

9. Resources

9.1 About

About

This MRI Safety Training provides education and support to help you work safely within the Magnetic Resonance Imaging (MRI) environment.

The course was produced and developed by:

Northern California Regional Imaging
The Imaging Gateway
<https://wiki.kp.org/wiki/display/imaging/Home>

and

Learning Solutions
[Visit our website](#)

 KAISER PERMANENTE®

Notes:

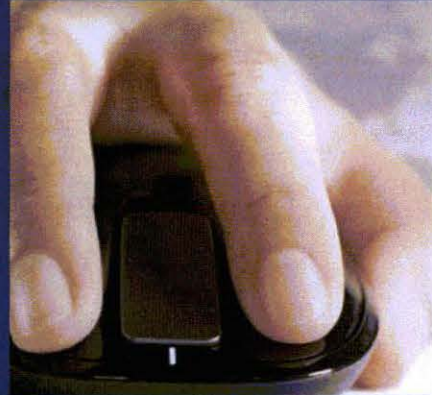
8.3 Resources

Resources

Slide 42 of 43

To obtain any of these documents, contact your immediate supervisor.

- MRI Safety Guidelines, SAS-910
- GE/Siemens Medical Systems MRI Safety Guides
- Interrelating Sentinel Event Alert #38
- ACR Guidance Document on MR Safe Practices: 2013
- ASRT Radiologic Technologist Best Practices for MR Safety 2018 (Supplement)



Notes:

8-6

Audio: If you'd like more information about the MRI safety, other resources are available.

6 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.

ACR[®]
AMERICAN COLLEGE OF
RADIOLOGY

The guidelines help to ensure the safety of patients and others in the MRI environment.

Error (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

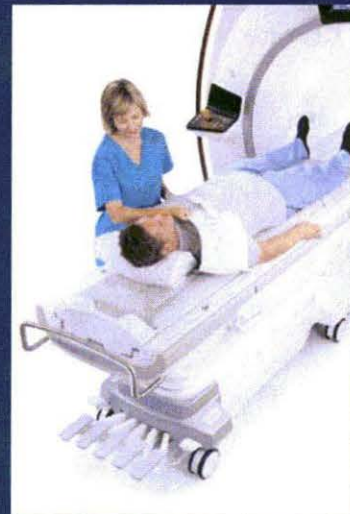
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



4 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.

MRI Level 1 and MRI Level 2 personnel have different responsibilities.



Access to the four zones depends on whether you have completed training to earn Level 1 status (basic safety training) or Level 2 status (advanced safety training).

5 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

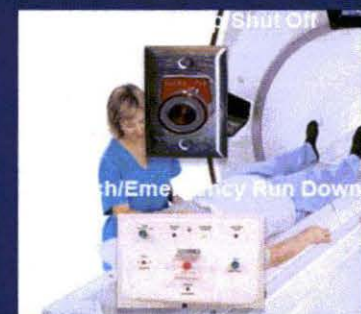
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



Two emergency buttons are available to shut down the system in case of life-threatening emergencies.

2 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

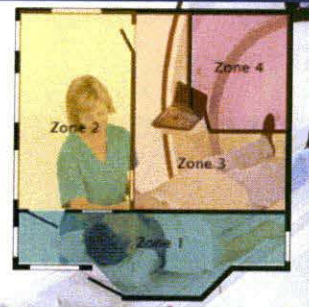
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



The Four Zone concept provides progressive restrictions for everyone within close proximity to the MRI scanner.

3 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

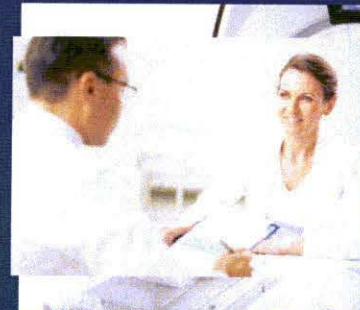
There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.



The screening process minimizes the possibility of accidents and injuries when working in the magnet room.

Notes:

Audio: We've now come to the end of our training on MRI safety and we've covered a lot of material. Let's do a quick review.

1 (Slide Layer)

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

The magnet is always on!

There are four MRI safety zones: 1, 2, 3, and 4.

All personnel are screened to enter Zones 3 and 4.

There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.

Processes are in place to handle emergencies effectively.

The ACR MRI safety guidelines provide instructions for safe operations.

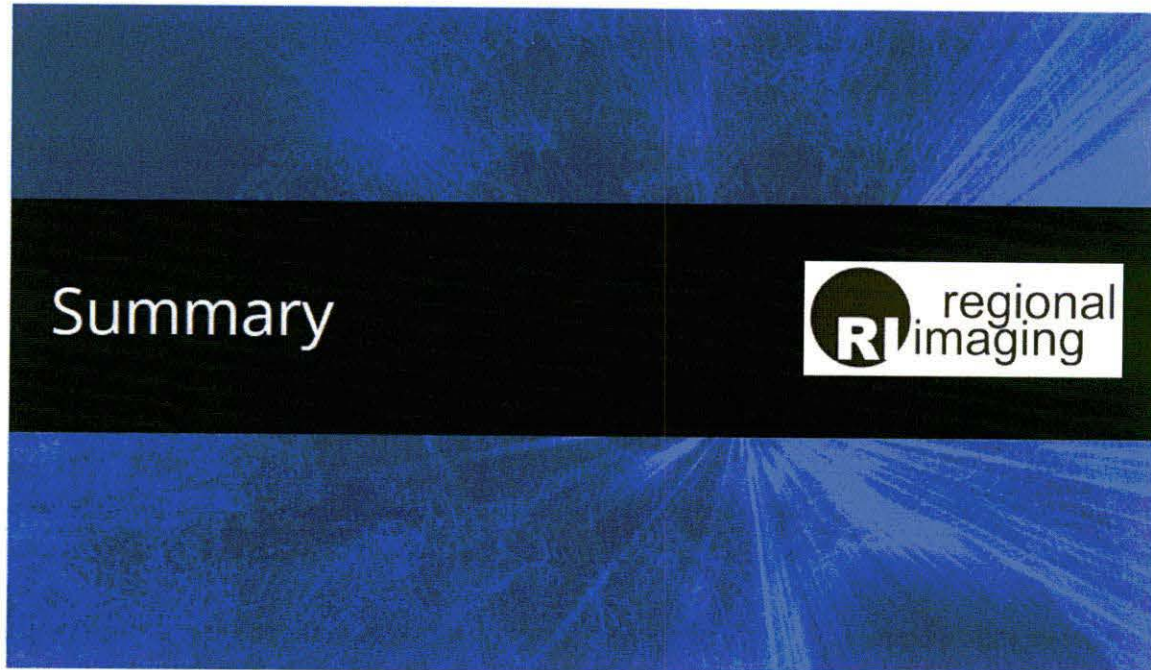


DANGER!
Powerful Magnet
Always On

MRI produces images using an extremely powerful superconducting magnet, which is on all the time (24/7/365).

8. Summary

8.1 Summary



8.2 Review

Review

Slide 41 of 43

Click the boxes below to review the course highlights:

- The magnet is always on!
- There are four MRI safety zones: 1, 2, 3, and 4.
- All personnel are screened to enter Zones 3 and 4.
- There are two levels of MRI personnel: MRI Level 1 and MRI Level 2.
- Processes are in place to handle emergencies effectively.
- The ACR MRI safety guidelines provide instructions for safe operations.

A photograph showing a patient lying on an MRI table, which is positioned inside the circular opening of an MRI scanner. A female technician in blue scrubs is standing next to the table, attending to the patient. The patient is wearing a white shirt and dark pants. The MRI table has several wheels at the base.

Correct (Slide Layer)

Knowledge Check

Slide 39 of 43

Check your understanding by answering this question:

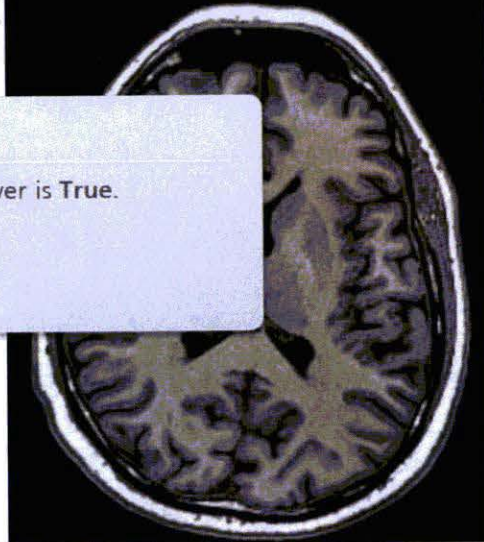
A Level 2 MRI staff person (MRI technologist or radiologist) must be present to ensure MRI safety when the scan is performed.

- ☒ True
- ☐ False

Correct

Congratulations. The correct answer is True.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 39 of 43

Check your understanding by answering this question:

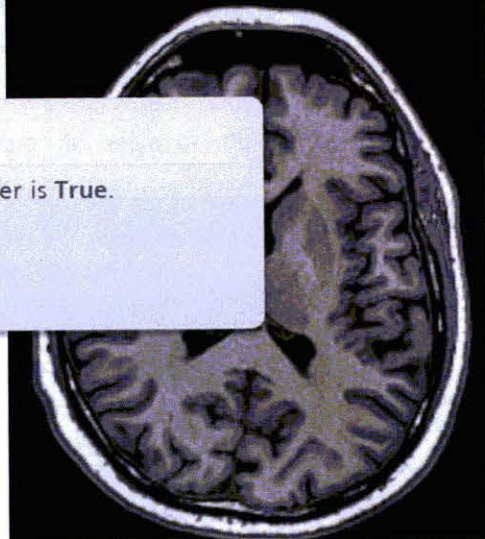
A Level 2 MRI staff person (MRI technologist or radiologist) must be present to ensure MRI safety when the scan is performed.

- ☒ True
- ☐ False

Incorrect

That's incorrect. The correct answer is True.

Continue



Knowledge Check

Slide 39 of 43

Check your understanding by answering this question:

A Level 2 MRI staff person (MRI technologist or radiologist) must be present to oversee MRI safety when the scan room (Zone 4) is accessed.

☒ True

☐ False



Correct	Choice
X	True
	False

Feedback when correct:

Congratulations. The correct answer is True.

Feedback when incorrect:

That's incorrect. The correct answer is True.

7.6 Environmental Services 2

Environmental Services

Slide 38 of 43

An MRI Level 2 trained MRI technologist or radiologist is responsible for ensuring all safety guidelines are followed:

- Screens all EVS personnel before cleaning begins, which means screening both the EVS employee who will work in MRI Zones 3 and 4 and the cleaning equipment that will be used in Zone 4
- Monitors the room when non-MRI personnel have access
- Checks to be sure that no metallic devices are brought into the room
- Ensures that no cleaning devices are brought into the room when a patient is on the table (unless the technologist has granted approval beforehand)



Notes:

Audio: Special safety guidelines are used to help the Environmental Services (EVS) team do its job.

7.7 Knowledge Check

(True/False, 0 points, 1 attempt permitted)

7.5 Environmental Services

Environmental Services

Slide 37 of 43

Review the MRI safety guidelines for Environmental Services (EVS).

General guidelines

At some sites, the EVS staff cleans the control room (Zone 3) and the scan room (Zone 4). The staff waxes the floor using a nonmetallic, handheld mop. (No buffers or pails are allowed.) In other facilities, the MRI staff is responsible for daily cleaning. The cleaning occurs during the day and the doors are locked at night.



Notes:

7-5

Audio: Special safety guidelines are used to help the Environmental Services (EVS) team do its job.

7.4 Special Considerations

Special Considerations

Slide 36 of 43

Pregnancy

- For all female patients of childbearing age, screen the patient prior to the MRI exam.
- For all patients who are pregnant and receiving contrast, notify the patient's referring physician or radiologist to determine the risk-health benefit to the patient prior to performing the MRI exam.



Notes:

7-4

Audio: Take special precautions with pregnant patients.

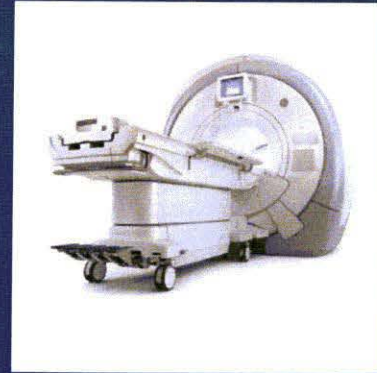
7.3 Safety Guidelines 2

Safety Guidelines

Slide 35 of 43

When you're **inside** the MRI scanning room, make sure to:

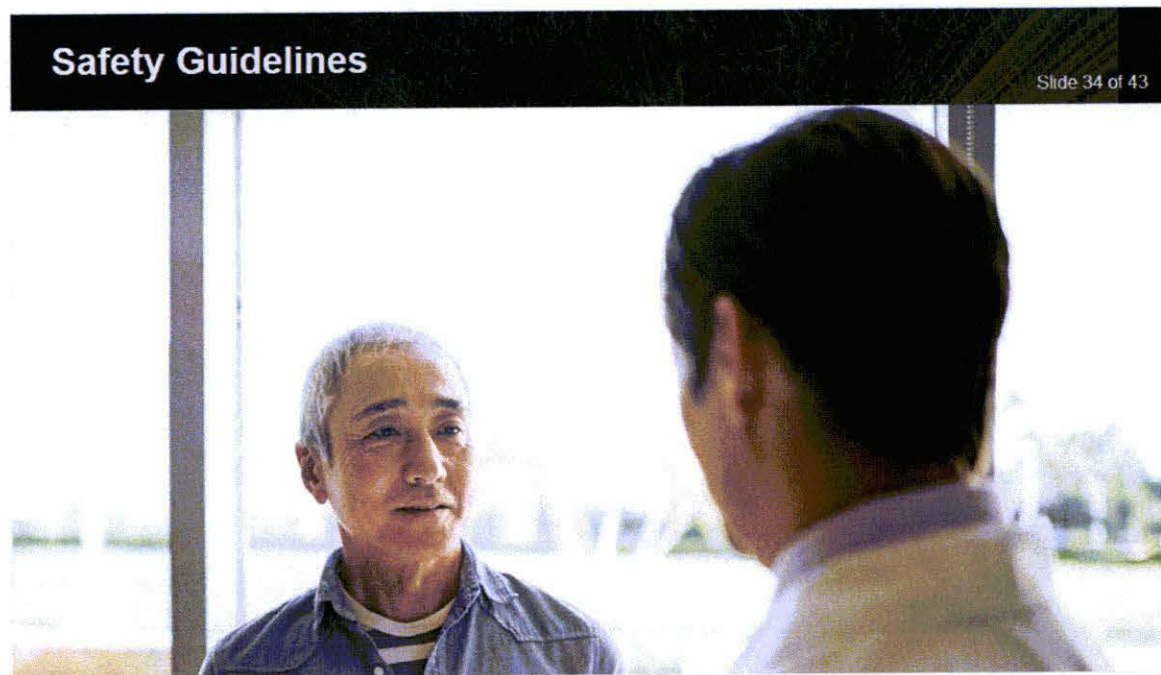
- Verify that a Level 2 MRI staff person (MRI technologist or radiologist) is present to oversee MRI safety when the magnet room is accessed.
- Use only MRI Conditional or MRI Safe patient monitoring equipment.
- Use the wall oxygen outlet in the magnet room where available.
- If needed, use patient suction with extended tubing to the stationary wall unit located inside and outside the magnet room.



Notes:

Audio: Ensuring the safety of patients and others in the MRI environment is your number one priority.

7.2 Safety Guidelines



Notes:

7-2

Audio: Ensuring the safety of patients and others in the MRI environment is your number one priority.

Incorrect (Slide Layer)

Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

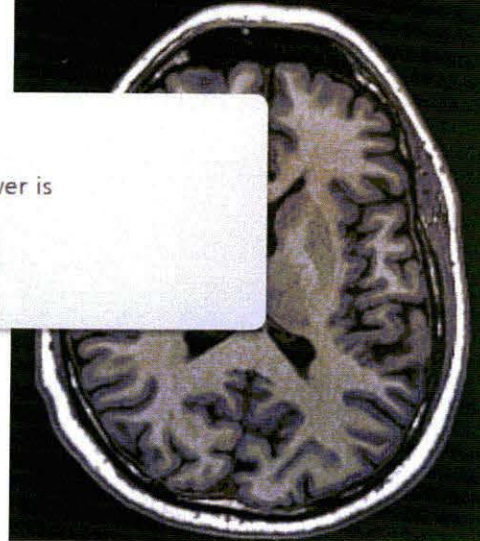
What can happen when the Quench button is pressed?

- ☐ Severe and superconduct
- ☐ Several da
- ☐ Very expen
- ☒ All of the above
- ☐ None of the above

Incorrect

That's incorrect. The correct answer is
All of the above.

Continue



7. Safety Guidelines

7.1 Safety Guidelines

Safety Guidelines



Feedback when correct:

Congratulations. The correct answer is

All of the above.

Feedback when incorrect:

That's incorrect. The correct answer is

All of the above.

Correct (Slide Layer)

Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

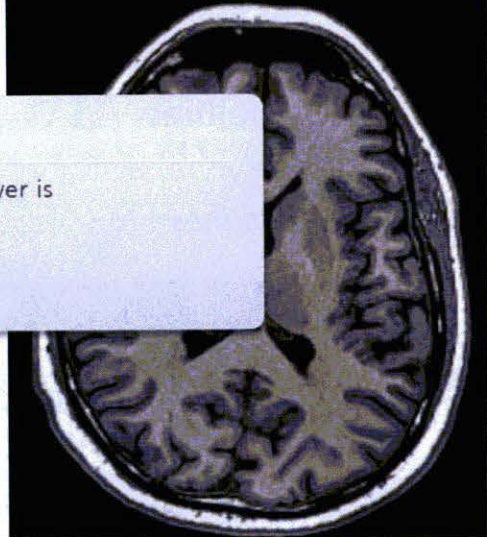
What can happen when the Quench button is pressed?

- ☐ Severe and rapid temperature rise
- ☐ Several days of downtime
- ☐ Very expensive repairs
- ☒ All of the above
- ☐ None of the above

Correct

Congratulations. The correct answer is
All of the above.

Continue



6-5

Audio: A Quench / Emergency Run Down situation can occur spontaneously or can be initiated manually. In either case, be sure to take the necessary actions.

6.7 Knowledge Check

(Multiple Choice, 0 points, 1 attempt permitted)

Knowledge Check

Slide 32 of 43

Check your understanding by answering this question:

What can happen when the Quench button is pressed?

- ☐ Severe and irreparable damage to the superconducting coils (magnet)
- ☐ Several days of downtime
- ☐ Very expensive damage to the MRI system
- ☒ All of the above
- ☐ None of the above

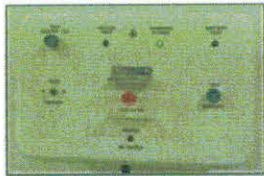


Correct	Choice
	Severe and irreparable damage to the superconducting coils (magnet)
	Several days of downtime
	Very expensive damage to the MRI system
X	All of the above
	None of the above

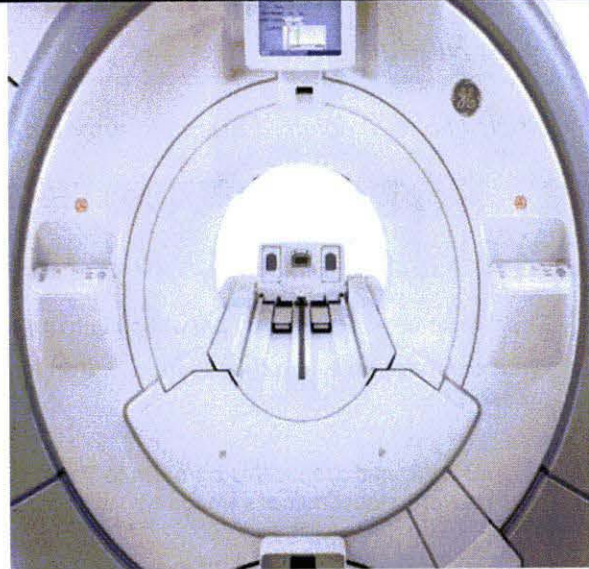
Error (Slide Layer)

Emergency Buttons

Click the image below.



Quench/Emergency Run Down



6.6 Quench/Emergency Run Down

Quench/Emergency Run Down

Slide 31 of 43

Review what to do—and what not to do—in quench emergency (and non-emergency) situations.

Emergency (patients or employees at risk)

- If possible, remove the patient from the scanning room before determining if a manual quench is required.
- **Do not** attempt to pull large magnetic objects (such as an oxygen tank) from the magnet. The object may change its magnetic polarity, re-align itself on the magnet, and become a projectile, causing injury.
- **Do not** touch a quenched magnet. (Under certain conditions, an electrical potential of **more than 1,000** volts can exist on the surface of the magnet.)

Non-emergency (patients or employees not at risk)

- Contact the appropriate service personnel. They have the specialized tools to handle non-emergency situations.

Only MRI Level 2 personnel are authorized to take this action.



Notes:

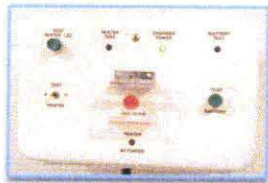
Audio: You should also know that the magnet is equipped with two emergency buttons--the **Emergency Stop/Shut Off** button and the **Quench/Emergency Run Down** button. You need to understand what these buttons do and how they are different. Let's look at each one.

Quench (Slide Layer)

Emergency Buttons

Slide 30 of 43

Click the image below.



Quench/Emergency Run Down

MRI Level 2 personnel are authorized to take this action.

Quench/Emergency Run Down

- **What it does:** Pressing this button causes immediate collapse of the superconductive magnetic field within minutes.
- **When to use:** Initiate in case of a true emergency (in which a magnetic object has pinned or impaled a person against the magnet and no other means are available to prevent further injury).
- **What to expect:** This action causes severe and irreparable damage to the superconducting coils (magnet), several days of downtime, and very expensive damage to the MRI system.

Error (Slide Layer)

Emergency Buttons

Slide 29 of 43

Click the image below.



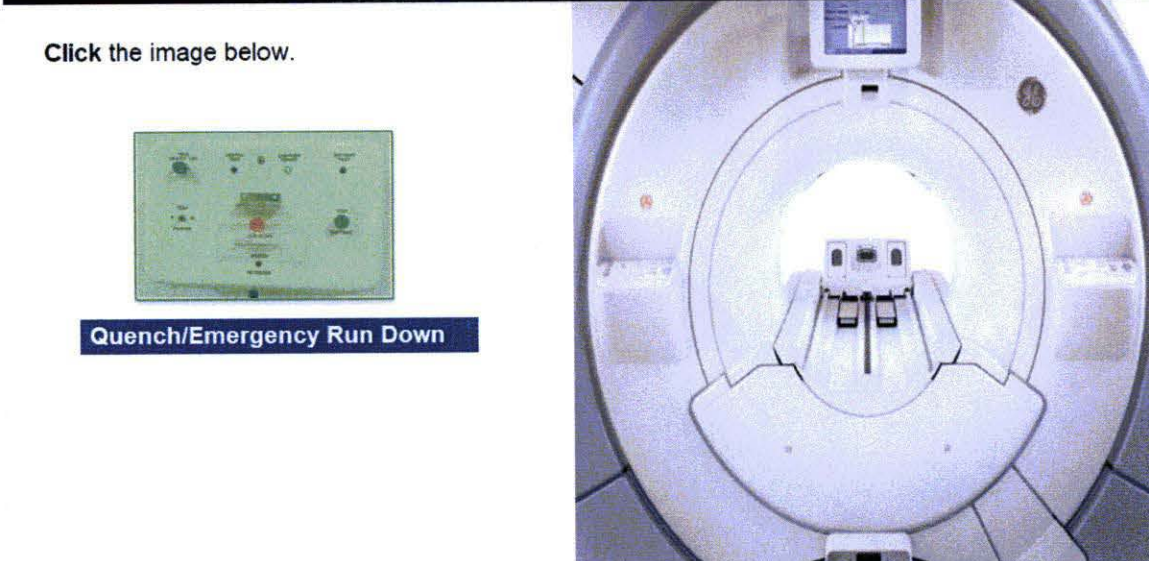
The image shows the interior of an MRI machine. A green emergency stop button is on the left, and a white control panel with various buttons is in the center. Labels point to these buttons: 'Emergency Stop/ Shut Off' for the green button and 'Quench/ Emergency Run Down' for the white panel.

**Familiarize yourself with these buttons.
Know the difference!**

6.5 Emergency Buttons 2

Emergency Buttons

Click the image below.



The image shows the interior of an MRI machine. A green emergency stop button is on the left, and a white control panel with various buttons is in the center. Labels point to these buttons: 'Emergency Stop/ Shut Off' for the green button and 'Quench/ Emergency Run Down' for the white panel.

Quench/Emergency Run Down

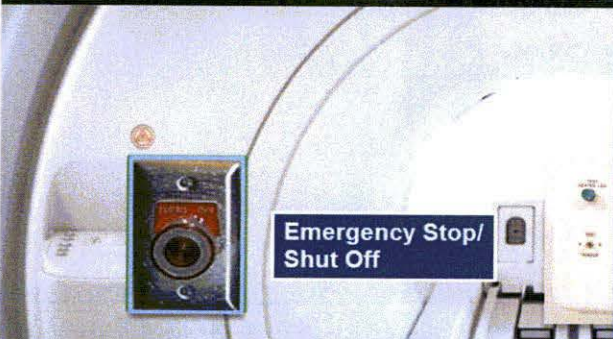
Notes:

Audio: You should also know that the magnet is equipped with two emergency buttons--the **Emergency Stop/Shut Off** button and the **Quench/Emergency Run Down** button. You need to understand what these buttons do and how they are different. Let's look at each one.

Emergency (Slide Layer)

Emergency Buttons

Slide 29 of 43



Emergency Stop/ Shut Off

MRI Level 1 and MRI Level 2 personnel are authorized to take this action.

Note: The MRI scanner also has an Emergency Stop/Shut Off switch located on the keyboard



Emergency Stop/Shut Off

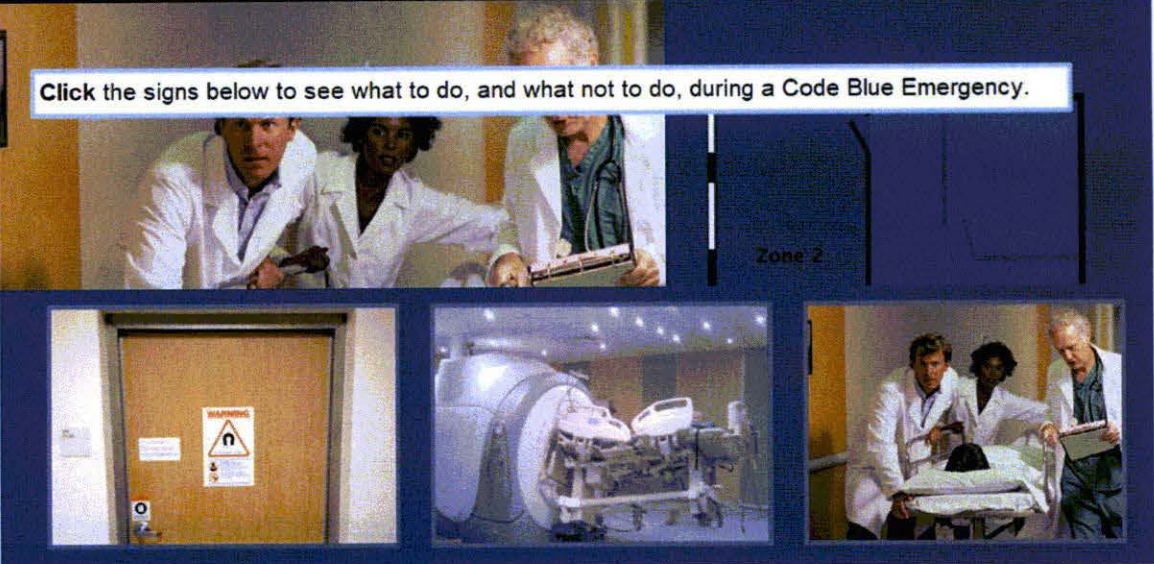
- **What it does:** Pressing this button turns off all incoming electrical power to the magnet Power Distribution Unit (PDU).
- **When to use:** Press when you need to shut down power to the PDU to prevent life-threatening situations (fire in the computer room; fire, sparks, or loud noises from the scan room; flooding caused by activation of the sprinkler system; or catastrophic equipment failure).
- **What to expect:** Power is shut down, but this action does not initiate a quench. **The magnet remains on!**

Error (Slide Layer)

Code Blue Emergency

Slide 28 of 43

Click the signs below to see what to do, and what not to do, during a Code Blue Emergency.



6.4 Emergency Buttons

Emergency Buttons

Slide 29 of 43



**Emergency Stop/
Shut Off**

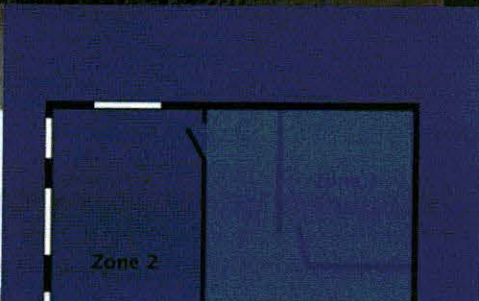
**Quench/
Emergency Run Down**

**Familiarize yourself with these buttons.
Know the difference!**

Notes:

Do Not (Slide Layer)

Code Blue Emergency Slide 28 of 43



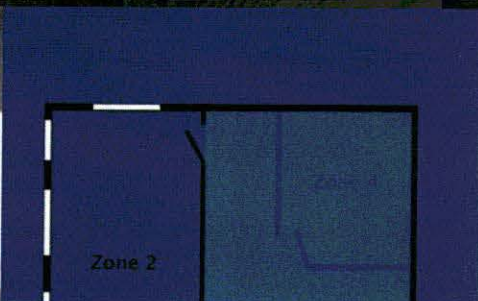
Do not do the following:

1. Do not bring the crash cart into MRI Zone 4, where the cart could become a projectile and be drawn forcefully into the scanner and injure someone (missile effect).
2. Do not, **under any circumstances**, allow a code team or member to enter MRI Zone 4.

Note: All emergency care is performed outside the magnet environment (Zone 4).

DO (Slide Layer)

Code Blue Emergency Slide 28 of 43



Do the following:

1. Move the patient or visitor safely and quickly from MRI Zone 4 into Zone 3 or Zone 2.
2. Close the door to prevent re-entry (lock the door and pull the chain across).
3. Activate the Code Blue button (local Code Blue workflows vary by site).

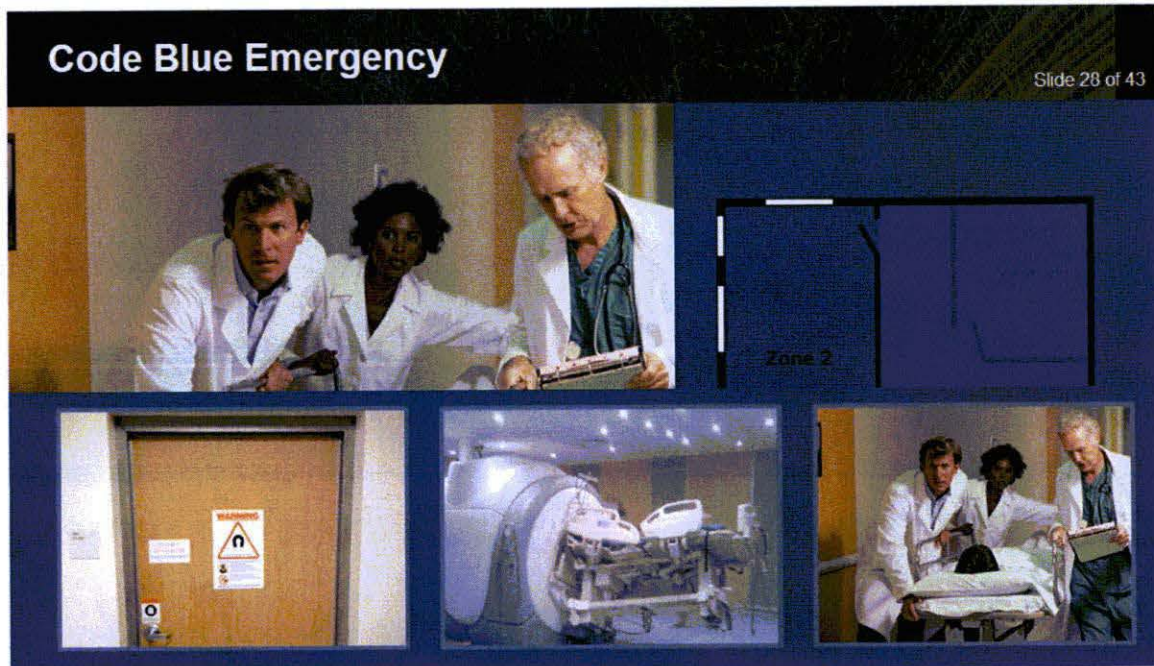
Note: Local Code Blue training and mock drills are recommended.

Notes:

6-2

Audio: : If an emergency develops in the MRI scanning room, follow the MRI Safety Guidelines policy to resolve the situation.

6.3 Code Blue Emergency



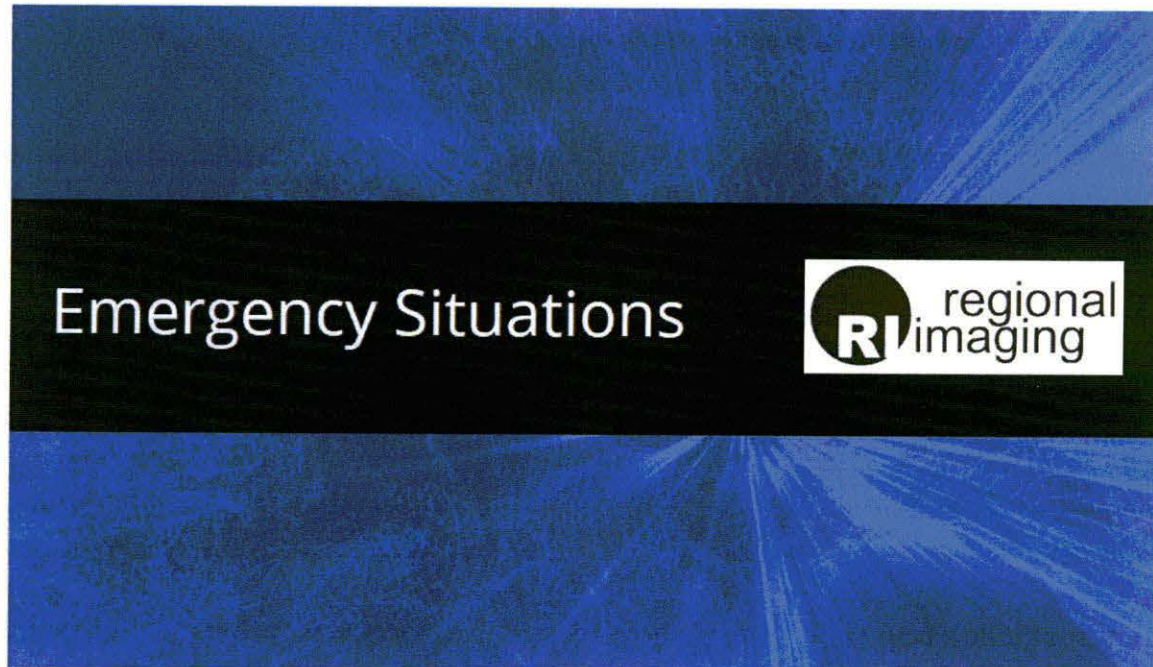
Notes:

6-3

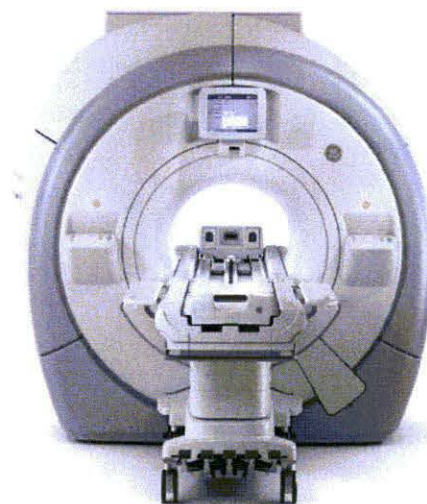
Audio: Whenever a patient or visitor is in medical distress while in safety zones 3 or 4, the situation is considered "code blue." This is an emergency, and that means the local facility operator must take appropriate action quickly. **The technologist should immediately undock the table and bring the patient into Zone 3.**

6. Emergency Situations

6.1 Emergency Situations



6.2 What to Do?



Correct (Slide Layer)

Knowledge Check

Slide 25 of 43

Check your understanding by answering this question:

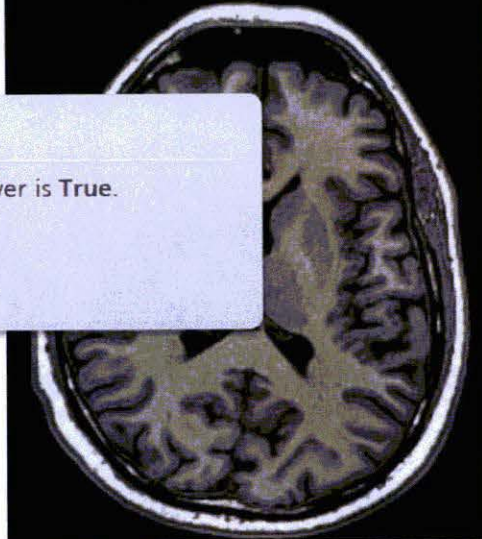
The "missile effect" refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

- ☒ True
- ☐ False

Correct

Congratulations. The correct answer is True.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 25 of 43

Check your understanding by answering this question:

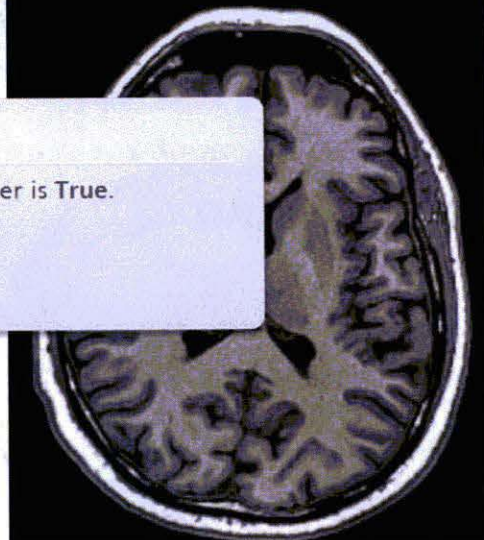
The "missile effect" refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

- ☒ True
- ☐ False

Incorrect

That's incorrect. The correct answer is True.

Continue



Knowledge Check

Slide 25 of 43

Check your understanding by answering this question:

The “missile effect” refers to ferromagnetic objects being pulled into the scanner because of the powerful magnetic field.

☒ True

☐ False



Correct	Choice
X	True
	False

Feedback when correct:

Congratulations. The correct answer is True.

Feedback when incorrect:

That's incorrect. The correct answer is True.

5-7

Audio: Special care needs to be taken with all portable metallic or partially metallic objects.

5.8 Clothing Embedded With Metal Fibers

Clothing Embedded With Metal Fibers

Slide 24 of 43

To avoid the possibility of burns caused by metal objects or clothing embedded with metallic microfibers, take the following precautions:

- Remove metal objects in the patients' possession.
- Dress all patients in MRI-appropriate attire.
- For the safety of the patient and others in MRI Zone 4, patients will be asked to remove all clothing and footwear prior to entering MRI Zone 3.
- All patients must remove all clothing and footwear, and be provided with a metal-free gown and slip-proof booties (or asked to remove shoes when getting onto the MRI table). Shoes and sandals are removed because they may contain metal shanks, which would be unsafe in the Zone 3 environment.

Patient attire



Notes:

5-7

Audio: Sometimes it not easy to know whether an item is metallic or contains metal.

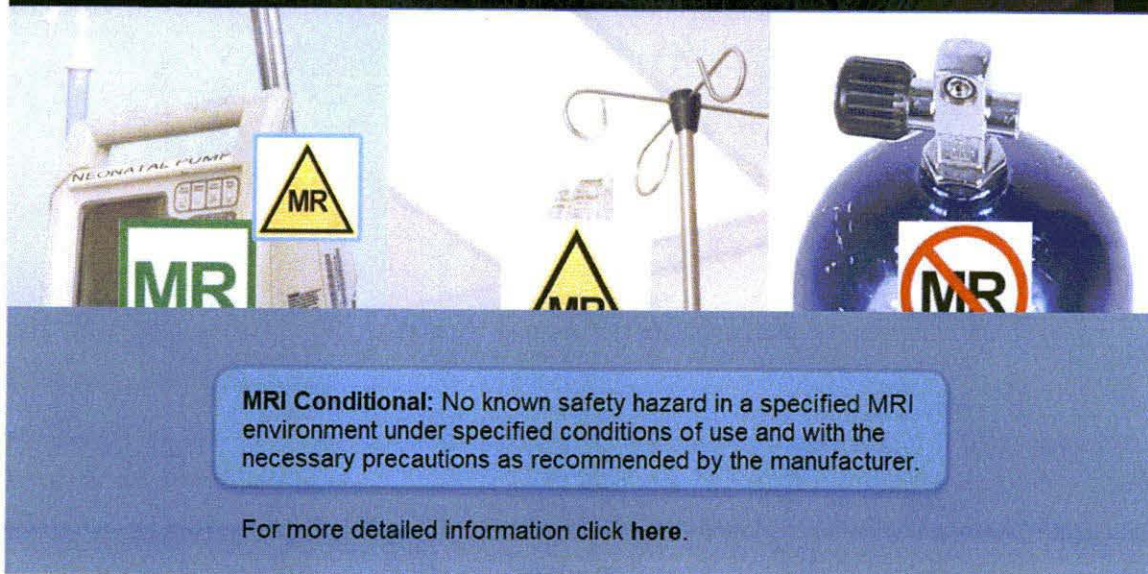
5.9 Knowledge Check

(True/False, 0 points, 1 attempt permitted)

MRI Conditional (Slide Layer)

Equipment Labels

Slide 22 of 43



5.7 Metal Objects

Metal Objects

Slide 23 of 43

All portable metallic or partially metallic devices that are on or external to the patient (such as oxygen cylinders) are to be positively identified in writing as MRI Unsafe, and are not permitted into MRI Zones 3 or 4. Alternatively, MRI Safe or MRI Conditional equipment is to be identified and labeled before being permitted into Zone 3.

For all device or object screening, verification and positive identification are required prior to allowing devices or objects into MRI Zone 4. Examples of devices that need to be positively identified include fire extinguishers, oxygen tanks, and aneurysm clips.



Notes:

MRI NO (Slide Layer)

Equipment Labels

Slide 22 of 43



If an MRI Conditional device must be maintained, per the manufacturer's guidelines, at a designated gauss level relative to the MRI system, the area or gauss line must be clearly demarcated on the floor of the MRI scanning room, and all employees must be educated regarding the importance of maintaining the device at or behind this specifically marked area.

A sign must be posted on the unit regarding the acceptable conditions of use. For example, the label may state, "Do not position closer than 200 gauss from the MRI system." The sign should also indicate that the staff has carefully reviewed the specific MRI Conditional information provided by the manufacturer of the device prior to its use.

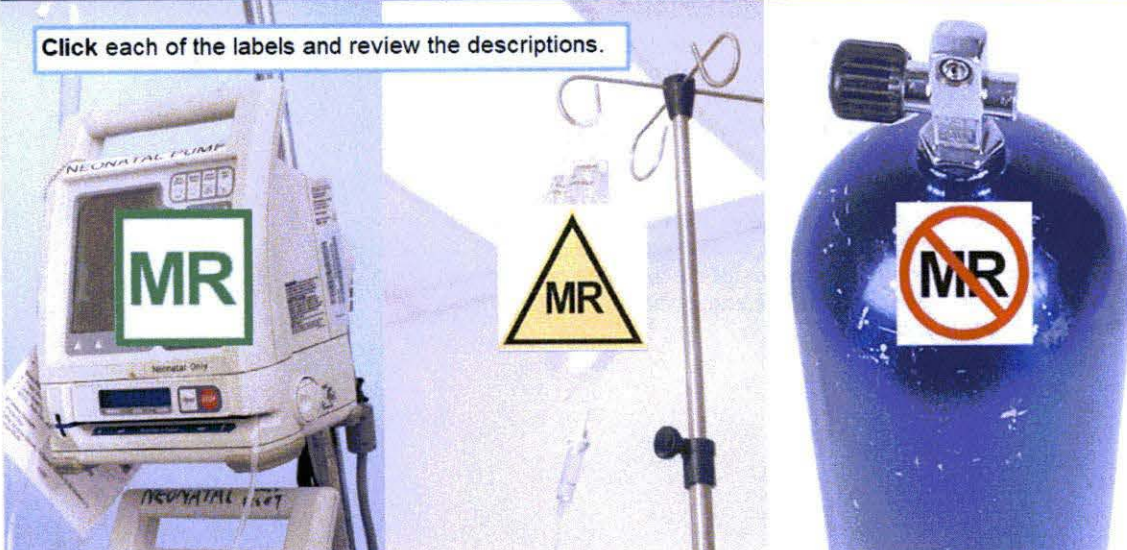
Reminder: Non-MRI Level 2 personnel and equipment must be approved entrance into MRI Zone 4 prior to the individual or equipment leaving MRI Zone 3.

Error (Slide Layer)

Equipment Labels

Slide 22 of 43

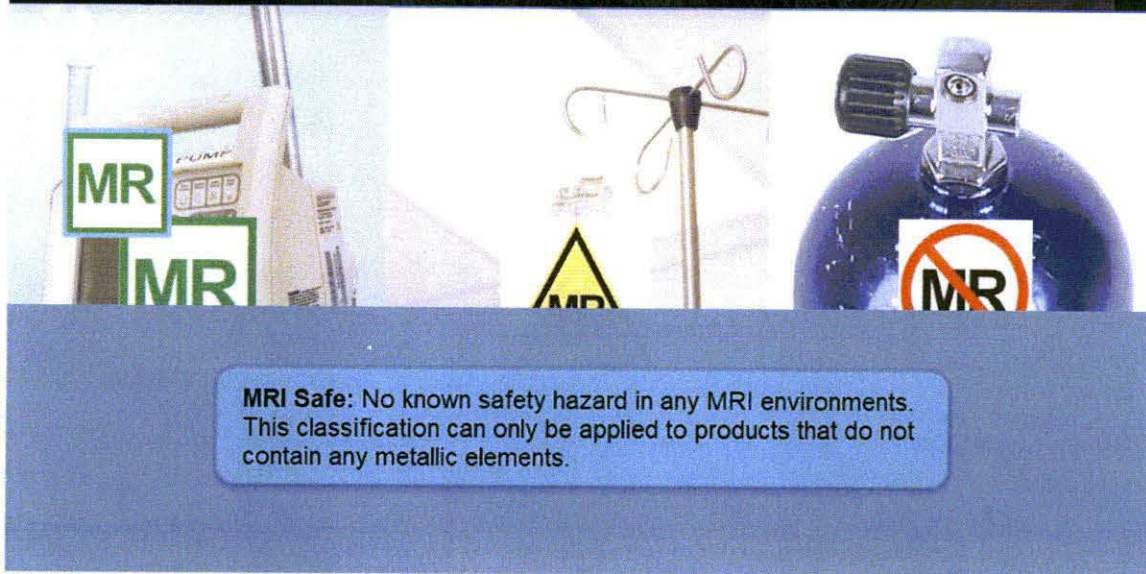
Click each of the labels and review the descriptions.



MRI Safe (Slide Layer)

Equipment Labels

Slide 22 of 43

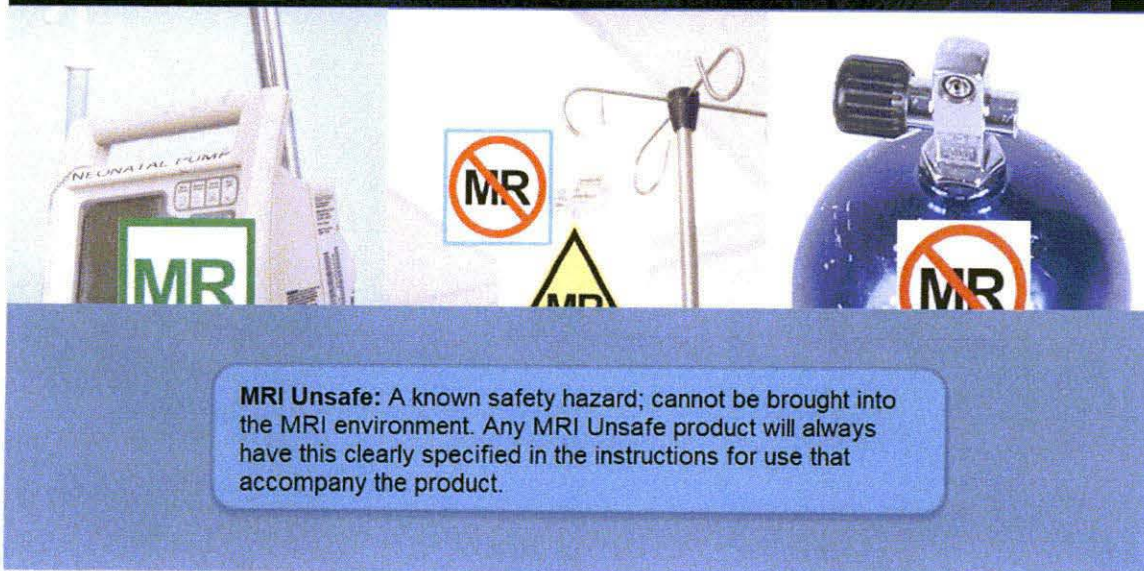


MRI Safe: No known safety hazard in any MRI environments. This classification can only be applied to products that do not contain any metallic elements.

MRI Unsafe (Slide Layer)

Equipment Labels

Slide 22 of 43



MRI Unsafe: A known safety hazard; cannot be brought into the MRI environment. Any MRI Unsafe product will always have this clearly specified in the instructions for use that accompany the product.

5.6 Equipment Labels



Notes:

5-6

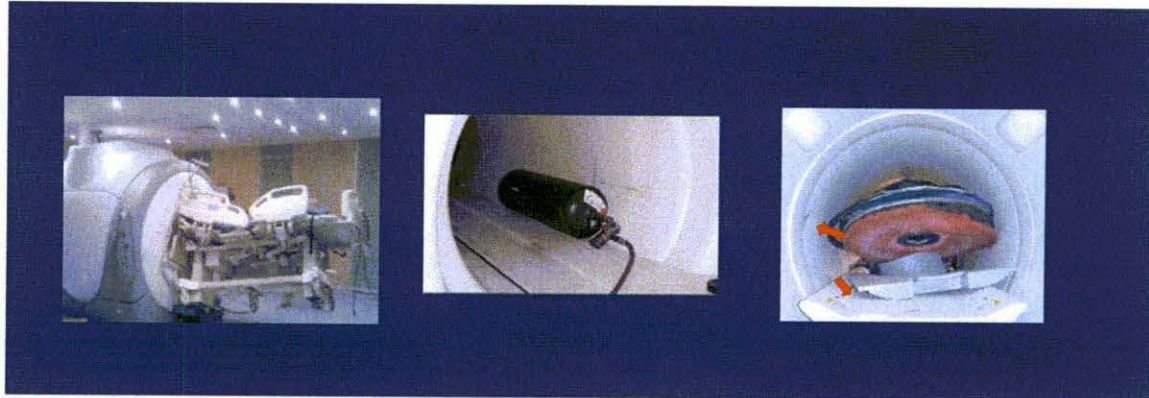
Audio: Sometimes, it's hard to know whether an item, device, or piece of equipment is a hazard in the MRI suite. It helps when equipment is clearly labeled, either by the manufacturer or MRI personnel.

5.5 "Missile Effect"

"Missile Effect"

Slide 20 of 43

The static magnetic field of an MRI scanner exerts forces on ferromagnetic or other ferrous materials that are unrestrained, causing these objects to become airborne (such as an oxygen canister or a pair of scissors), which may result in injuries to anyone (including patients) in Zone 4.



Notes:

5-4

NO AUDIO

No audio.

Untitled Layer 1 (Slide Layer)



Florian Banchies and his mother Fabrice
Image courtesy of David Vandenbroucke, *Courtesy: France*

August 11, 2015 -- A 10-year-old French boy lost his thumb during a routine MRI examination of the pancreas, according to a report in the *Courier Picard* newspaper. An apparent error at the CHU hospital in Amiens, France, left patient Florian Banchies in the scanner with a metal rod device attached to his thumb, which the report said was "burned through to the bone."

The boy was under anesthesia during the scan and did not notice the burning until it was too late, when he started screaming in pain, according to his mother. She claims that the medical staff failed to inform her of the accident, and that her son, who has Down syndrome, spent several tormented hours screaming in the emergency room, according to the article published on 4 August. "I guess they forgot something on the finger that was not compatible with MRI," a senior French radiologist told *AmiOnlineEurope.com*. "August is a favorable period for problems. Regular workers are on vacation and interim, inexperienced people are sometimes used." The radiologist also added "this is just a thought, and no proof is available."

"It's very difficult for the Banchies family. Florian has a big problem with his pancreas and doctors cannot

Error (Slide Layer)

Potential MRI Injuries

Slide 19 of 43

Click the images below to learn about different types of MRI injuries.

A woman in a white hospital gown is sitting on an MRI table, preparing for a scan. She is looking down at her arm. The MRI machine is visible in the background.

5.4 Burns

Burns

Slide 21 of 43

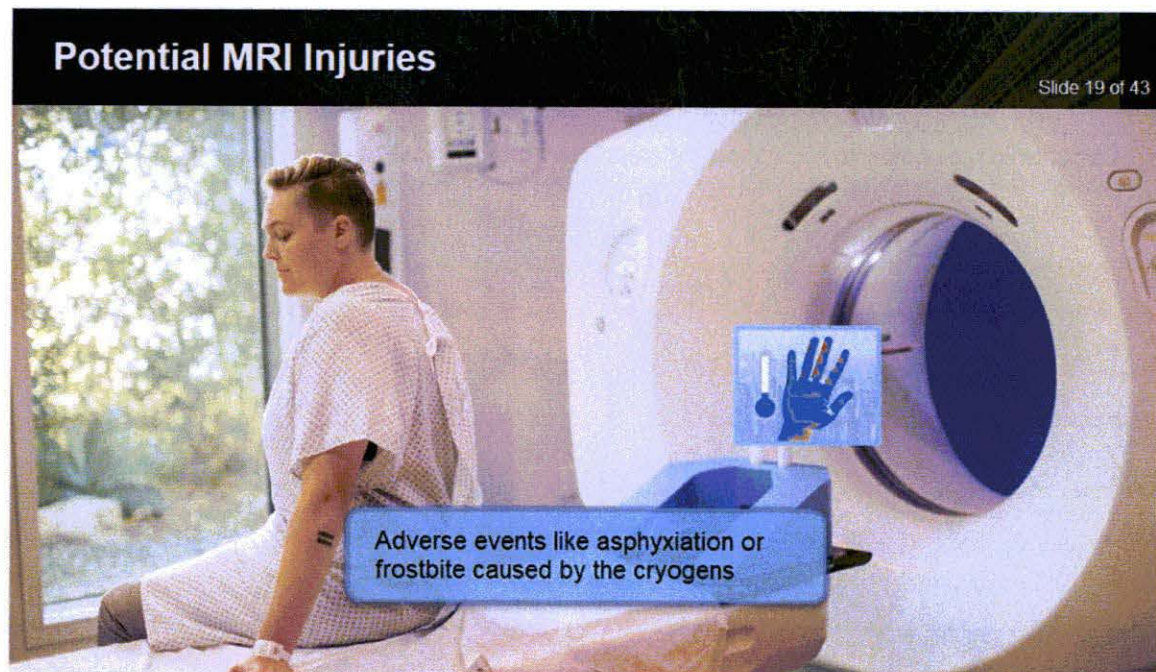
It is possible for patients to get first, second, or even third degree burns during an MRI procedure. This can occur, for example, if items like ECG cables become looped and contact the patient's skin (even if these devices are MRI compatible). Cables **should not** touch a patient's skin directly and **should not** be in a looped configuration. Metal objects that contact the skin, such as snaps or buttons, can also cause serious burns. Per the FDA database, 70% of MRI complications are related to thermal burns.

Three images showing burn incidents: a woman and child in a hospital bed, a close-up of a severe burn on a shoulder, and a close-up of a burn on a hand.

Click the image on the left to read about a serious burn incident that occurred in the MRI scanning room.

Notes:

Frostbite (Slide Layer)



Missile effect (Slide Layer)



Burn (Slide Layer)



Ear (Slide Layer)



5-3

Audio: When the MRI guidelines are ignored, injuries may result. In some cases, these injuries can be serious.

Pacemaker-Heart (Slide Layer)

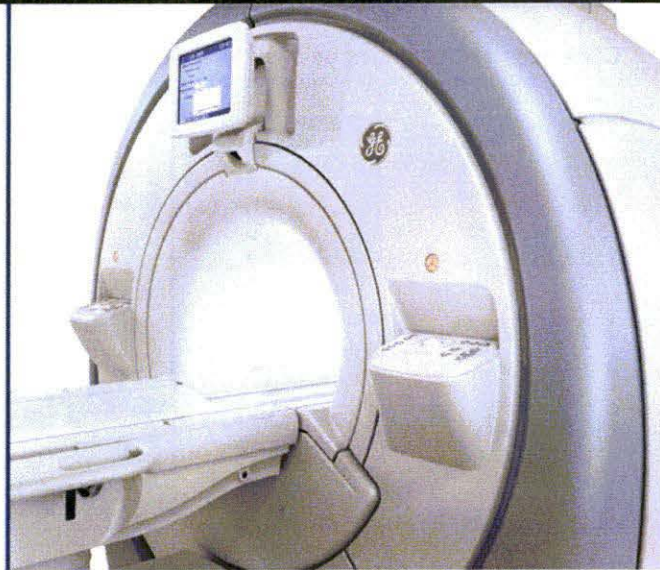


Error (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



5.3 Potential MRI Injuries

Potential MRI Injuries

Slide 19 of 43



Notes:

Firearm (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



A firearm discharged spontaneously within MRI Zone 4.

Gurney (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



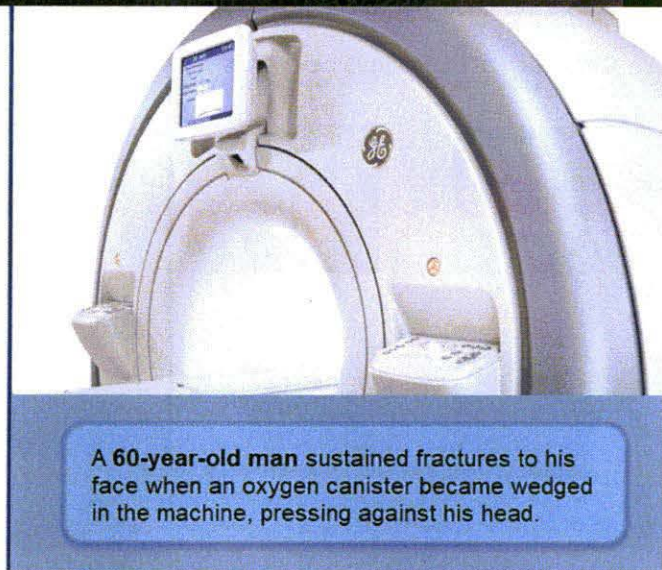
A non-MRI-safe gurney was used in the MRI environment, where it became airborne and fractured a patient's leg.

60 man (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.

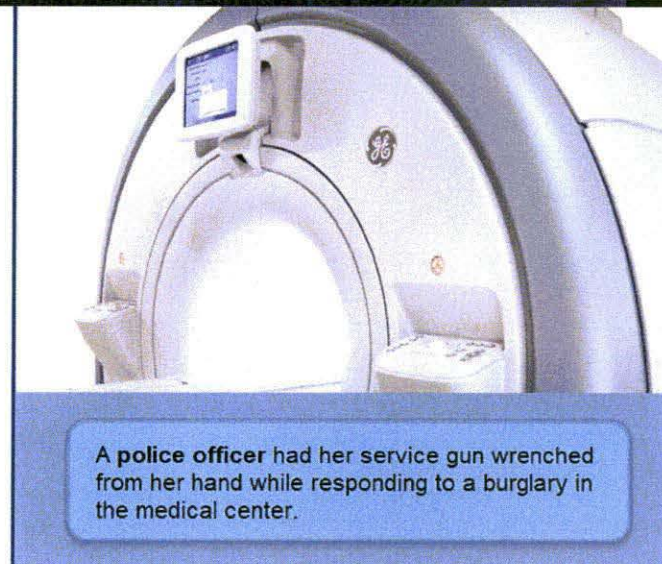


Police (Slide Layer)

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



5.2 MRI-Related Incidents

MRI-Related Incidents

Slide 18 of 43

Click each of the images below.



Notes:

5-2

Audio: MRI-related accidents can and do happen. You need to take precautions to prevent injuries and other dangerous incidents.

Try Again (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Incorrect

That is incorrect. Please try again.

Try Again



5. Injury Prevention

5.1 Injury Prevention

Injury Prevention



Correct (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

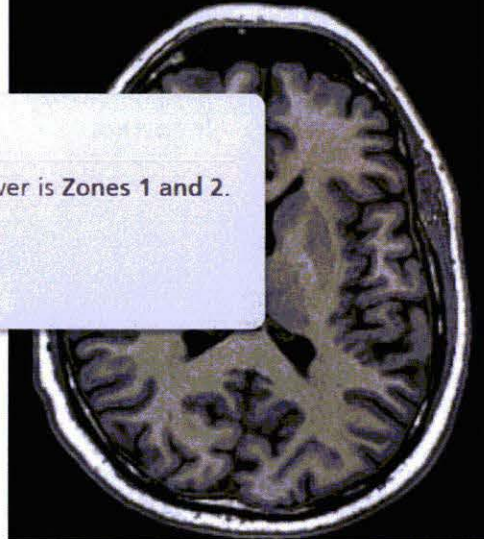
Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Correct

Congratulations. The correct answer is Zones 1 and 2.

Continue



Incorrect (Slide Layer)

Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

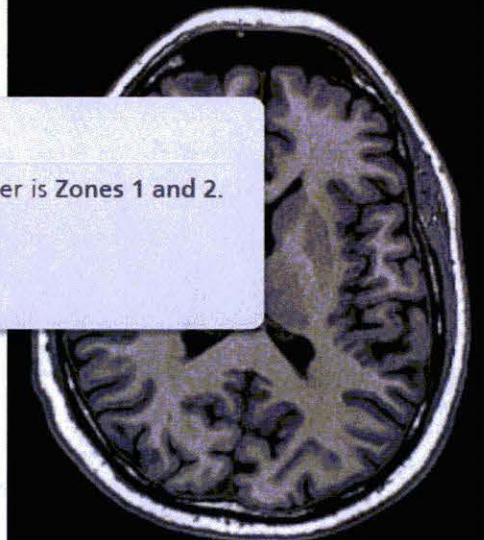
Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above

Incorrect

That's incorrect. The correct answer is Zones 1 and 2.

Continue



4.6 Knowledge Check

(Multiple Choice, 0 points, 2 attempts permitted)

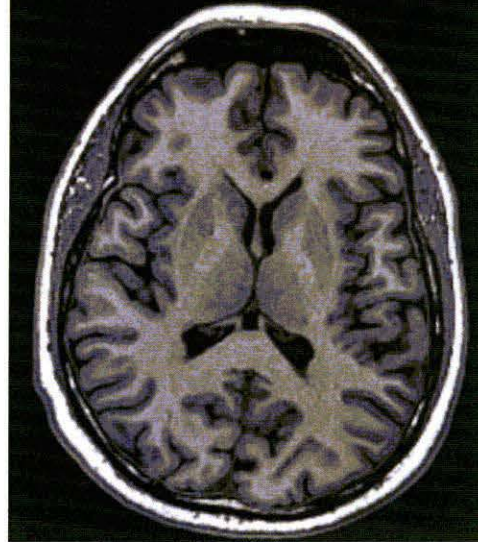
Knowledge Check

Slide 16 of 43

Check your understanding by answering this question:

Non-MRI personnel are allowed unsupervised access to which of the following safety zones?

- ☒ Zones 1 and 2
- ☐ Zones 2 and 3
- ☐ Zones 3 and 4
- ☐ None of the above



Correct	Choice
X	Zones 1 and 2
	Zones 2 and 3
	Zones 3 and 4
	None of the above

Feedback when correct:

Congratulations. The correct answer is Zones 1 and 2.

Feedback when incorrect:

That's incorrect. The correct answer is Zones 1 and 2.

2 (Slide Layer)

Non-MRI Personnel

Slide 15 of 43

Can my wife be with me in the MRI scanning room?

Unaccompanied access to Zones 3 and 4 is **not permitted**. Level 2 personnel must first perform an MRI screening of all individuals before they are permitted supervised access to Zone 3 or Zone 4.

Error (Slide Layer)

Non-MRI Personnel

Slide 15 of 43

Click the figures below to reveal how requests from non-MRI personnel are handled.

4-5

Audio: Staff members with MRI Level 1 or Level 2 status have different responsibilities with regard to non-MRI personnel.

1 (Slide Layer)



Error (Slide Layer)

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



4.5 Non-MRI Personnel

Non-MRI Personnel

Slide 15 of 43



Notes:

No audio

Untitled Layer 1 (Slide Layer)

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



Level 2: Activities and responsibilities

- Required to accompany and monitor non-MRI personnel who are under his or her immediate supervision with visual or verbal contact during their entire time within Zones 3 and 4
- Not allowed to authorize a Level 2 MRI technologist to relinquish his or her responsibility to supervise non-MRI personnel within Zones 3 or 4 unless such supervision has been formally transferred to another Level 2 MRI technologist
- Must screen all equipment and every individual who enters MRI Zone 4 (every time, all the time)

The Level 2 technologist and radiologist have the highest authority.

Error (Slide Layer)

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



4.4 MRI Level 2 Personnel

MRI Level 2 Personnel

Slide 14 of 43

Click the figure below to reveal the actions that a person with MRI Level 2 training can perform.



Notes:

No audio

Untitled Layer 1 (Slide Layer)

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



Level 1: Activities and responsibilities

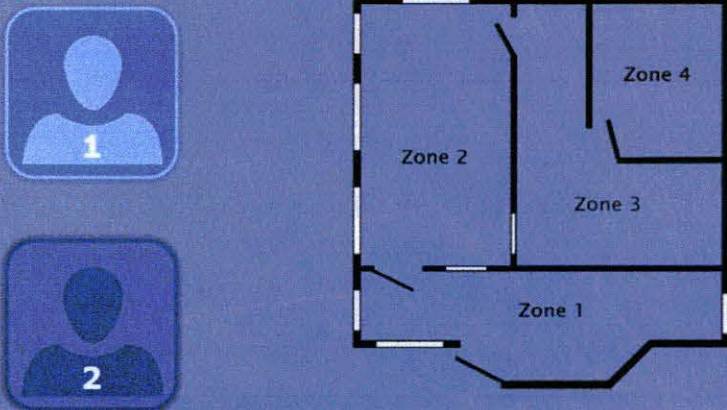
- Allowed unsupervised access throughout Zones 1-4 as long as they are not accompanying non-MR personnel
- Explicitly permitted to be responsible for accompanying non-MRI personnel into and throughout Zone 3, **but not Zone 4**
- Not permitted to directly admit, or be designated responsible for, non-MRI personnel or patients in Zone 4

Error (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43

Click both icons below.



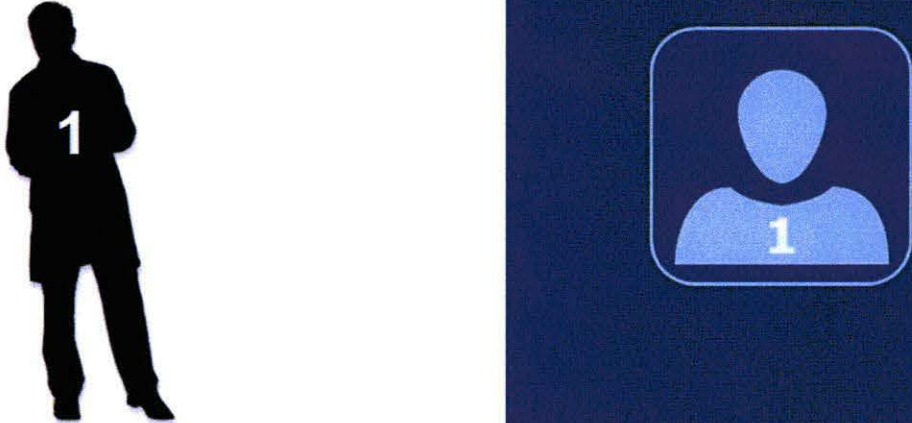
The slide features two person icons on the left, labeled '1' and '2'. To the right is a floor plan diagram divided into four zones: Zone 1 (bottom), Zone 2 (top left), Zone 3 (top right), and Zone 4 (top right, above Zone 3). The zones are connected by a central corridor.

4.3 MRI Level 1 Personnel

MRI Level 1 Personnel

Slide 13 of 43

Click the figure below to reveal the actions that a person with MRI Level 1 training can perform.



The slide contains two elements: a silhouette of a person labeled '1' on the left, and a person icon labeled '1' on the right. The icon is a blue silhouette of a person's head and shoulders, set against a dark blue background.

Notes:

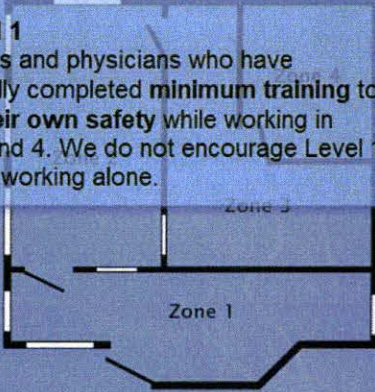
Untitled Layer 1 (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43



MRI Level 1
Employees and physicians who have successfully completed **minimum training** to ensure **their own safety** while working in Zones 3 and 4. We do not encourage Level 1 personnel working alone.





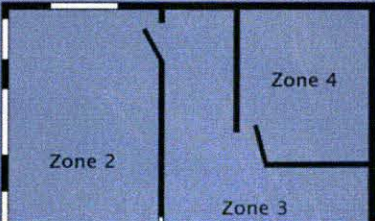
Untitled Layer 2 (Slide Layer)

MRI Level 1 and Level 2 Training

Slide 12 of 43

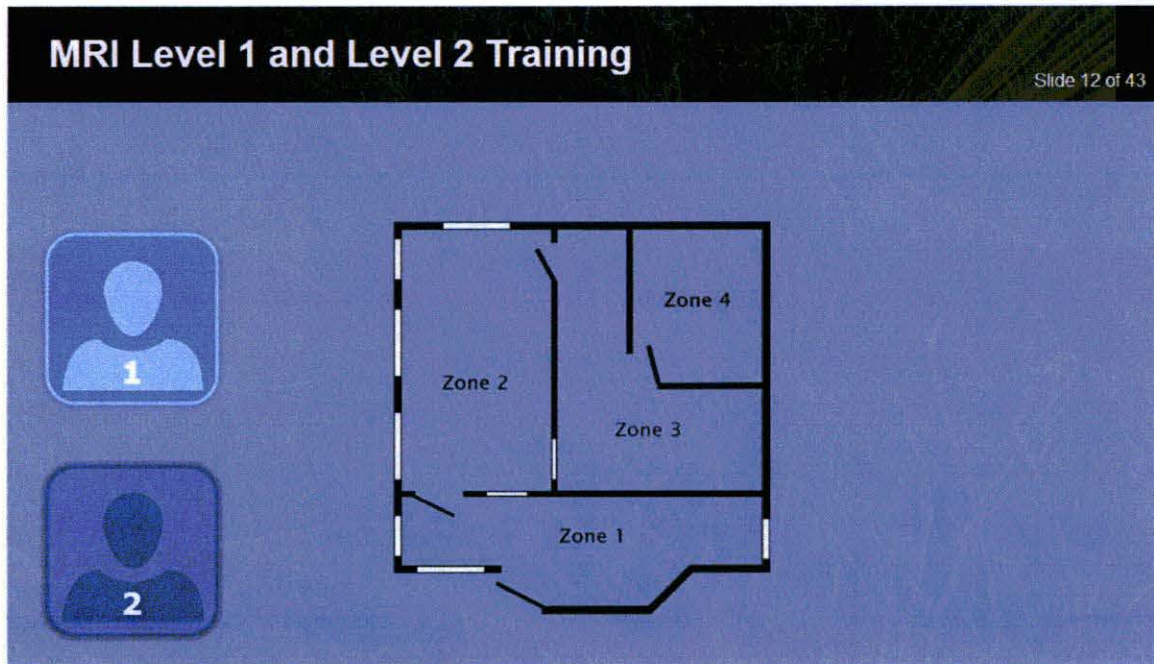


MRI Level 2
Employees and physicians who have successfully completed **more extensive training** to ensure **their own safety and the safety of others** in Zones 3 and 4





4.2 MRI Level 1 and Level 2 Training



Notes:

Audio: Access to the four MRI safety zones depends on whether you have completed safety training to earn either MRI Level 1 or Level 2 status.

Incorrect (Slide Layer)

Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

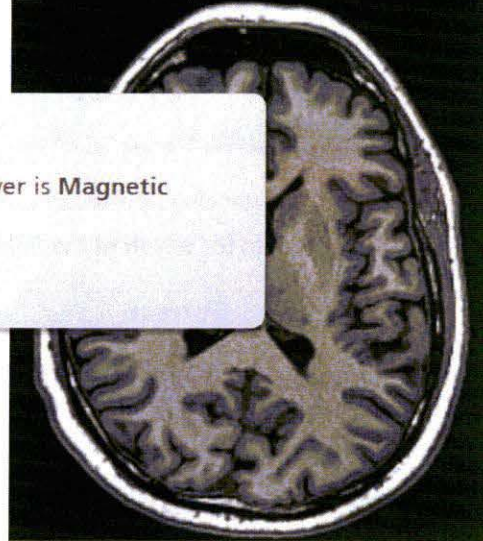
MRI is an acronym for which of the following:

- ☐ Magnified
- ☐ Maximum
- ☒ Magnetic I
- ☐ None of th

Incorrect

That's incorrect. The correct answer is **Magnetic Resonance Imaging**.

Continue



4. MRI Personnel

4.1 MRI Personnel

MRI Personnel



Audio: Before we proceed, let's do a quick knowledge check.

Correct (Slide Layer)

Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

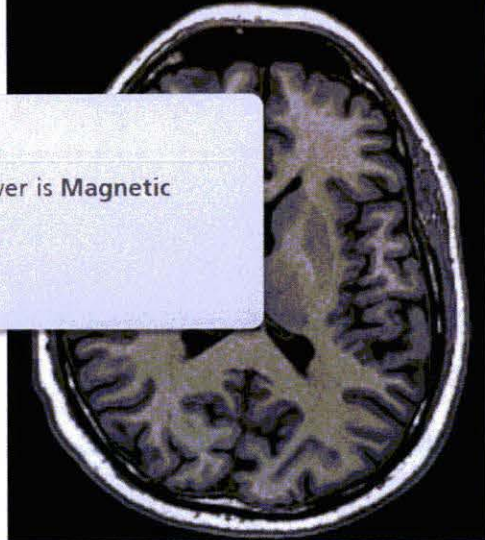
MRI is an acronym for which of the following:

- ☐ Magnified
- ☐ Maximum
- ☒ Magnetic
- ☐ None of the

Correct

Congratulations. The correct answer is **Magnetic Resonance Imaging**.

Continue



3.3 Knowledge Check

(Multiple Choice, 0 points, 1 attempt permitted)

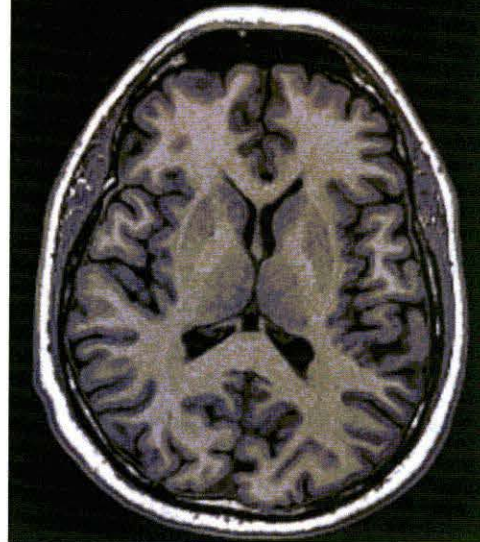
Knowledge Check

Slide 10 of 43

Check your understanding by answering this question:

MRI is an acronym for which of the following:

- ☐ Magnified Resonance Imaging
- ☐ Maximum Resonance Imaging
- ☒ Magnetic Resonance Imaging
- ☐ None of the above



Correct	Choice
	Magnified Resonance Imaging
	Maximum Resonance Imaging
X	Magnetic Resonance Imaging
	None of the above

Feedback when correct:

Congratulations. The correct answer is Magnetic Resonance Imaging.

Feedback when incorrect:

That's incorrect. The correct answer is Magnetic Resonance Imaging.

Notes:

zone4 (Slide Layer)

Four Safety Zones

Slide 9 of 43



DANGER PELIGRO
Magnetic Field Safety Zone 4
Campo Magnético Zona de seguridad 4
ACCESS RESTRICTED ACCESO RESTRINGIDO
Direct Observation by MRI
Authorized Staff Required on All Times
En todo momento se requiere la observación directa por parte del personal autorizado de MRI

Zone 4 - The MRI exam suite, where the MRI unit emits a **strong magnetic field** and where all persons are **accompanied** by specially trained (Level 2) MRI personnel for the safety of all individuals entering Zone 4



Error (Slide Layer)

Four Safety Zones

Slide 9 of 43

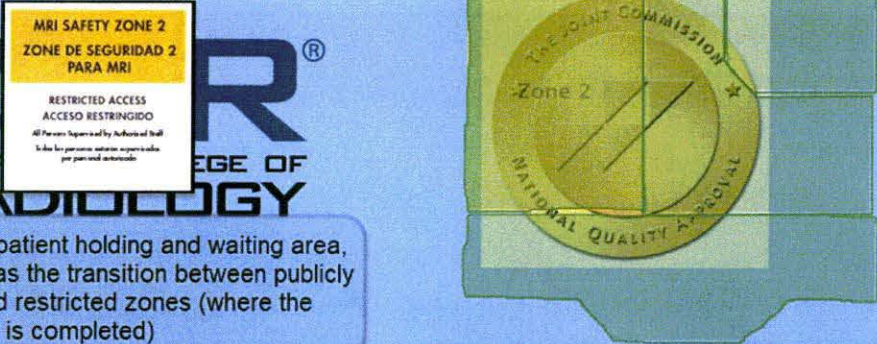
Click each zone on the floor diagram.



zone2 (Slide Layer)

Four Safety Zones

Slide 9 of 43



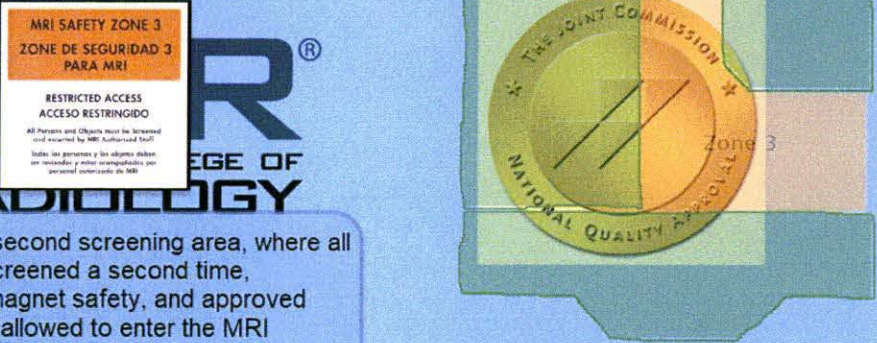
The sign for MRI Safety Zone 2 is yellow with black text. It reads: "MRI SAFETY ZONE 2", "ZONE DE SEGURIDAD 2 PARA MRI", "RESTRICTED ACCESS", "ACCESO RESTRINGIDO", and "All Persons Supervised by Authority of Staff". Below the sign is a diagram of an MRI suite with a yellow circle labeled "Zone 2" in the center, representing the patient holding and waiting area.

Zone 2 - The patient holding and waiting area, which serves as the transition between publicly accessible and restricted zones (where the first screening is completed)

zone3 (Slide Layer)

Four Safety Zones

Slide 9 of 43



The sign for MRI Safety Zone 3 is orange with black text. It reads: "MRI SAFETY ZONE 3", "ZONE DE SEGURIDAD 3 PARA MRI", "RESTRICTED ACCESS", "ACCESO RESTRINGIDO", and "All Persons and Objects must be screened and accepted by MRI Authorized Staff". Below the sign is a diagram of an MRI suite with an orange circle labeled "Zone 3" in the center, representing the second screening area.

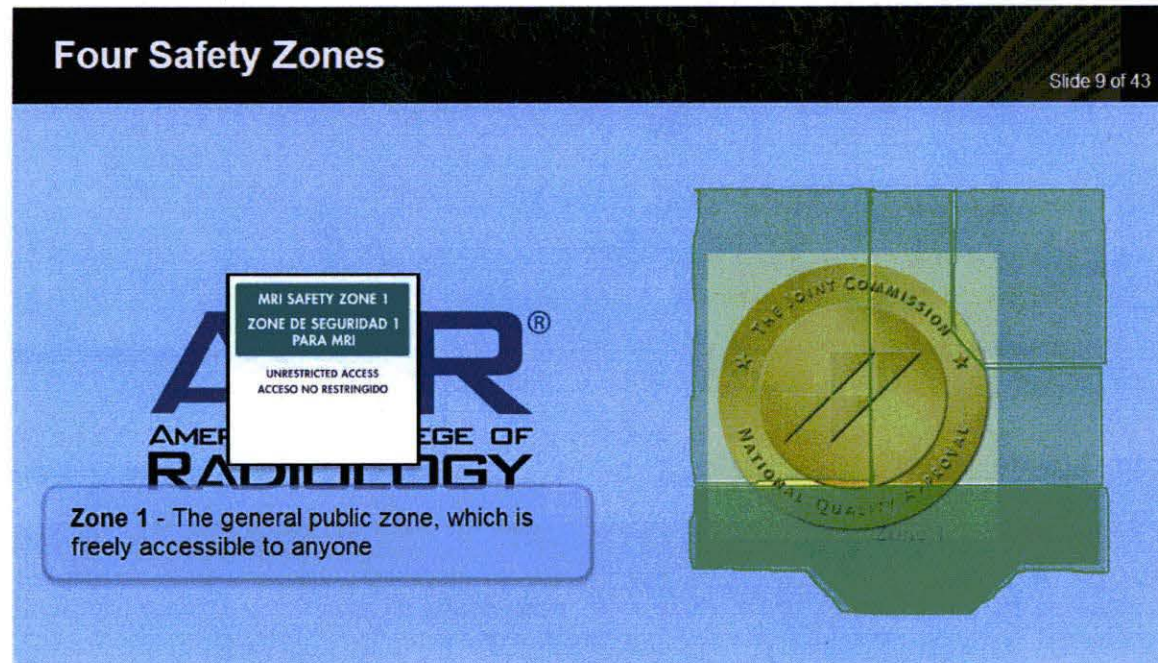
Zone 3 - The second screening area, where all persons are screened a second time, educated on magnet safety, and approved before they're allowed to enter the MRI scanning room (Zone 4)

Notes:

3-2

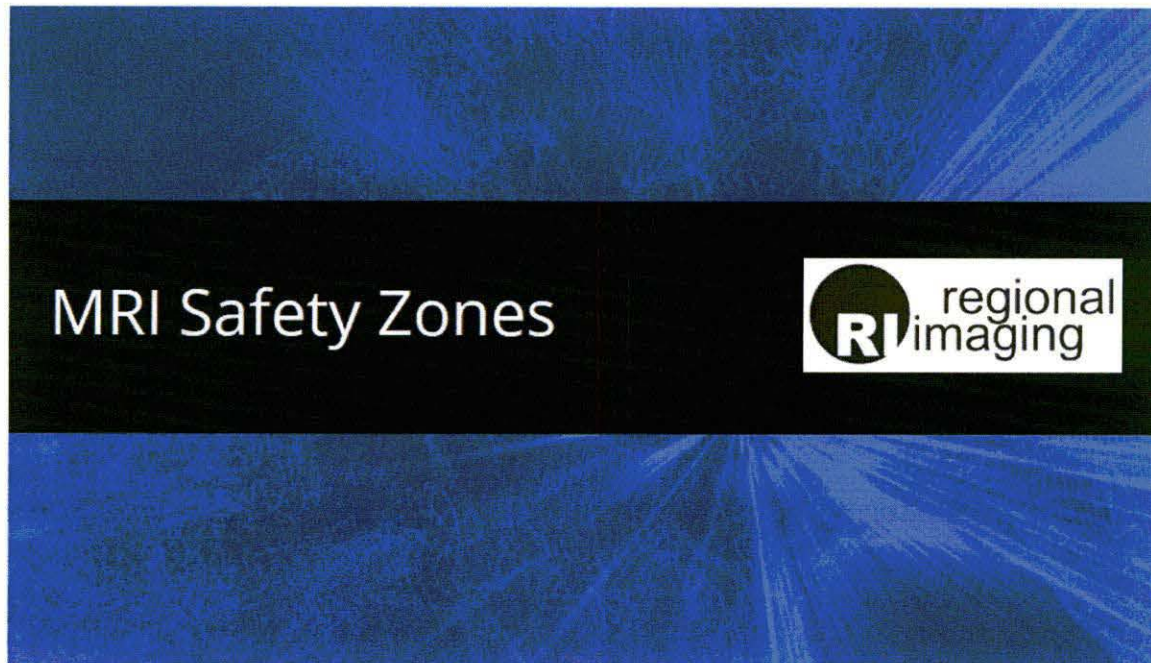
Audio: To provide strict guidance on access to the MRI environment, the American College of Radiology and The Joint Commission have implemented the Four Zone concept.

zone1 (Slide Layer)

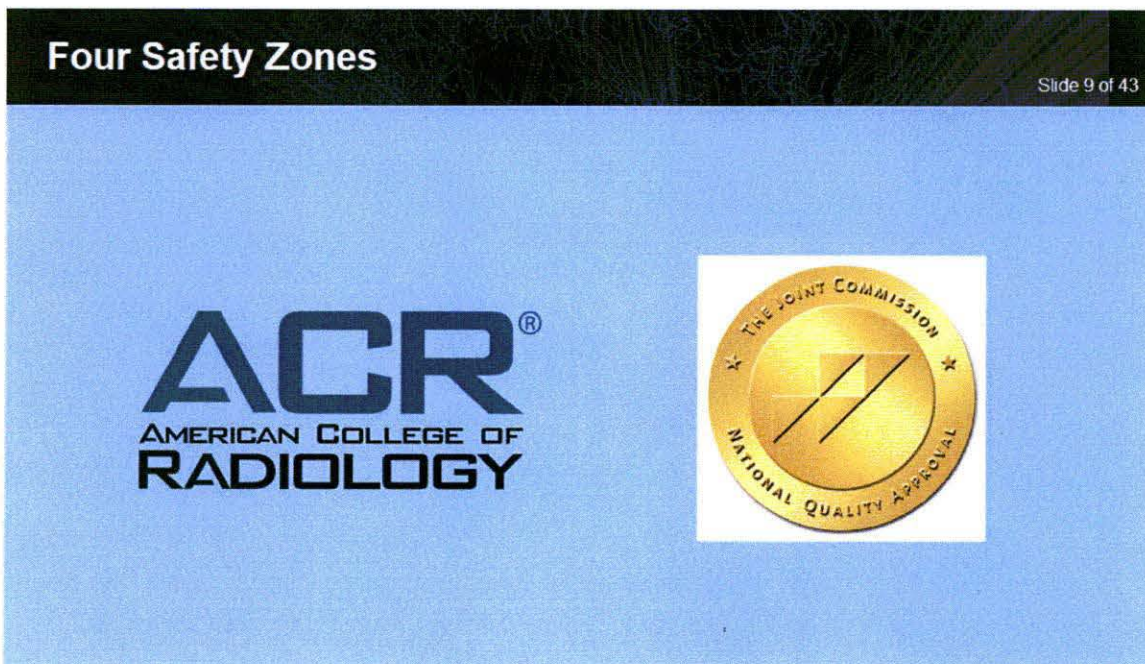


3. MRI Safety Zones

3.1 MRI Safety Zones



3.2 Four Safety Zones



2.7 Always Remember

Always Remember

Slide 7 of 43

If you remember nothing else about this course,
remember these words...



Notes:

Audio: You'll want to keep these words in mind whenever you enter the MRI scanning room.

2.6 The Magnet Is Always On

The Magnet Is Always On Slide 6 of 43

“The magnet is always on!”

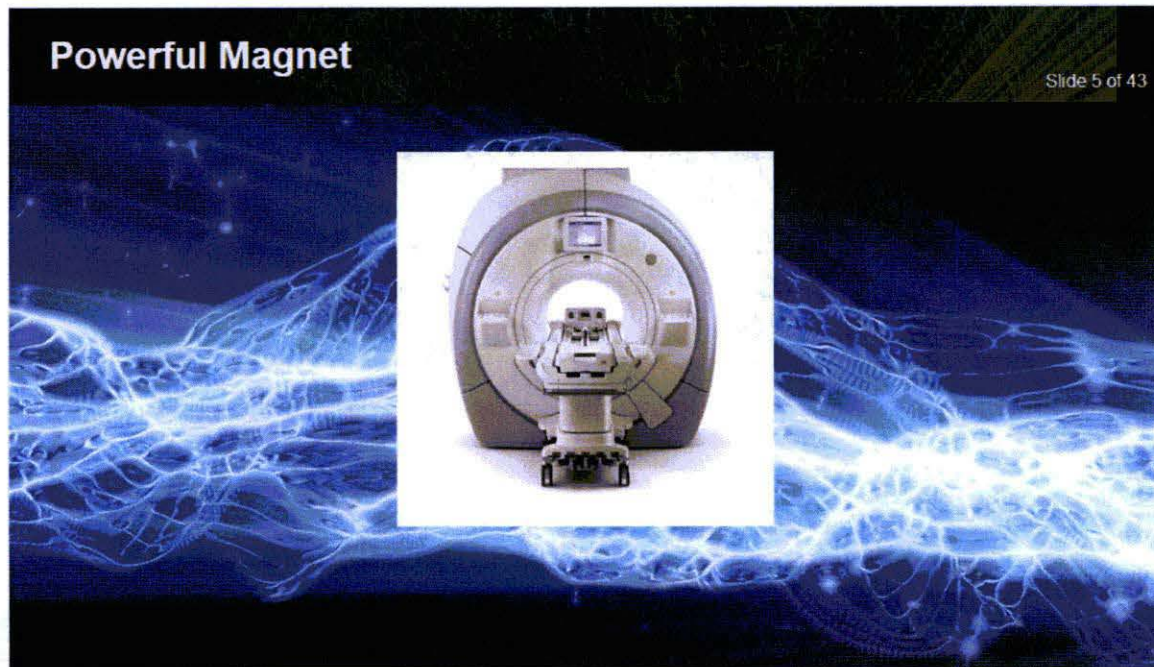


Notes:

2-6

Audio: During this course, you'll often hear these words: The magnet is always on. . . . There's a good reason why.

2.5 Powerful Magnet



Notes:

2-5

Audio: The MRI Scanner exerts a powerful magnetic field over the MRI unit and surrounding area.

2.4 Magnetic Resonance Imaging (MRI)

Magnetic Resonance Imaging (MRI)

Slide 4 of 43

If you're working in the vicinity of the MRI scanner, it's important to know how to work safely to prevent harm to yourself and others.



Notes:

2-4

Audio: In this course, we focus on the MRI scanner, which is a valuable diagnostic tool in the hands of a medical professional, but it needs to be treated with respect.

Notes:

2-2

Audio: [Use standard boilerplate audio instructions.]

2.3 Learning Objectives

Learning Objectives

Slide 3 of 43

When you complete this training, you'll be able to do the following:

- Explain the concept of the four MRI safety zones and the progressive and specific restrictions for each zone.
- Perform your MRI responsibilities consistent with your level of training (Level 1 or Level 2).
- Take appropriate action in an MRI emergency or a patient distress (Code Blue) situation.
- Follow the important safety guidelines for working in the vicinity of the MRI scanner.
- Obtain additional information and support about MRI safety.



Notes:

2-3

Audio: Take a few minutes to review the course objectives.

Tolentino, Geraldine@DIR

From: Tolentino, Geraldine@DIR
Sent: Wednesday, March 22, 2023 5:04 PM
To: 'umer.x.murtaza@kp.org'
Subject: Cal OSHA Document Request
Attachments: CA_Document Request (Cal OSHA 1AY)_03222023185434 Kaiser RWC.pdf

Hi Umer,

Please find the attached document request.

Thank you,

Geraldine

Geraldine d. Tolentino
Associate Safety Engineer
Cal/OSHA Enforcement
Division of Occupational Health and Safety
1065 East Hillsdale Blvd., Suite 110
Foster City, CA 94404
(650) 573-3812

DEPARTMENT OF INDUSTRIAL RELATIONS
 Division of Occupational Safety and Health
 Foster City District Office
 1065 East Hillsdale Blvd, Suite 110
 Foster City, CA 94404
 Tel. # (650) 573-3812 Fax # (650) 573-3817



www.dir.ca.gov/DOSH

DOCUMENT REQUEST

Employer: Kaiser Permanente Date: 3/22/2023 Postmark by: 3/28/2023
 Employer Contact: Umer Murtaza via umer.x.murtaza@kp.org Cal/OSHA Inspector: Geraldine Tolentino

As discussed during the inspection on 03/06/2023, it has been determined that copies of the following documents are required for review. Please provide the Cal/OSHA inspector with the required copies by the "postmark" date noted above. If the copies are not provided by that date, it will be interpreted as an admission that the documents do not exist, and possible citations and monetary penalties could result.

☒ Licenses & Permits: ☒ Business License ☐ Federal/State ER Tax ID No. ☐ CSLB ☐ Garment Reg. ☐ Farm Labor Contractor	Rec'd _____
☒ Facility Layout (floor plan, evacuation routes, etc) <u>MRI room</u>	Rec'd _____
☒ OSHA Log 300 (from <u>2022</u> to <u>2023</u>) 8 CCR 14301	Rec'd _____
☒ OSHA 5020 (Employer's First Report of Injury) _____	Rec'd _____
☒ DWC Form 1 (Worker's Compensation Claim) _____	Rec'd _____
☒ Worker's Compensation Insurance Carrier _____	Rec'd _____
☒ Injury and Illness Prevention Program (written safety program) 8 CCR 3203	Rec'd _____
☒ Employee Training Records <u>Ainah Cervantes on MRI and other employees involved</u>	Rec'd _____
☒ Maintenance Records of Equipment <u>MRI (2022-2023)</u>	Rec'd _____
☒ Safety Instructions / Equipment Manuals <u>MRI</u>	Rec'd _____
☒ Kaiser's procedures for entering MRI room and transferring a patient from a hospital bed to a MRI table	Rec'd _____
☒ Kaiser's accident investigation, witness statements, photos, videos	Rec'd _____
☒ Names of witnesses	Rec'd _____

If you require an extension of time in order to satisfy this request, please contact the Cal/OSHA inspector identified with your inspection at the phone numbers above **before** the deadline.

0950613
RID

C8043
CSHO ID

027-23
Optional Report Nr.

1654644
Inspection Nr.

Tolentino, Geraldine@DIR

From: Microsoft Outlook
To: umer.x.murtaza@kp.org
Sent: Wednesday, March 22, 2023 5:04 PM
Subject: Relayed: Cal OSHA Document Request

Delivery to these recipients or groups is complete, but no delivery notification was sent by the destination server:

umer.x.murtaza@kp.org (umer.x.murtaza@kp.org)

Subject: Cal OSHA Document Request

Tolentino, Geraldine@DIR

From: Umer Murtaza <Umer.X.Murtaza@kp.org>
Sent: Monday, March 27, 2023 10:54 AM
To: Tolentino, Geraldine@DIR
Subject: RE INSPECTION#1654644 REDWOOD CITY KAISER PERMANENTE
Attachments: CAL-OSHA Requested Documents 3.23.2023..docx

CAUTION: [External Email]

This email originated from outside of our DIR organization. Do not click links or open attachments unless you recognize the sender and know the content is expected and is safe. If in doubt reach out and check with the sender by phone.

March 27, 2023

To: Geraldine Tolentino, Cal/OSHA Inspector
Department of Industrial Relations
Foster City District Office
1065 East Hillsdale Blvd. Suite 110
Foster City, CA 94404

RE: Inspection # 1654644

Dear Ms. Tolentino,

Please find the requested documents for your review. **The requested documents are embedded in the word file (Attached).** If you have any issues in opening the required documents, please feel free to reach out.

1. Business License
2. Facility Layout (floor plan, evacuation routes, etc.) MRI room
3. OSHA Log 300
4. OSHA 5020 (Employer's First Report of Injury)
5. DWC Form 1 (Worker's Compensation Claim)
6. Worker's Compensation Insurance Carrier
7. Injury and Illness Prevention Program (written safety program) 8 CCR 3203
8. Employee Training Records (Ainah Cervantes on MRI and other employees)
9. Maintenance Records of Equipment MRI (2022-2023)
10. Safety Instructions / Equipment Manuals MRI
11. Kaiser's procedures for entering MRI room and transferring a patient from a hospital bed to an MRI table.
12. Kaiser's accident investigation, witness statements, photos, videos
13. Names of witnesses

Thank you,

Umer Murtaza, MS (EOHS), HEM
Safety Operations Practice Leader
Redwood City Medical Center
Kaiser Permanente Northern California
Mobile: (650)-269-8648
Work: (650)-299-3269
SharePoint: RWC-WPS

Keep Safety in mind, focus on one day at a time.
Safety Everywhere, Everyone, Every time!

NOTICE TO RECIPIENT: If you are not the intended recipient of this e-mail, you are prohibited from sharing, copying, or otherwise using or disclosing its contents. If you have received this e-mail in error, please notify the sender immediately by reply e-mail and permanently delete this e-mail and any attachments without reading, forwarding or saving them. v.173.295 Thank you.

STATE OF CALIFORNIA

GAVIN NEWSOM, Governor

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Occupational Safety and Health
Foster City District Office
1065 East Hillsdale Blvd, Suite 110
Foster City, CA 94404
Tel. # (650) 573-3812 Fax # (650) 573-3817



www.dir.ca.gov/DOSH

DOCUMENT REQUEST

Employer: Kaiser Permanente Date: 3/22/2023 Postmark by: 3/28/2023
Employer Contact: Umer Murtaza via umer.x.murtaza@kp.org Cal/OSHA Inspector: Geraldine Tolentino

As discussed during the inspection on 03/06/2023, it has been determined that copies of the following documents are required for review. Please provide the Cal/OSHA inspector with the required copies by the "postmark" date noted above. If the copies are not provided by that date, it will be interpreted as an admission that the documents do not exist, and possible citations and monetary penalties could result.

☒ Licenses & Permits: ☒ Business License ☐ Federal/State ER Tax ID No. ☐ CSLB ☐ Garment Reg. ☐ Farm Labor Contractor	Rec'd _____
☒ Facility Layout (floor plan, evacuation routes, etc) <u>MRI room</u>	Rec'd _____
☒ OSHA Log 300 (from <u>2022</u> to <u>2023</u>) <u>8 CCR 14301</u>	Rec'd _____
☒ OSHA 5020 (Employer's First Report of Injury) _____	Rec'd _____
☒ DWC Form 1 (Worker's Compensation Claim) _____	Rec'd _____
☒ Worker's Compensation Insurance Carrier _____	Rec'd _____
☒ Injury and Illness Prevention Program (written safety program) <u>8 CCR 3203</u>	Rec'd _____
☒ Employee Training Records <u>Ainah Cervantes on MRI and other employees involved</u>	Rec'd _____
☒ Maintenance Records of Equipment <u>MRI (2022-2023)</u>	Rec'd _____
☒ Safety Instructions / Equipment Manuals <u>MRI</u>	Rec'd _____
☒ Kaiser's procedures for entering MRI room and transferring a patient from a hospital bed to a MRI table	Rec'd _____
☒ Kaiser's accident investigation, witness statements, photos, videos	Rec'd _____
☒ Names of witnesses	Rec'd _____

If you require an extension of time in order to satisfy this request, please contact the Cal/OSHA inspector identified with your inspection at the phone numbers above **before** the deadline.

0950613
RID

C8043
CSHO ID

027-23
Optional Report Nr.

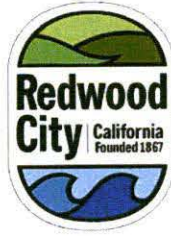
1654644
Inspection Nr.

Item Requested	Documents	Comments
Business License	 Business License.pdf	
Facility Layout (floor plan, evacuation routes, etc) MRI room	 MRI.pdf  LS1.pdf	
OSHA Log 300	 OSHA300 Log - 2022.pdf  OSHA300 Log - 2023.pdf	
OSHA 5020 (Employer's First Report of Injury)	 Cervantes 5020.pdf	
DWC Form 1 (Worker's Compensation Claim)	 Cervantes DWC1.pdf	
Worker's Compensation Insurance Carrier	Pon Ponareay Pin Claims Associate Sedgwick DIRECT 562-981-0224 EMAIL Pon.Pin@sedgwick.com www.sedgwick.com Caring counts® 	
Injury and Illness Prevention Program (written safety program) 8 CCR 3203	 EOC.19.05 Injury and Illness Preventic	
Employee Training Records (Ainah Cervantes on MRI and other employees involved)	 Grace Lam 2022 MRI Safety Training.pdf  Grace Lam 2023 MRI Safety Training.pdf  Lam, Grace ARRT Certification.pdf  Grace Tran RT MRI Tech Educ Cert.pdf  Grace Lam Annual Competency 2022 (1  Letichia Gomez 2023 MRI Safety Trai	

Item Requested	Documents	Comments
	 Letichia Gomez 2022 MRI Safety Trai  Letichia Gomez Initial Skills Compet  Cervantes, Ainah X058249 MRI Safety  Rodriguez, Erika G798611 MRI Safety	
Maintenance Records of Equipment MRI (2022-2023)	 MRI 3T Annual Service Report.pdf  Service History Northern CA.pdf	Quarterly report
Safety Instructions / Equipment Manuals MRI	Over 2,500 pages https://customer-doc.cloud.gehealthcare.com/#/cdp/dashboard Go to GE CDL and search on 5495449	Over 2,500 pages https://customer-doc.cloud.gehealthcare.com/#/cdp/dashboard Go to GE CDL and search For 5495449
Kaiser's procedures for entering MRI room and transferring a patient from a hospital bed to an MRI table.	 Rad 13.08 MRI Safety Guidelines.pr  Rad 13.09 MRI Patient Monitoring.	
Kaiser's accident investigation, witness statements, photos, videos	 MRI SRAE EVENT.pdf	
Names of witnesses	Imaging Assistant – Letichia Gomez MRI Technologist – Grace Lam ICU RN – Cervantes Ainah PCT -Erika Rodriguez	

City of Redwood City

1017 Middlefield Road
Redwood City, CA 94063



**Business License Tax
Certificate**

POST IN A CONSPICUOUS PLACE

Business Lic. Tax No.

046747

Expiration Date

06/30/2023

NATIONAL TAX DIVISION
KAISER FOUNDATION HOSPITALS
ONE KAISER PLZ 15TH FLOOR
OAKLAND, CA 94612-2433

Owner/Officer GREGORY ADAMS, CEO

Owner/Officer

Owner/Officer

Owner/Officer

Type of Business:

622110 General Medical And Surgical Hospitals

No. of Full time Employees: 0.00

No. of Part-time Employees: 0.00

No. of Rental Units: 0.00

No. of Commercial Sq. Ft.: 0.00

No. Coin Operated Machines: 0.00

Business Name:

KAISER FOUNDATION HOSPITALS

Business Address:

**1100 VETERANS BLVD
REDWOOD CITY, CA 94063-2037**

Business Phone (510) 271-6965

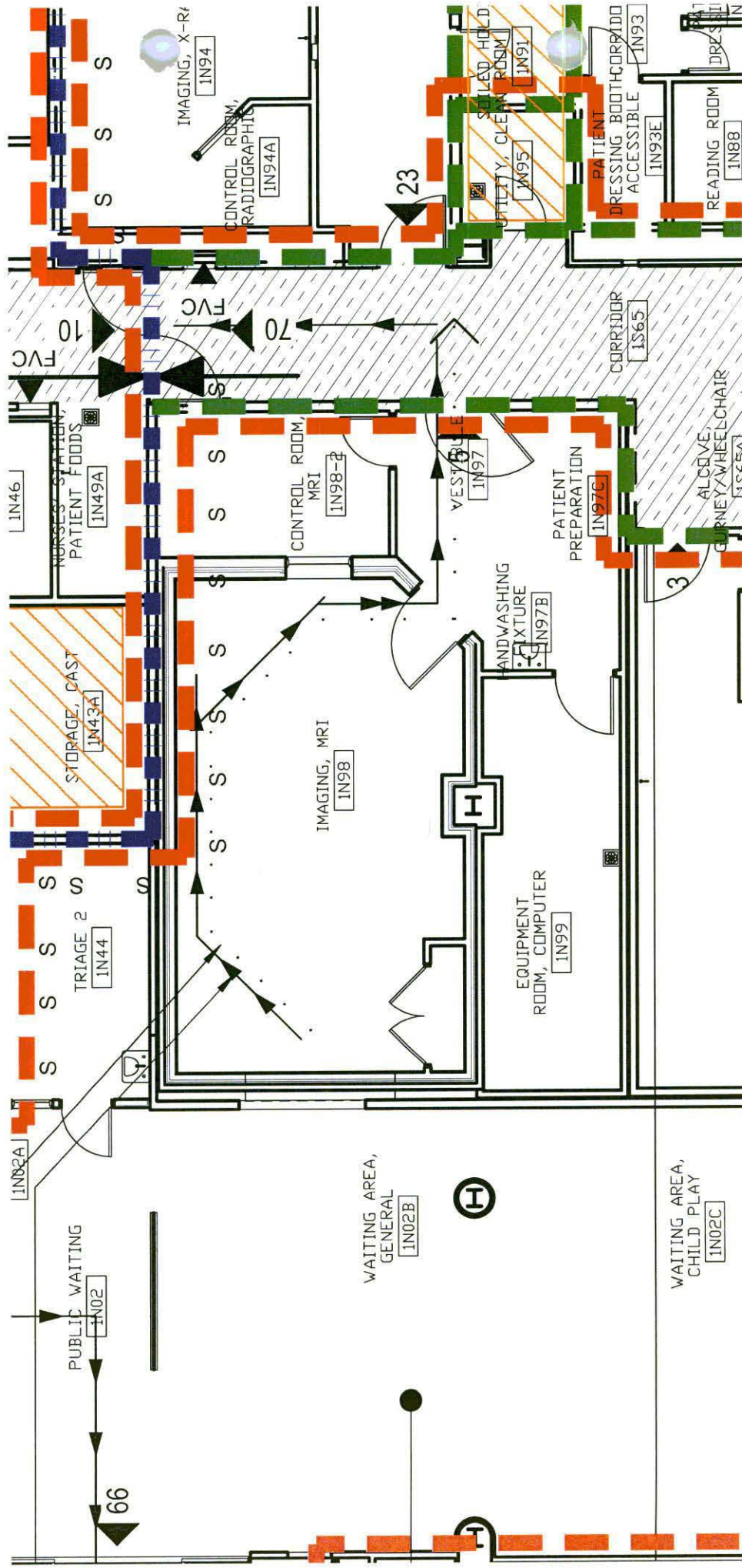
Business Tax Paid \$5.25

IMPORTANT NOTICE TO CERTIFICATE HOLDER

This Business License Tax Certificate is issued without verification that the holder is subject to or exempt from licensing by the State, County, Federal government, or any other governmental agency. It is issued for revenue purposes only and does not constitute a permit to operate a business in violation of the law. Appropriate permits from the Planning, Building, Fire, Police and/or other Departments of the City may have to be secured before the start of your business. The business location, whether owned or leased, must be properly zoned and the building must meet fire code and hazardous materials standards. A business license tax does not indicate clearance from City, County, State, or Federal permits or licenses, which may be required for your type of business. You may want to contact the appropriate City Departments and/or County, State or Federal agencies before commencing your business.

If you have any questions regarding requirements or conditions on your Business License Tax Certificate, please call the Revenue Services Division at (650) 780-7214.

Starting January 1, 2021, Assembly Bill 1607 requires the prevention of gender-based discrimination of business establishments. A full notice is available in English or other languages by going to: <https://www.dca.ca.gov/publications/>



OSHA's Form 300 Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to the employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Kaiser Permanente

Entity: KFH/P
Location Code: 99999

Year: 2022

Facility:

Identify the person			Describe the case			Classify the case				Enter the number of days the injured or ill worker was:							
Case No.	Employee's Name	Job Title	Date of injury or onset of illness	Where the event occurred	Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill	Using these four categories, check ONLY the most serious result for each case: Remained at work	Days away from work	Job transfer or restriction	Other recordable cases	Away from work (days)	On job transfer or restriction (days)	Injury	Skin Disorder	Respiratory condition	Poisoning	Hearing loss	All Other illnesses
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
202201000065			1/2/2022	Labor and Delivery Room 401	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022010002352			1/12/2022	ICU	left wrist sprain - pushing or pulling - patient			X		0	83	X					
2022010003962			1/24/2022	SS	left thumb puncture - needle stick - needle				X	0	0	X					
202202000430			1/26/2022	MOB Parking Garage - Bike cage	bilateral knee strain - fall/slip on ice or snow - concrete floor				X	0	0	X					
202202000809			2/11/2022	Dock	bilateral back (all other) strain - boxes		X			13	147						X
4A23023GW430-0001			3/1/2022	Nurse's station	right ankle sprain - twisting - bodily movement			X		0	71	X					
202203000374			3/7/2022	Patient Room	bilateral soft tissue-neck strain - pushing or pulling - patient in wheelchair		X			180	75	X					
202203000415			3/10/2022	Loading Dock Gate	left shoulder(s) contusion (bruise, skin surface) - fall on the same level - floor		X			180	30	X					
202203000484			3/11/2022	6N Patient Room 671	left foot sprain - holding or carrying - patient		X			3	6	X					
2022030001182			3/25/2022	Kitchen	bilateral low back area (incl. lumbar & lumbo-sacral) strain - bending - hot pellet		X			180	0	X					
2022030001256			3/31/2022	OR 2 Main Hospital	left leg, multiple puncture - needle stick - needle				X	0	0	X					
2022040001017			4/25/2022	Mother baby unit patient room	right hand sprain - heat pack		X			124	95	X					
202206000267			5/3/2022	Labor and Delivery Room 3	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022060001547			5/23/2022	Loading Dock	left shoulder(s) sprain - lifting - box of solution			X		0	20	X					
2022060001811			5/23/2022	SPD in Marshal Medical Office Building	low back area (incl. lumbar & lumbo-sacral) strain - pushing or pulling - cart		X			8	91	X					
2022070001458			7/22/2022	L&D OR	left finger(s) puncture - needle stick - straight needle				X	0	0	X					
2022080000327			8/3/2022	ICU	left face, multiple parts contusion (bruise, skin surface) - struck/injured by falling or flying object - ventilator hook		X			2	0	X					
2022080000343			8/4/2022	ICU	right foot strain - strain or injury by, noc - iv pump channel			X		0	28	X					
2022080001488			8/27/2022	Room 712	bilateral abdomen including groin contusion (bruise, skin surface) - patient foot		X			20	0	X					
2022080001555			8/29/2022	Outside freezer in kitchen	right thumb fracture - strike against/step on stationary object - bar		X			68	0	X					
4A23023Q9T24-0001			9/18/2022	Hospital	low back area (incl. lumbar & lumbo-sacral) strain - continuous trauma - supplies				X	0	0						X
2022090001113			9/25/2022	Patient Room 555	right hand sprain - patient			X		0	4	X					
2022100000465			10/5/2022	6N Room 661	left finger(s) puncture - needle stick - needle				X	0	0	X					
2022100000467			10/12/2022	Outside of Building on the West side pat.	anterior scalp laceration - umbrella				X	0	0	X					
2022100000742			10/15/2022	ER Hallway near Radiology office	left forearm strain - fall on the same level - floor		X			1	0	X					
2022110000121			11/2/2022	MMOB Conference Room A	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022110000833			11/9/2022	Medical Office	low back area (incl. lumbar & lumbo-sacral) strain - lifting - trash bag		X			39	0	X					
2022110001132			11/28/2022	ICU Rm 562	right foot contusion (bruise, skin surface) - caught in, under or between, noc - bed trapeze			X		0	37	X					
2022120000797			12/12/2022	Main PACU	bilateral eye(s) foreign body (eye) - struck/injured by body fluid, blood, saliva, etc. - blood				X	0	0	X					
2022120001066			12/19/2022	MOR 4	right hand contusion (bruise, skin surface) - strike against/step on stationary object - metal surgical table		X			3	0	X					
2022120001215			12/26/2022	ASU OR 3	right finger(s) puncture - needle stick - needle				X	0	0	X					
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
Totals:						0	13	6	12	821	687	29	0	0	0	0	2

OSHA's Form 300

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to the employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Kaiser Permanente

Entity: KFH/P
Location Code: 99999

Year: 2023

Facility:

Identify the person			Describe the case		Classify the case												
Case No.	Employee's Name	Job Title	Date of injury or onset of illness	Where the event occurred	Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill	Using these four categories, check ONLY the most serious result for each case: Days Job Other away transfer record- from or rest- able Death work action cases				Enter the number of days the injured or ill worker was: Away On job from transfer work or restrict. (days) (days)		Injury	Skin Disorder	Respiratory condition	Poisoning	Hearing loss	All Other illnesses
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
4A230184D1D-0001			2/2/2023	Patient Room	posterior upper back area (thoracic area) strain - pushing or pulling - patient		X				34	45	X				
2023010000434			6/6/2023	Back dock	left knee contusion (bruise, skin surface) - trip - cord		X				12	0	X				
2023010000924			7/7/2023	Med Tele 6N	bilateral eye(s) foreign body (eye) - struck/injured by body fluid, blood, saliva, etc. - bodily fluids				X		0	0	X				
2023010000584			12/12/2023	7 South Room 712A	right shoulder(s) strain - holding or carrying - patient		X				70	0	X				
2023010000821			1/16/2023	5 South Neuro Unit	right upper leg puncture - needle stick - needle				X		0	0	X				
2023020000967			2/23/2023	MRI Zone 3	abdomen including groin laceration - caught in/between-object handled - mri machine		X				28	0	X				
2023030000118			3/2/2023	"Willow Road East Palo Alto, CA"	posterior cervical sprain - motor vehicle, noc - mva		X				4	0	X				
2023030000770			3/16/2023	Marshall Pharmacy	right finger(s) sprain - caught in, under or between, noc - side wall				X		0	0	X				
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
Totals:						0	5	0	3	148	45	8	0	0	0	0	0



KAISER PERMANENTE®

Radiology Department

Certificate of Completion

Certifies that

Grace Lam
X974848

has successfully completed all requirements for

2022 MRI Safety Training - Level 2

Date: 27-OCT-2022

Radiology Department

KP LEARN



KAISER PERMANENTE®

Imaging Services

Certificate of Completion

Certifies that

Grace Lam
X974848

has successfully completed all requirements for

2023 MRI Safety Training - Level 2

Date: 14-MAR-2023
Imaging Services

KP LEARN



THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS®

Name	Grace Kinh VI Lam
City, State, Zip	San Mateo, CA 94403
Country	U.S.A.
Credentials	R.T.(R)(MR)(M)(CT)(ARRT)
Valid Thru	09/2023
CE Biennium	9/1/2022 to 8/31/2024
CQR Compliance Period(s)	Radiography (Credential not subject to CQR) Magnetic Resonance Imaging (Credential not subject to CQR) Mammography (Credential not subject to CQR) Computed Tomography (Credential not subject to CQR)

Credential Description

(R) Radiography
(MR) Magnetic Resonance Imaging
(M) Mammography
(CT) Computed Tomography

This record is from the ARRT Verify Credentials directory, which is the primary source for verifying a Registered Technologist's certification and registration status. The

**GOLD STANDARD
PATIENT CARE**



**1255 NORTHLAND DRIVE, ST. PAUL, MN 55120
651.687.0048 MAIN PHONE | WWW.ARRT.ORG**

Printed On: 03/23/2023

This is to certify that

Grace K.V. Tran, RT(R)

*has successfully completed the Toshiba America MRI
course of education in*

Basic MRI Technologist Education

Peggy Woodward
Instructor

[Signature]
President

22 January 1999
Completion date

Kaiser Permanente
Northern California Radiologic Technologist Competency Skills Assessment
Modality: MRI

Initial ☐

Annual ☒

Name: GRACE LAM Employee #: 00317382
 First Last
 Dept: IMAGING SERVICES Facility: REDWOOD CITY
 Return this
 checklist to: MICHELE GRADE Date: mo 8 day 8 yr 22
 Leader/Manager's Name

PURPOSE:

The purpose of an employee carefully completing the contents of this checklist is to provide:

1. Documentation of successful completion of competency assessments in specific modalities.

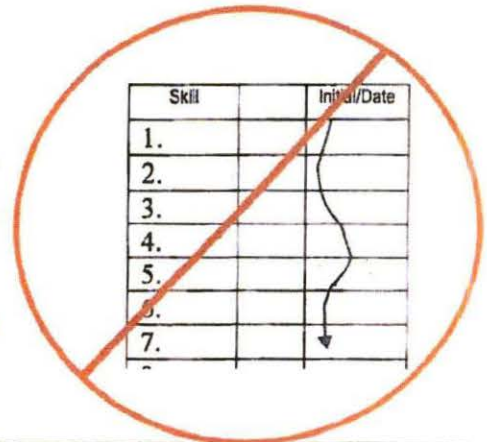
INSTRUCTIONS

Employees:

1. Complete the "Self Assessment Rating" column using the appropriate code (1 = No Knowledge; 2 = Needs review or assistance; 3 = Proficient, fully competent, performs independently).
2. Review this checklist with your manager/designee who is assigned to assist you.
3. **At the completion of your assessment, read and sign the back page and return the completed form to your manager.** Do not sign on each page.
4. Please use the Comments sections as needed.

Manager:

1. Regardless of the employee's "Self Assessment Rating" observe the employee's performance of tasks or discuss items to ensure competency as appropriate.
2. **Date and initial each block (box) on each page when assessment is completed in designated column.** Do not run a line through the rows and only sign the bottom.
3. **Sign and initial last page of this document.**
4. **Supplemental Training and Reassessment will be performed within 90 days.**
5. **All sections are required both for initial and Annual, unless otherwise designated.**



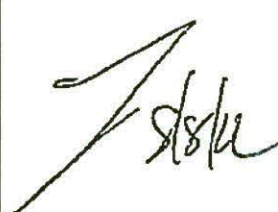
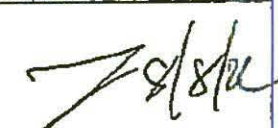
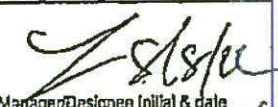
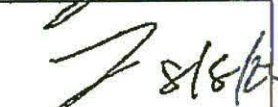
Date: _____

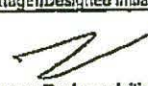
Instructions To Manager:

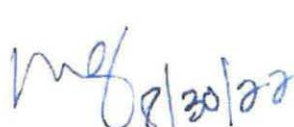
1. Place original in Department Employee File.
2. Employee may be given a copy of the document.

Completed Date: Mo 8 Day 8 Yr 22 Initials [Signature]

Section 1: Knowledge of General Patient Care	The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
Appropriate handling of medical equipment (e.g. biomedical devices, gradient coils, monitoring devices, etc.)		Manager/Designee Initial & date
Knowledge and demonstration of Infection prevention		Manager/Designee Initial & date
Knows and understands ACR Manual on MR Safety 2020		Manager/Designee Initial & date
Completes all examination related documentation (updates examination in databases, medication information, patient screening form, etc.)		Manager/Designee Initial & date
Patient procedural education • Language services as applicable		Manager/Designee Initial & date
Section 2: General Patient Care	The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
1. Completed Annual Level II MRI Safety Training on kpLearn		Date Completed: 8/8/22
2. Patient Preparation a) Consent b) Gowning c) Wandering d) Screening Form e) Ear Plugs f) Patient Procedure Education g) Motion Reduction		Manager/Designee Initial & date
3. Patient Assessment and Monitoring a) Prior Exam Review b) Lab Values (GFR, Creatinine) c) Medications (contra/indications and allergies) d) Isolation		Manager/Designee Initial & date
4. Injection Techniques a) Pediatric – as applicable b) Smart Prep/Fluoro Trigger c) Manual d) Power Injector Name of injector manufacturer/model – tech to Initial e) Med Rad Injector Competency • Flow Rate • Set up and connection to patient IV		Manager/Designee Initial & date
5. Emergency Response a) Recognize basic signs and/or symptoms of patient's distress, (e.g., difficulty with breathing, shortness of breath, sudden severe chest pain, loss of consciousness, etc.) b) Initiate appropriate interventions such as: CPR and call "Code" if indicated. c) Locate and demonstrate proper use of Ambu bag and oxygen delivery system. d) Locate and verbalize the use of crash cart. e) Locate and verbalize the use of defibrillator / AED (Automatic External Defibrillator). f) Instruct patient on how to use distress signal squeeze ball.		Manager/Designee Initial & date

Section 3: Contrast Administration	The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
Demonstrates competence in: 1. Cleaning hands before and after patient contact 2. Using proper aseptic technique 3. Proper use of personal protection equipment 4. Confirming order for IV contrast 5. Verifying Consent was obtained 6. Verifying allergy history 7. Accurately updating the electronic databases 8. Properly documenting the administration of contrast (date, time, site, etc.) 9. Knowledge of post procedural complication processes		 Manager/Designee Initial & date
Section 4: Contrast Agents	The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
1) Type of Gadolinium: a) Magnevist b) Eovist c) Gadavist d) Prohance e) Multihance 2) Administration Route and Dose Calculation a) IV (Angiocatheter) b) Ports (SOP/RN supervision and management of catheter and port) c) Butterfly 3) Special Considerations a) Pathologic Processes (age, lab work, etc.) 4) Adverse Reactions/IV Extravasations a) Recognition and Assessment of Symptoms b) Treatment (e.g., compresses, medications) c) Documentation d) Understands regional Extravasation Policy OPS-683		 Manager/Designee Initial & date  Manager/Designee Initial & date  Manager/Designee Initial & date  Manager/Designee Initial & date
Section 5: Service Excellence Criteria	The employee understands each standard stated below, and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
Demonstrates competence in: 1. Using Population Specific Criteria and Communication 2. Using two patient identifiers before examination 3. Verifying reason for examination 4. Confirming laterality when applicable 5. Verifying appropriateness of examination (does the patient clinical indication match the examination ordered) 6. Giving patient pre-examination instructions, verifies understanding and answers any questions 7. Incorporate patient's language, cultural and religious beliefs when answering patient questions 8. Providing appropriate post examination instructions (if applicable) 9. Follows the regional standard MRI protocols		 Manager/Designee Initial & date
Section 6: Handling Patients	The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor Initials & dates after the review is completed.
Demonstrates competence in: 1. Correct use of patient handling equipment (ie: Golve Lift, Hover Mat, Sara Steady, sliding devices, etc.) 2. Follow MRI Safety Guidelines Policy SAS-910 (wandering, gowning, screening form, etc.) 3. Application of the correct use of body mechanics 4. Requesting assistance when needed		 Manager/Designee Initial & date

Employee's Self-Assessment Rating Codes: 1, 2 or 3	Knowledge and Skill Competency Check List <u>PLEASE USE THESE CODES</u> 1 = No Knowledge 2 = Needs review or assistance 3 = Proficient (fully competent, performs independently) Please use comment section as needed.	COMMENTS Please use Comment Section as needed.	Preceptor/Resource Initial and date when employee is able to perform and/or discuss
Section 7 EQUIPMENT USE AND OPERATIONS: Demonstrates competence in the technical skills below:			
1 2 (3)	1. Use of Regional MRI Protocols (adult and pedi)		 8/8/22 Manager/Designee Initial & date
1 2 (3)	2. MRI System Principles, Operation and Components a) Check cryogen level b) Check room temp c) RF leaks d) Knowledge of Quench Procedure e) Knowledge of Emergency Shut Off Button f) Check crash cart		 8/8/22 Manager/Designee Initial & date
1 2 (3)	3. Startup/Shut down Reboot Procedures		 8/8/22 Manager/Designee Initial & date
1 2 (3)	4. Proper use of Imaging Coils		 8/8/22 Manager/Designee Initial & date
1 2 (3)	5. Image Processing and Display: a) Image Reconstruction 1. Reconstruction Filters (algorithms) 2. Raw data vs. Image data		 8/8/22 Manager/Designee Initial & date
1 2 (3)	6. Image Display/Acquisition: a) Pixel, Voxel b) Matrix c) NEX/Averages d) Phase and Frequency e) Image magnification f) FOV (scan reconstruction and display) g) Window Level/Width h) Plane Specifications (sagittal, coronal, obliques, and axial) i) Cine – if applicable j) ROI (single and multiple) k) TR and TE parameters l) Center frequency m) Bandwidth		 8/8/22 Manager/Designee Initial & date
1 2 (3)	7. Multiplanar Reformation: a) 3D rendering (MIP) Data Management b) Hard Copy c) Storage/Archive d) Electronic Transmission		 8/8/22 Manager/Designee Initial & date
1 2 (3)	8. After hours radiologist workflow process a) Subspecialties b) Exams read by Neuro Radiologists		 8/8/22 Manager/Designee Initial & date

Section 8 QUALITY ASSURANCE: Demonstrates competence in:			
1 2 ③	1. Image Quality a) Spatial Resolution b) Contrast Resolution c) Noise d) Regional QC Daily and Weekly Procedures e) TQAT		 5/8/22 Manager/Designee initial & date
1 2 ③	2. Artifact Recognition and Reduction a) Motion b) Flow c) Shimming d) Magnetic Susceptibility e) Patient Positioning f) Chemical Shift g) Equipment-Induced • Zipper		 8/8/22 Manager/Designee initial & date
Section 9 INITIAL COMPETENCY – TO BE COMPLETED ONLY AT INITIAL ONLY Note: During the MRI training period a performance evaluation will be done at 30 days (upon completion of self-assessment) and then a 60 day evaluation to determine successful completion of initial competency. With mutual agreement of management and the Technologist the training period can be extended to 90 days.			
	☐ 20 exams with verified competency with at least 2 in each area of competency. ☐ Demonstrates successful monitored venipunctures – 10 sticks on file. ☐ Completed Annual KpLearn MRI Safety Training for Level 2 personnel. ☐ Reviewed Regional Imaging MRI Safety Guidelines Policy (SAS-910).		Manager/Designee initial & date
Section 10 ANNUAL COMPETENCY – NEEDS TO BE REVIEW ANNUAL Note: During the annual performance evaluation timeframe. The following items will be reviewed and signed off as completed.			
	☒ Demonstrates successful monitored venipunctures – minimum 3 sticks on file a year. ☒ Completed Annual KpLearn MRI Safety Training for Level 2 personnel. ☒ Reviewed Regional Imaging MRI Safety Guidelines Policy (SAS-910).		 8/30/22 Manager/Designee initial & date

Continuing Competency Assessment – See Regional MRI Protocols for complete list
EXAMINATIONS SUBJECT TO REVIEW (3 EXAMINATION CATEGORIES WILL BE SELECTED EACH YEAR)

MRI Technologist Competency Assessment.doc
Revised 2020

Continuing Competency Assessment – See Regional MRI Protocols for complete list
EXAMINATIONS SUBJECT TO REVIEW (3 EXAMINATION CATEGORIES WILL BE SELECTED EACH YEAR)

MRI Technologist Competency Assessment.doc
Revised 2020

Section 11

Continuing Competency Assessment – See Regional MRI Protocols for complete list
EXAMINATIONS SUBJECT TO REVIEW (3 EXAMINATION CATEGORIES WILL BE SELECTED EACH YEAR)

1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3	Surgical, Biopsy, if applicable a) Sterile Procedure } N/A b) Tray Set-up—Sterile Procedure } N/A c) Patient Consent } N/A d) Lab paperwork } N/A e) Specimen Labeling & Specimen Hand-off to Lab } N/A f) Breast Biopsy N/A g) Cardiac N/A h) MRI Thorax i) Angiography of the Thorax for PE j) MRA Abdomen/Inhance k) C/T/L Spine Myelogram l) Pediatric Sedation N/A m) Pacemaker Patients	N/A	8/5/22 Manager/Designee initial & date
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Section 12

PATIENT EXAMINATIONS

Management at the specific facility selects one complete exam from three different categories of the Modality of MRI for demonstration/simulation. Categories are rotated annually. All categories must be completed before any are repeated. The designee observes the employee performing the procedure.

1 2 3	Demonstrates competence in (Exam Name): 1. <u>MRA Head & Neck</u> Employee Comments:	Initial Assessment Manager/Designee initial & date Reassessment within 90 days Manager/Designee initial & date Challenge within 90 days Manager/Designee initial & date	Manager Comments:
1 2 3	Demonstrates competence in (Exam Name): 2. <u>S.T. Neck</u> Employee Comments:	Initial Assessment Manager/Designee initial & date Reassessment within 90 days Manager/Designee initial & date Challenge within 90 days Manager/Designee initial & date	Manager Comments:
1 2 3	Demonstrates competence in (Exam Name): 3. <u>ASL Head</u> Employee Comments:	Initial Assessment Manager/Designee initial & date Reassessment within 90 days Manager/Designee initial & date Challenge within 90 days Manager/Designee initial & date	Manager Comments:

EMPLOYEE ATTESTATION:

I have received an assessment in, have a clear understanding of, and intend to comply with all of the above mentioned standards, policies, and procedures.

Grum mo 8 date 5 yr 2022
 Employee's Signature Initials
[Signature] mo 8 date 8 yr 22
 Manager Signature (Witness) Initials

mgale 8/30/22
WJ

Initial	Manager/Designee	Date	Initial	Manager/Designee	Date
<i>[Signature]</i>	<i>CEBAYAN, LOM</i>	<i>8/8/22</i>			

OBSERVATION COMPETENCY ASSESSMENT (YES/NO CHECKLIST)		
Aspect of Care/Skill	VENIPUNCTURE STICKS: 3 ANNUAL	
Employee's Name (PRINT)	GRACE LAM	10708621
Department/Unit:	MRI	
Competency Performance Check List "Able to perform" means the individual independently performs each responsibility.	Able to Perform	Comments
1. Select appropriate equipment for intravenous venipuncture.	(Yes) No	
2. Correctly assemble equipment for intravenous venipuncture.	(Yes) No	
3. Wash hands properly.	(Yes) No	
4. Introduce self and verify two patient identifications: Check patient ID band or Ask patient to state name and date of birth	(Yes) No	
5. Explain the intravenous venipuncture procedure to patient.	(Yes) No	
6. Properly place tourniquet around patient's arm.	(Yes) No	
7. Select and locate appropriate site for venipuncture.	(Yes) No	
8. Using aseptic technique cleans puncture site with alcohol prep pad.	(Yes) No	
9. Put on gloves.	(Yes) No	
10. Demonstrate entry into vein.	(Yes) No	
11. Release tourniquet.	(Yes) No	
12. Demonstrate correct taping and dressing.	(Yes) No	
13. Demonstrate correct documentation.	(Yes) No	
Demonstrate 3 successful sticks:		
Exam: Head	(Yes) No	Date: 5/23/22
Exam: S.T. Neck	(Yes) No	Date: 6/3/22
Exam: Prostate	(Yes) No	Date: 6/7/22

DATE: mo 8 day 5 yr 2022

CHECK ONE:

☒ PASSED

☐ NEEDS TO REPEAT

COMPETENCY VALIDATED BY (observer):

PRINT:

FIRST Name

LAST Name

SIGNATURE:

mgade 8/30/22



KAISER PERMANENTE®

Imaging Services

Certificate of Completion

Certifies that

Letichia Cecchini Gomez
Y942487

has successfully completed all requirements for

2023 MRI Safety Training - Level 2

Date: 13-MAR-2023
Imaging Services

KP LEARN

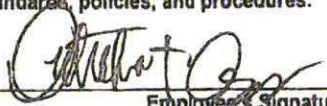
Employee's Self-Assessment Rating Codes: 1, 2 or 3	Knowledge and Skill Competency Check List <u>PLEASE USE THESE CODES</u> 1 = No Knowledge 2 = Needs review or assistance 3 = Proficient (fully competent, performs independently) Please use comment section as needed.		Preceptor/Resource initial and date when employee is able to perform and/or discuss
	Section 4: Service Excellence The employee understands each standard stated below and intends to comply with the standards as stated.		
1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u>	Demonstrates competence in: a) Time out process: b) Proper phone etiquette c) Answering patient questions and/or addresses patient concerns d) Informs patients of reason for any delays or anticipated delays in their care e) Treats all patients in accordance with the Patient's Bill of Rights f) Warm greeting	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed. M.L. 2/3/22 Manager/Designee initial & date	
Section 5: Patient Handling The employee understands each standard stated below and intends to comply with the standards as stated.			
1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u>	1. Correct use of patient handling equipment (list equipment below): a. <u>GOVIL LIFT</u> b. <u>STAIR STAIRS</u> c. <u>LYRO LIFT</u> d. <u>HOVEL MATT</u> 2. Application of the correct use of body mechanics 3. Requesting assistance when needed 4. Safe handling of mobile (trailer) equipment handling (lift gate, etc) – as applicable	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed. M.L. 2/3/22 Manager/Designee initial & date	
Section 6: Quality Assurance The employee understands each standard stated below and intends to comply with the standards as stated.			
1 2 <u>3</u> 1 2 <u>3</u>	1. Cleanliness of the exam room 2. Crash cart checks – if applicable	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed. M.L. 3/1/22 Manager/Designee initial & date	
Section 7: Nuclear Medicine (if applicable) The employee understands each standard stated below and intends to comply with the standards as stated.			
1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u>	General Daily Work (Add additional responsibilities, as appropriate) 1. Exam set-up/Room Readiness 2. Support tech and patient needs 3. Supply Expiration Check 4. 5. 6.	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed. M.L. 3/1/22 Manager/Designee initial & date	

Employee's Self-Assessment Rating Codes: 1, 2 or 3	Knowledge and Skill Competency Check List <u>PLEASE USE THESE CODES</u> 1 = No Knowledge 2 = Needs review or assistance 3 = Proficient (fully competent, performs independently) Please use comment section as needed.	COMMENTS <i>Please use Comment Section as needed</i>	Preceptor/Resource initial and date when employee is able to perform and/or discuss
Section 8: CT (if applicable)		The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed.
1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3	Stroke Alert Process: 1. Understands Stroke Alert process/workflow 2. Understands process for cancellation of Stroke 3. Understands after hours process for Stroke Alerts General Daily Work: 1. Gowning 2. Lab work confirmed if patient meets requirements 3. Review eConsult for additional ordered studies 4. Perform local screening form and consents – if applicable 5. Assist with scheduling and workflow 6. Exam set-up/Room Readiness 7. Assists in moving patients on/off scan table in safe manner. Including overhead lift devices 8. Assists in insuring use of proper positioning/immobilization devices for patient safety 9. Use of safety straps (as applicable) 10. Exam set-up/Room Readiness 11. Stocking Supplies and insuring appropriate expiration dates of supplies		OFA 4/29/22 Manager/Designee initial & date
Section 9: MRI (if applicable)		The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed.
1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3	MRI Safety: 1. Completed MRI Safety Level II training on KpLearn 2. Reviews and understands MRI Safety Policy SAS-910 3. Knows and enforces MRI Safety Zones 4. Review of other MRI safety considerations (cryogen safety, fire, medical emergencies, laser light alignments, quenching a magnet) 5. Knowledge of MRI safe, conditional and not safe equipment General Daily Work: 1. Assist with booking and workflow 2. Screening Form – patient and employee 3. Consents (ie contrast, pregnancy) 4. Gowning 5. Wanding/Daily QA of wand 6. Ear Plugs 7. General Knowledge of Patient Procedure Education		OFP 4/27/22

1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u>	8. Assist with Immobilization Motion Reduction 9. Assistance in positioning patient 10. Use of safety straps 11. Exam set-up/Room Readiness 12. Cleaning of bore, coils/table automatic injector between patients 13. Supply Expiration Check 14. Assists with Pacemaker Defib and Sedation/Anesthesia workflow		MDP 4/22/22 Manager/Designee initial & date
Employee's Self-Assessment Rating Codes: 1, 2 or 3	Knowledge and Skill Competency Check List <u>PLEASE USE THESE CODES</u> 1 = No Knowledge 2 = Needs review or assistance 3 = Proficient (fully competent, performs independently) Please use comment section as needed.		Preceptor/Resource initial and date when employee is able to perform and/or discuss
Section 10: Ultrasound (if applicable)		The employee understands each standard stated below and intends to comply with the standards as stated.	Manager/Designee or/and Preceptor/Mentor initials & dates after the review is completed.
1 2 <u>3</u> 1 2 <u>3</u> 1 2 3 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u> 1 2 <u>3</u>	General Daily Work (Add additional responsibilities, as appropriate) 1. Knowledge and responsible for probe tracking – if applicable 2. Knowledge and/or responsible for Probe High Level Disinfection – as applicable 3. Able to perform ultrasound probe high-level disinfection process (Trophon) – as applicable 4. Exam set-up/Room Readiness 5. Supply Expiration Check 6. Assist with set-up of sterile tray 7. Transport probes for processing	N/A ddp N/A ddp N/A ddp	MDP 4/29/22 Manager/Designee initial & date

EMPLOYEE ATTESTATION:

I have received an assessment in, have a clear understanding of, and intend to comply with all of the above mentioned standards, policies, and procedures.

 Employee's Signature	JG Initials	mo 5 date 2 yr 2022
 Manager Signature (witness)	MDP Initials	mo 4 date 29 yr 22

Initial	Manager/Designee	Date	Initial	Manager/Designee	Date
M. L.	M. L.	4/21/22	M. L.	M. L.	4/29/22



KAISER PERMANENTE®

Regional Imaging

Certificate of Completion

Certifies that

**Ainah Cervantes
X058249**

has successfully completed all requirements for

MRI Safety Training - Level 2

Date: 23-FEB-2022
Regional Imaging

KP LEARN



KAISER PERMANENTE®

Imaging

Certificate of Completion

Certifies that

**Erika Rodriguez
G798611**

has successfully completed all requirements for

2023 MRI Safety Training - Level 1

Date: 16-MAR-2023
Imaging

KP LEARN



Partners in Medical Physics, LLC

Board Certified Diagnostic Medical Physicists
8055 FM 359 Rd S # 1041, Fulshear, Texas 77441

September 28, 2022

Kaiser Permanente Redwood City Med Ctr
1100 Veterans Blvd
Redwood City, CA 94063

Subject: Annual MRI scanner performance evaluation
GE MR750 XG2, System ID: KP EIN 960509 (WB0744)

- | |
|---|
| <ol style="list-style-type: none">1. The system evaluation was performed in accordance with ACR MRI Accreditation Program guidelines.2. There were no deficiencies observed during the image acquisition and system evaluation.3. The site appears to follow MRI safety well. |
|---|

Please review the attached report carefully and contact the physicists for any questions.
Thank you for choosing us for your medical physics service.



Shaohua Liu, Ph.D., DABR

shaohua.liu@yahoo.com

MRI Equipment Performance Evaluation Summary

Site Name: Kaiser Permanente Redwood City Med Ctr
 MRAP Number: N/A
 MRI System Manuf.: GE
 Software Version: DV24.0_R02_1607.b
 ACR Phantom No.: J11523

Report Date: 28-Sep-22
 Evaluation Date: 28-Sep-22
 Model: MR750 XG2
 System ID: KP EIN 960509 (WB0744)
 Medical Physicist: Shaohua Liu, Ph.D., DABR
 Signature: 

Medical Physicist Equipment Performance Evaluation

	Pass	Fail	N/A
1. Setup and Table Position Accuracy	☒	☐	☐
2. Center Frequency and Transmitter Gain	☒	☐	☐
3. Transmitter Gain or Attenuation	☒	☐	☐
4. Geometric Accuracy	☒	☐	☐
5. High Contrast Spatial Resolution	☒	☐	☐
6. Low Contrast Object Detectability	☒	☐	☐
7. Artifact Evaluation	☒	☐	☐
8. Film Printer Quality Control	☐	☐	☒
9. Visual Checklist	☒	☐	☐
10. Magnetic Field Homogeneity	☒	☐	☐
Method of testing: <u>Spectral Peak</u>			
11. Slice Position Accuracy	☒	☐	☐
12. Slice Thickness Accuracy	☒	☐	☐
13. Radiofrequency Coil Checks	☒	☐	☐
Were all clinically used coils evaluated for:			
a. Signal-to-Noise Ratio (SNR)	<u>Yes</u>		
b. Volume Coil Percent Image Uniformity (PIU)?	<u>Yes</u>		
c. Percent Signal Ghosting (PSG)	<u>Yes</u>		
14. Soft Copy (Monitor) Displays	☒	☐	☐
15. MR Safety Program Assessment	☒	☐	☐



MRI Equipment Performance Evaluation Summary (continued)

Site Name: Kaiser Permanente Redwood City Med Ctr
 MRAP Number: N/A
 MRI System Manuf.: GE
 Software Version: DV24.0_R02_1607.b
 ACR Phantom No.: J11523

Report Date: 28-Sep-22
 Evaluation Date: 28-Sep-22
 Model: MR750 XG2
 System ID: KP EIN 960509 (WB0744)
 Medical Physicist: Shaohua Liu, Ph.D., DABR

Evaluation of Site's Technologist QC Program

	Pass	Fail	N/A
1. Set up and positioning accuracy : (weekly)	☒	☐	☐
2. Center frequency : (weekly)	☒	☐	☐
3. Transmitter attenuation or gain : (weekly)	☒	☐	☐
4. Geometric accuracy measurements : (weekly)	☒	☐	☐
5. Spatial resolution measurements : (weekly)	☒	☐	☐
6. Low contrast detectability : (weekly)	☒	☐	☐
7. Film quality control : (weekly)	☐	☐	☒
8. Visual checklist : (weekly)	☒	☐	☐

Additional Medical Physicist Evaluations

	Pass	Fail	N/A
1. Image Intensity Uniformity	☒	☐	☐
2. Percent Signal Ghosting	☒	☐	☐

Medical Physicist Recommendations for Quality Improvement

The system evaluation was performed in accordance with ACR MRI Accreditation Program guidelines.
 There were no deficiencies observed during the image acquisition and system evaluation.

Pulse Sequence Acquisition Parameters											
Study	Pulse Sequence	TR (ms)	TE (ms)	FOV (cm)	Number of Slices	Slice Thickness (mm)	Slice Gap (mm)	NEX	Matrix	Routine Receive BW (kHz)	Scan Time (Min:Sec)
ACR Sagittal Localizer	Spin Echo	200	20	25	1	20	N/A	1	256x256		
		200	20	25	1	20	N/A	1	256x256	31.25	0:56
ACR Axial T1	Spin Echo	500	20	25	11	5	5	1	256x256		
		500	20	25	11	5	5	1	256x256	31.25	2:16
ACR Axial T2	Spin Echo	2000	20/80	25	11	5	5	1	256x256		
		2000	20/80	25	11	5	5	1	256x256	31.25/27.78	8:56

Scan options used on theSagittal Localizer Scan : NoneACR T1-Weighted Scans : EDR, SCICACR T2-Weighted Scans : EDR, SCICAdditional Comments: None

1. Setup and Table Position Accuracy

Result : PASS

Console, Magnet Safety Zone, and Operational Safety Check

Result : PASS

	Yes	No	N/A
Is the MRI control console suitable for clinical use ?	☒	☐	☐
If not, describe the safety and operational deficiencies :			
Is the MRI scanner room/suite suitable for clinical use ?	☒	☐	☐
If not, describe the safety and operational deficiencies :			
Is there sufficient magnet safety warning signage?	☒	☐	☐
If not, describe the deficiencies in magnet safety signage :			
If the MRI suite is constructed after 2009, Is the "Four Magnet Safety Zone" design followed?	☒	☐	☐
If not, justify why the Magnet Safety Zones are not followed :			

Phantom Inspection, Phantom/Table Positioning, and Acquisition

Result : PASS

	Yes	No	N/A
The MRI phantom does not have large bubbles or physical damage ?	☒	☐	☐
The MRI phantom is properly aligned in the head coil ?	☒	☐	☐
The 45-degree wedges are seen in the sagittal images ?	☒	☐	☐
The acquisition parameters following ACR prescriptions are recorded ?	☒	☐	☐

2. Center Frequency and Transmitter Gain

Result : PASS

Main Magnetic Field Strength : ☐ 1.5 T ☒ 3.0 T ☐ 0.35 T (Other)

Expected Center Frequency : 127,728,000 Hz Reported Center Frequency : 127,772,484 Hz

Is the Reported Center Frequency within $\pm 5\%$ of the Expected Center Frequency? YES

3. Transmitter Gain or Attenuation

Result : PASS

Expected Transmitter Gain : 129 Reported Transmitter Gain : 128

Is the Reported Center Frequency within $\pm 10\%$ of the Expected Center Frequency? YES

4. Geometric Accuracy

Result : PASS

		Direction	Measurement	Result	Criteria
ACR T1	Sagittal	Top to Bottom	147 mm	Pass	148+/-2 mm
	Slice 1	Left to Right	190 mm	Pass	190+/-2 mm
	Slice 1	Top to Bottom	189 mm	Pass	190+/-2 mm
	Slice 5	UL to LR	190 mm	Pass	190+/-2 mm
	Slice 5	LL to UR	190 mm	Pass	190+/-2 mm
ACR T2	Slice 1	Left to Right	189 mm	Pass	190+/-2 mm
	Slice 1	Top to Bottom	190 mm	Pass	190+/-2 mm
	Slice 5	UL to LR	189 mm	Pass	190+/-2 mm
	Slice 5	LL to UR	190 mm	Pass	190+/-2 mm

Additional Comments: _____

5. High Contrast Spatial Resolution

Result : PASS

Study	Hole Array	Criteria All 4 holes are distinguishable	Hole Array Pair			Result
			1.1 mm	1.0 mm	0.9 mm	
ACR T1	UL	in <u>any single row</u>	Yes	Yes	No	Pass
	LR	in <u>any single column</u>	Yes	Yes	No	Pass
ACR T2	UL	in <u>any single row</u>	Yes	Yes	No	Pass
	LR	in <u>any single column</u>	Yes	Yes	No	Pass
Site's T1	UL	in <u>any single row</u>				N/A
	LR	in <u>any single column</u>				N/A
Site's T2	UL	in <u>any single row</u>				N/A
	LR	in <u>any single column</u>				N/A

Additional Comments: Site's T1 and T2 were not evaluated.

6. Low Contrast Object Detectability

Result : PASS

Main Magnetic Field Strength : ☐ 1.5 T ☒ 3.0 T ☐ 0.35 T (Other)

Study	Complete Spokes Observed in				Total Complete Spokes Observed	Result	Criteria
	Slice 11	Slice 10	Slice 9	Slice 8			
ACRT1	10	10	10	9	39	Pass	37
ACRT2	10	10	10	8	38	Pass	37
Site's T1						N/A	
Site's T2						N/A	

Additional Comments: Site's T1 and T2 were not evaluated.

7. Artifact Evaluation

Result : PASS

	Yes	No	N/A
Are there unexpected artifacts in the Scout images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Sagittal Localizer images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the ACR Axial T1 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the ACR Axial T2 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Site Axial T1 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Site Axial T2 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐

8. Film Printer Quality Control

Result : N/A

	Yes	No	N/A
Are clinical images produced using an on-site film printer?	☐	☒	☐
If clinical images are produced using an on-site film printer, is film printer QC Acceptable?	☐	☐	☒

9. Visual Checklist

Result : PASS

	Yes	No	N/A
Visual checklist completed & documented by the site at least monthly?	☒	☐	☐
Patient Transport and Gantry			
☒ Table position and other displays	☒		
☒ Alignment lights	☒		
☒ Horizontal smoothness of motion and stability			
☒ Vertical smoothness of motion and stability			
RF Integrity and Control Room			
☒ RF Door contacts	☒		
☒ RF window-screen integrity	☒		
☒ Patient monitor (if present)			
☒ Patient intercom			
☒ Operator console switches/lights/meters	☒		
☒ Room temperature / Room Humidity			
Facility Safety			
☒ Emergency Cart	☒		
☒ Door indicator switch (if installed)			
☒ Safety Warning Signage	☒		
☒ Cryogen level indicator			

10. Magnetic Field Homogeneity

Result : PASS

Method Used:

☒

Spectral Peak

☐

Phase Difference

☐

Other (describe)

Measured Homogeneity at Annual Evaluation	0.6 ppm
Manufacturer Specification	1 ppm

Homogeneity Measurements	f(lower):	-0.00004 MHz
	f(upper):	0.00004 MHz
	f(center):	127.772484 MHz

Additional Comments: _____

11. Slice Position Accuracy

Result : PASS

Study	Slice	Longer Bar (Left/Right)	Bar Length Difference	Slice Displacement	Result
ACR T1	1	Left	2.0 mm	- 1.0 mm	Pass
	11	Left	3.0 mm	- 1.5 mm	Pass
ACR T2	1	Left	2.0 mm	- 1.0 mm	Pass
	11	Left	3.0 mm	- 1.5 mm	Pass

Additional Comments: _____

12. Slice Thickness Accuracy

Result : PASS

Study	Position	ROI Mean Signal	Level	Length (mm)	Slice Th. (mm)	Result
ACR T1	Top Ramp	791	419	54.3 mm	5.1 mm	Pass
	Bottom Ramp	885		48.8 mm		
ACR T2	Top Ramp	377	203	54.3 mm	5.0 mm	Pass
	Bottom Ramp	436		45.8 mm		

Additional Comments: _____

13. Radiofrequency Coil Checks

Result : PASS

	Yes	No	N/A
Were all clinically used coils evaluated?	☒	☐	☐
a. Signal-to-Noise Ratio (SNR) evaluated for each coil?	☒	☐	☐
b. Percent Image Uniformity (PIU) evaluated for volume coils?	☒	☐	☐
c. Percent Signal Ghosting (PSG) evaluated?	☒	☐	☐

Additional Comments: _____

A. Volume RF Coil –

RF coil description : 8CHBRAIN Coil SN 43027 Date: 28-Sep-22
 Phantom Description : ACR Phantom
 Pulse Sequence : Type : Spin Echo flip angle : 90°
 TR : 500 msec TE : 20 msec
 FOV : 25 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 5 mm Scan Time : 2:16

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
7239	8047	6475	10.6	2.6	14.0

Calculated Values : Max – Min = 1572 Max + Min = 14522

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
2784	89.2%	0.02%

B. Volume RF Coil –

RF coil description : Body Coil Date: 28-Sep-22
 Phantom Description : Large Sphere Phantom
 Pulse Sequence : Type : Spin Echo flip angle : 90°
 TR : 200 msec TE : 20 msec
 FOV : 40 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
806	907	737	31.0	15.2	32.3

Calculated Values : Max – Min = 170 Max + Min = 1644

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
53	89.7%	0.08%

13. Radiofrequency Coil Checks (Continued)

C. Volume RF Coil –

RF coil description : TR Standard Head Coil SN 000023WHG Date: 28-Sep-22
Phantom Description : ACR Phantom
Pulse Sequence : Type: Spin Echo flip angle: 90°
TR: 200 msec TE: 20 msec
FOV: 25 cm² Matrix: 256x256
BW: 31.25 kHz NSA: 1
Slice Thickness: 20 mm Scan Time: 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
6600	7134	5537	45.0	23.0	50.0

Calculated Values: Max – Min = 1597 Max + Min = 12671

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
287	87.4%	0.04%

D. Volume RF Coil –

RF coil description : HD HNS Array SN H01379 - Head Date: 28-Sep-22
Phantom Description : Medium Sphere Phantom
Pulse Sequence : Type: Spin Echo flip angle: 90°
TR: 200 msec TE: 20 msec
FOV: 25 cm² Matrix: 256x256
BW: 31.25 kHz NSA: 1
Slice Thickness: 20 mm Scan Time: 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
3068	3415	2519	63.0	10.0	63.0

Calculated Values: Max – Min = 896 Max + Min = 5934

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
307	84.9%	0.00%

13. Radiofrequency Coil Checks (Continued)**E. Surface RF Coil –**

RF coil description : HD HNS Array SN H01379 - Neck Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
2221	57.8	57.6	9.1	244.1	2.19%

F. Surface RF Coil –

RF coil description : HD HNS Array SN H01379 - BrachPlex N687 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1927	56.8	55.7	8.5	226.7	2.51%

G. Surface RF Coil –

RF coil description : HD HNS Array TL SN H01379 - CTL12 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 40 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1041	12.0	10.2	2.1	495.7	0.95%

13. Radiofrequency Coil Checks (Continued)**H. Surface RF Coil –**

RF coil description : HD HNS Array TL SN H01379 - CTL34 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 40 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1579	16.4	12.2	3.3	478.5	0.83%

I. Surface RF Coil –

RF coil description : HD HNS Array TL SN H01379 - CTL56 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 40 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1657	10.9	6.8	1.8	920.6	0.55%

J. Surface RF Coil –

RF coil description : HD 32Ch Torso Array - Posterior SN 004-4-5267 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
3880	69.4	67.7	6.5	596.9	1.62%

13. Radiofrequency Coil Checks (Continued)**K. Surface RF Coil –**

RF coil description : HD 32Ch Torso Array - Anterior SN 004-4-5267 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
4468	69.4	67.7	6.5	687.4	1.41%

L. Surface RF Coil –

RF coil description : HD TR Knee/Foot Coil SN 042518 Date: 28-Sep-22
 Phantom Description : Medium Cylinder Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
3101	37.2	35.5	17.3	179.2	0.64%

M. Surface RF Coil –

RF coil description : HD Cardiac Array - Anterior SN 1097 Date: 28-Sep-22
 Phantom Description : TL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
547	15.5	15.0	2.7	202.6	2.34%

13. Radiofrequency Coil Checks (Continued)

N. Surface RF Coil –

RF coil description : HD Cardiac Array - Posterior SN 1097 Date: 28-Sep-22
 Phantom Description : TL Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
932	15.5	15.0	2.7	345.2	1.37%

O. Surface RF Coil –

RF coil description : HD Shoulder Array SN 685 Date: 28-Sep-22
 Phantom Description : Medium Sphere Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
4697	32.8	30.8	8.2	572.8	0.52%

P. Surface RF Coil –

RF coil description : Large Flex Array SN 040-4-0205 Date: 28-Sep-22
 Phantom Description : Medium Sphere Phantom
 Pulse Sequence: Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
9250	114.6	100.0	13.6	680.1	1.09%

13. Radiofrequency Coil Checks (Continued)**Q. Surface RF Coil –**

RF coil description : Medium Flex Array SN 033-4-0135 Date: 28-Sep-22
 Phantom Description : Medium Cylinder Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR : 200 msec TE : 20 msec
 FOV : 20 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
5155	79.8	77.0	11.1	464.4	1.33%

R. Surface RF Coil –

RF coil description : Small Flex Array SN 034-4-0169 Date: 28-Sep-22
 Phantom Description : Small Cylinder Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR : 200 msec TE : 20 msec
 FOV : 16 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
5850	105.6	109.1	14.6	400.7	1.56%

14. Soft Copy (Monitor) Displays**Result : PASS**

Photometer Make/Model : Raysafe Model X2
 Monitor description : -

Calibration Date : -
 Luminance Measured : Cd m²
 Cd m² or Ft. Lamberts

Monitor Description	Center of Image Display	Top Left Corner	Top Right Corner	Bottom Right Corner	Bottom Left Corner
Control Console	24.4	23.8	25.1	23.3	24.9

Average luminance from four corners of screen : 24.3 Cd/m²

Percent Difference : 7.4 %

Luminance Uniformity **PASS**

Maximum Luminance : 138 Cd/m²
 Minimum Luminance : 0.4 Cd/m²

Luminance Ratio 345 Cd/m²

Luminance Ratio **PASS**

SMPTE Test Pattern on Soft Copy (Monitor) Display:**PASS**

Yes No N/A

- a. Is the 5% block clearly visible?
 b. Is the 95% block clearly visible?
 c. Is the visibility of each block equally visible?
 d. Does each block going from 0% to 100% represent an approximately equal step from minimum to maximum brightness?

☒	☐	☐
☒	☐	☐
☒	☐	☐
☒	☐	☐

Additional Comments: _____

Evaluation of Site Technologist QC Program**Result : PASS**

- Set up and positioning accuracy : (weekly)
- Center frequency : (weekly)
- Transmitter attenuation or gain : (weekly)
- Geometric accuracy measurements : (weekly)
- Spatial resolution measurements : (weekly)
- Low contrast detectability : (weekly)
- Film quality control : (weekly)
- Visual checklist : (weekly)

Pass	Fail	N/A
☒	☐	☐
☒	☐	☐
☒	☐	☐
☒	☐	☐
☒	☐	☐
☒	☐	☐
☐	☐	☒
☒	☐	☐

SPECIFIC COMMENTS :

Additional Medical Physicist Evaluations**1. Image Intensity Uniformity****Result : PASS**

Is the large ROI between 195 cm² and 205 cm² ? Yes No N/A
☒ ☐ ☐
 Is the small ROI approximately 1 cm² ? ☒ ☐ ☐ note: set WW = 0
 Main Magnetic Field Strength : ☒ 3 T ☐ 1.5 T

Study	Dark / Low Signal Mean Pixel value	Bright / High Signal Mean Pixel value	Percent Integral Uniformity	Result	Criteria
ACR T1	6475	8047	89.18%	Pass	82.0%
ACR T2	3322	4153	88.88%	Pass	82.0%

Additional Comments: with SCIC on.

2. Percent Signal Ghosting**Result : PASS**

Is the large ROI between 195 cm² and 205 cm² ? Yes No N/A
☒ ☐ ☐
 Is the rectangular ROI approximately 4:1 and 10 cm² ? ☒ ☐ ☐

Region of Interest	ACR T1		ACR T2	
	ROI Mean	ROI Std Dev	ROI Mean	ROI Std Dev
Large	7239	471.0	3825	293.0
Top	51.0	9.0	48.9	8.2
Bottom	51.2	8.6	46.7	7.2
Left	61.5	9.4	57.8	9.7
Right	58.9	9.5	54.0	8.8
	Ghosting Ratio:	0.0013	Ghosting Ratio:	0.0021

Additional Comments: Criteria : T1 Ghosting Ratio ≤ 0.025

MRI Safety Program Assessment Checklist

Site: Kaiser Permanente Redwood City Med Ctr

The site's written MRI safety policy addresses the following:

	Yes	No	N/A
1 Designated MR medical director	☒	☐	☐
2 Site access restrictions (MR zones)	☒	☐	☐
3 Documented MR Safety education/training for all personnel	☒	☐	☐
4 Patient and non-MR personnel screening	☒	☐	☐
5 Pediatric patients	☒	☐	☐
6 Magnet quench	☒	☐	☐
7 Cryogen safety	☒	☐	☐
8 Acoustic noise	☒	☐	☐
9 Pregnant patients and staff	☒	☐	☐
10 Contrast agent safety	☒	☐	☐
11 Sedations	☒	☐	☐
12 Thermal burns	☒	☐	☐
13 Emergency code procedures	☒	☐	☐
14 Device and object screening	☒	☐	☐
15 Designation of MR safe/MR conditional status	☒	☐	☐
16 Reporting of MR safety incidents or adverse incidents	☒	☐	☐
17 Patient communication	☒	☐	☐
18 Infection control and medical waste	☒	☐	☐

Criteria for compliance:

	Yes	No	N/A
1 Written policies are present and readily available to facility staff.	☒	☐	☐
2 Written policies are reviewed and updated on a regular basis.	☒	☐	☐
3 Facility has appropriate MR safety warning signage and methods of controlled access.	☒	☐	☐

15. MR Safety Program Assessment

Overall Pass/ Fail : PASS

Comments:

Reviewed by : Shaohua Liu, Ph.D., DABR
Qualified Medical Physicist

28-Sep-22
Date

Partners in Medical Physics, LLC

Board Certified Diagnostic Medical Physicists
8055 FM 359 Rd S # 1041, Fulshear, Texas 77441

September 28, 2022

Kaiser Permanente Redwood City Med Ctr
1100 Veterans Blvd
Redwood City, CA 94063

Subject: Annual MRI scanner performance evaluation
GE MR750 XG2, System ID: KP EIN 960509 (WB0744)

- | |
|---|
| <ol style="list-style-type: none">1. The system evaluation was performed in accordance with ACR MRI Accreditation Program guidelines.2. There were no deficiencies observed during the image acquisition and system evaluation.3. The site appears to follow MRI safety well. |
|---|

Please review the attached report carefully and contact the physicists for any questions.
Thank you for choosing us for your medical physics service.



Shaohua Liu, Ph.D., DABR

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MRI Equipment Performance Evaluation Summary

Site Name: Kaiser Permanente Redwood City Med Ctr
 MRAP Number: N/A
 MRI System Manuf.: GE
 Software Version: DV24.0_R02_1607.b
 ACR Phantom No.: J11523

Report Date: 28-Sep-22
 Evaluation Date: 28-Sep-22
 Model: MR750 XG2
 System ID: KP EIN 960509 (WB0744)
 Medical Physicist: Shaohua Liu, Ph.D., DABR
 Signature: 

Medical Physicist Equipment Performance Evaluation

	Pass	Fail	N/A
1. Setup and Table Position Accuracy	☒	☐	☐
2. Center Frequency and Transmitter Gain	☒	☐	☐
3. Transmitter Gain or Attenuation	☒	☐	☐
4. Geometric Accuracy	☒	☐	☐
5. High Contrast Spatial Resolution	☒	☐	☐
6. Low Contrast Object Detectability	☒	☐	☐
7. Artifact Evaluation	☒	☐	☐
8. Film Printer Quality Control	☐	☐	☒
9. Visual Checklist	☒	☐	☐
10. Magnetic Field Homogeneity	☒	☐	☐
Method of testing: <u>Spectral Peak</u>			
11. Slice Position Accuracy	☒	☐	☐
12. Slice Thickness Accuracy	☒	☐	☐
13. Radiofrequency Coil Checks	☒	☐	☐
Were all clinically used coils evaluated for:			
a. Signal-to-Noise Ratio (SNR)	<u>Yes</u>		
b. Volume Coil Percent Image Uniformity (PIU)?	<u>Yes</u>		
c. Percent Signal Ghosting (PSG)	<u>Yes</u>		
14. Soft Copy (Monitor) Displays	☒	☐	☐
15. MR Safety Program Assessment	☒	☐	☐

MRI Equipment Performance Evaluation Summary (continued)

Site Name: Kaiser Permanente Redwood City Med Ctr
 MRAP Number: N/A
 MRI System Manuf.: GE
 Software Version: DV24.0_R02_1607.b
 ACR Phantom No.: J11523

Report Date: 28-Sep-22
 Evaluation Date: 28-Sep-22
 Model: MR750 XG2
 System ID: KP EIN 960509 (WB0744)
 Medical Physicist: Shaohua Liu, Ph.D., DABR

Evaluation of Site's Technologist QC Program

	Pass	Fail	N/A
1. Set up and positioning accuracy : (weekly)	☒	☐	☐
2. Center frequency : (weekly)	☒	☐	☐
3. Transmitter attenuation or gain : (weekly)	☒	☐	☐
4. Geometric accuracy measurements : (weekly)	☒	☐	☐
5. Spatial resolution measurements : (weekly)	☒	☐	☐
6. Low contrast detectability : (weekly)	☒	☐	☐
7. Film quality control : (weekly)	☐	☐	☒
8. Visual checklist : (weekly)	☒	☐	☐

Additional Medical Physicist Evaluations

	Pass	Fail	N/A
1. Image Intensity Uniformity	☒	☐	☐
2. Percent Signal Ghosting	☒	☐	☐

Medical Physicist Recommendations for Quality Improvement

The system evaluation was performed in accordance with ACR MRI Accreditation Program guidelines.
 There were no deficiencies observed during the image acquisition and system evaluation.

Pulse Sequence Acquisition Parameters											
Study	Pulse Sequence	TR (ms)	TE (ms)	FOV (cm)	Number of Slices	Slice Thickness (mm)	Slice Gap (mm)	NEX	Matrix	Routine Receive BW (kHz)	Scan Time (Min:Sec)
ACR Sagittal Localizer	Spin Echo	200	20	25	1	20	N/A	1	256x256		
		200	20	25	1	20	N/A	1	256x256	31.25	0:56
ACR Axial T1	Spin Echo	500	20	25	11	5	5	1	256x256		
		500	20	25	11	5	5	1	256x256	31.25	2:16
ACR Axial T2	Spin Echo	2000	20/80	25	11	5	5	1	256x256		
		2000	20/80	25	11	5	5	1	256x256	31.25/27.78	8:56

Scan options used on the

Sagittal Localizer Scan : NoneACR T1-Weighted Scans : EDR, SCICACR T2-Weighted Scans : EDR, SCICAdditional Comments: None

1. Setup and Table Position Accuracy

Result : PASS

Console, Magnet Safety Zone, and Operational Safety Check

Result : PASS

	Yes	No	N/A
Is the MRI control console suitable for clinical use ?	☒	☐	☐
If not, describe the safety and operational deficiencies :			
Is the MRI scanner room/suite suitable for clinical use ?	☒	☐	☐
If not, describe the safety and operational deficiencies :			
Is there sufficient magnet safety warning signage?	☒	☐	☐
If not, describe the deficiencies in magnet safety signage :			
If the MRI suite is constructed after 2009, Is the "Four Magnet Safety Zone" design followed?	☒	☐	☐
If not, justify why the Magnet Safety Zones are not followed :			

Phantom Inspection, Phantom/Table Positioning, and Acquisition

Result : PASS

	Yes	No	N/A
The MRI phantom does not have large bubbles or physical damage ?	☒	☐	☐
The MRI phantom is properly aligned in the head coil ?	☒	☐	☐
The 45-degree wedges are seen in the sagittal images ?	☒	☐	☐
The acquisition parameters following ACR prescriptions are recorded ?	☒	☐	☐

2. Center Frequency and Transmitter Gain

Result : PASS

Main Magnetic Field Strength : ☐ 1.5 T ☒ 3.0 T ☐ 0.35 T (Other)

Expected Center Frequency : 127,728,000 Hz Reported Center Frequency : 127,772,484 Hz

Is the Reported Center Frequency within $\pm 5\%$ of the Expected Center Frequency? YES

3. Transmitter Gain or Attenuation

Result : PASS

Expected Transmitter Gain : 129 Reported Transmitter Gain : 128

Is the Reported Center Frequency within $\pm 10\%$ of the Expected Center Frequency? YES

4. Geometric Accuracy

Result : PASS

		Direction	Measurement	Result	Criteria
ACR T1	Sagittal	Top to Bottom	147 mm	Pass	148+/-2 mm
	Slice 1	Left to Right	190 mm	Pass	190+/-2 mm
	Slice 1	Top to Bottom	189 mm	Pass	190+/-2 mm
	Slice 5	UL to LR	190 mm	Pass	190+/-2 mm
	Slice 5	LL to UR	190 mm	Pass	190+/-2 mm
ACR T2	Slice 1	Left to Right	189 mm	Pass	190+/-2 mm
	Slice 1	Top to Bottom	190 mm	Pass	190+/-2 mm
	Slice 5	UL to LR	189 mm	Pass	190+/-2 mm
	Slice 5	LL to UR	190 mm	Pass	190+/-2 mm

Additional Comments: _____

5. High Contrast Spatial Resolution

Result : PASS

Study	Hole Array	Criteria All 4 holes are distinguishable	Hole Array Pair			Result
			1.1 mm	1.0 mm	0.9 mm	
ACR T1	UL	in <u>any single row</u>	Yes	Yes	No	Pass
	LR	in <u>any single column</u>	Yes	Yes	No	Pass
ACR T2	UL	in <u>any single row</u>	Yes	Yes	No	Pass
	LR	in <u>any single column</u>	Yes	Yes	No	Pass
Site's T1	UL	in <u>any single row</u>				N/A
	LR	in <u>any single column</u>				N/A
Site's T2	UL	in <u>any single row</u>				N/A
	LR	in <u>any single column</u>				N/A

Additional Comments: Site's T1 and T2 were not evaluated.

6. Low Contrast Object Detectability

Result : PASS

Main Magnetic Field Strength : ☐ 1.5 T ☒ 3.0 T ☐ 0.35 T (Other)

Study	Complete Spokes Observed in				Total Complete Spokes Observed	Result	Criteria
	Slice 11	Slice 10	Slice 9	Slice 8			
ACR T1	10	10	10	9	39	Pass	37
ACR T2	10	10	10	8	38	Pass	37
Site's T1						N/A	
Site's T2						N/A	

Additional Comments: Site's T1 and T2 were not evaluated.

7. Artifact Evaluation
Result : PASS

	Yes	No	N/A
Are there unexpected artifacts in the Scout images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Sagittal Localizer images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the ACR Axial T1 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the ACR Axial T2 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Site Axial T1 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐
Are there unexpected artifacts in the Site Axial T2 images? If yes, describe the artifact: <u>None</u>	☐	☒	☐

8. Film Printer Quality Control
Result : N/A

	Yes	No	N/A
Are clinical images produced using an on-site film printer?	☐	☒	☐
If clinical images are produced using an on-site film printer, is film printer QC Acceptable?	☐	☐	☒

9. Visual Checklist
Result : PASS

	Yes	No	N/A
Visual checklist completed & documented by the site at least monthly?	☒	☐	☐
Patient Transport and Gantry			
☒ Table position and other displays			
☒ Alignment lights			
☒ Horizontal smoothness of motion and stability			
☒ Vertical smoothness of motion and stability			
RF Integrity and Control Room			
☒ RF Door contacts			
☒ Patient monitor (if present)			
☒ RF window-screen integrity			
☒ Patient intercom			
☒ Operator console switches/lights/meters			
☒ Room temperature / Room Humidity			
Facility Safety			
☒ Emergency Cart			
☒ Door indicator switch (if installed)			
☒ Safety Warning Signage			
☒ Cryogen level indicator			

10. Magnetic Field Homogeneity**Result : PASS**

Method Used:

☒ Spectral Peak☐ Phase Difference☐ Other (describe)

Measured Homogeneity at Annual Evaluation	0.6 ppm
Manufacturer Specification	1 ppm

Homogeneity Measurements	f(lower):	-0.00004 MHz
	f(upper):	0.00004 MHz
	f(center):	127.772484 MHz

Additional Comments: _____

11. Slice Position Accuracy**Result : PASS**

Study	Slice	Longer Bar (Left/Right)	Bar Length Difference	Slice Displacement	Result
ACR T1	1	Left	2.0 mm	- 1.0 mm	Pass
	11	Left	3.0 mm	- 1.5 mm	Pass
ACR T2	1	Left	2.0 mm	- 1.0 mm	Pass
	11	Left	3.0 mm	- 1.5 mm	Pass

Additional Comments: _____

12. Slice Thickness Accuracy**Result : PASS**

Study	Position	ROI Mean Signal	Level	Length (mm)	Slice Th. (mm)	Result
ACR T1	Top Ramp	791	419	54.3 mm	5.1 mm	Pass
	Bottom Ramp	885		48.8 mm		
ACR T2	Top Ramp	377	203	54.3 mm	5.0 mm	Pass
	Bottom Ramp	436		45.8 mm		

Additional Comments: _____

13. Radiofrequency Coil Checks**Result : PASS**

Were all clinically used coils evaluated?

Yes	No	N/A
☒	☐	☐

a. Signal-to-Noise Ratio (SNR) evaluated for each coil?

☒	☐	☐
-------------------------------------	--------------------------	--------------------------

b. Percent Image Uniformity (PIU) evaluated for volume coils?

☒	☐	☐
-------------------------------------	--------------------------	--------------------------

c. Percent Signal Ghosting (PSG) evaluated?

☒	☐	☐
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Additional Comments: _____

A. Volume RF Coil –RF coil description : 8CHBRAIN Coil SN 43027Date: 28-Sep-22Phantom Description : ACR PhantomPulse Sequence : Type: Spin Echoflip angle: 90°TR: 500 msecTE: 20 msecFOV: 25 cm²Matrix: 256x256BW: 31.25 kHzNSA: 1Slice Thickness: 5 mmScan Time: 2:16

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
7239	8047	6475	10.6	2.6	14.0

Calculated Values : Max – Min = 1572Max + Min = 14522

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
2784	89.2%	0.02%

B. Volume RF Coil –RF coil description : Body CoilDate: 28-Sep-22Phantom Description : Large Sphere PhantomPulse Sequence : Type: Spin Echoflip angle: 90°TR: 200 msecTE: 20 msecFOV: 40 cm²Matrix: 256x256BW: 31.25 kHzNSA: 1Slice Thickness: 20 mmScan Time: 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
806	907	737	31.0	15.2	32.3

Calculated Values : Max – Min = 170Max + Min = 1644

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
53	89.7%	0.08%

13. Radiofrequency Coil Checks (Continued)**C. Volume RF Coil –**

RF coil description : TR Standard Head Coil SN 000023WHG Date: 28-Sep-22
 Phantom Description : ACR Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
6600	7134	5537	45.0	23.0	50.0

Calculated Values : Max – Min = 1597 Max + Min = 12671

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
287	87.4%	0.04%

D. Volume RF Coil –

RF coil description : HD HNS Array SN H01379 - Head Date: 28-Sep-22
 Phantom Description : Medium Sphere Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Mean Signal	Maximum Signal	Minimum Signal	Background Signal	Noise Standard Deviation	Ghost Signal
3068	3415	2519	63.0	10.0	63.0

Calculated Values : Max – Min = 896 Max + Min = 5934

Signal-to-Noise Ratio	Percent Image Uniformity	Percent Signal Ghosting
307	84.9%	0.00%

13. Radiofrequency Coil Checks (Continued)

E. Surface RF Coil –

RF coil description : HD HNS Array SN H01379 - Neck Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR : 200 msec TE : 20 msec
 FOV : 25 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
2221	57.8	57.6	9.1	244.1	2.19%

F. Surface RF Coil –

RF coil description : HD HNS Array SN H01379 - BrachPlex N687 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR : 200 msec TE : 20 msec
 FOV : 25 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1927	56.8	55.7	8.5	226.7	2.51%

G. Surface RF Coil –

RF coil description : HD HNS Array TL SN H01379 - CTL12 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR : 200 msec TE : 20 msec
 FOV : 40 cm² Matrix : 256x256
 BW : 31.25 kHz NSA : 1
 Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1041	12.0	10.2	2.1	495.7	0.95%

13. Radiofrequency Coil Checks (Continued)

H. Surface RF Coil –

RF coil description : HD HNS Array TL SN H01379 - CTL34 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 40 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1579	16.4	12.2	3.3	478.5	0.83%

I. Surface RF Coil –

RF coil description : HD HNS Array TL SN H01379 - CTL56 S585 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 40 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
1657	10.9	6.8	1.8	920.6	0.55%

J. Surface RF Coil –

RF coil description : HD 32Ch Torso Array - Posterior SN 004-4-5267 Date: 28-Sep-22
 Phantom Description : CTL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
3880	69.4	67.7	6.5	596.9	1.62%

13. Radiofrequency Coil Checks (Continued)

K. Surface RF Coil –

RF coil description : HD 32Ch Torso Array - Anterior SN 004-4-5267 Date: 28-Sep-22
Phantom Description : CTL Phantom
Pulse Sequence : Type: Spin Echo flip angle: 90°
TR: 200 msec TE: 20 msec
FOV: 30 cm² Matrix: 256x256
BW: 31.25 kHz NSA: 1
Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
4468	69.4	67.7	6.5	687.4	1.41%

L. Surface RF Coil –

RF coil description : HD TR Knee/Foot Coil SN 042518 Date: 28-Sep-22
Phantom Description : Medium Cylinder Phantom
Pulse Sequence : Type: Spin Echo flip angle: 90°
TR: 200 msec TE: 20 msec
FOV: 25 cm² Matrix: 256x256
BW: 31.25 kHz NSA: 1
Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
3101	37.2	35.5	17.3	179.2	0.64%

M. Surface RF Coil –

RF coil description : HD Cardiac Array - Anterior SN 1097 Date: 28-Sep-22
Phantom Description : TL Phantom
Pulse Sequence : Type: Spin Echo flip angle: 90°
TR: 200 msec TE: 20 msec
FOV: 30 cm² Matrix: 256x256
BW: 31.25 kHz NSA: 1
Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
547	15.5	15.0	2.7	202.6	2.34%

13. Radiofrequency Coil Checks (Continued)**N. Surface RF Coil –**

RF coil description : HD Cardiac Array - Posterior SN 1097 Date: 28-Sep-22
 Phantom Description : TL Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 30 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
932	15.5	15.0	2.7	345.2	1.37%

O. Surface RF Coil –

RF coil description : HD Shoulder Array SN 685 Date: 28-Sep-22
 Phantom Description : Medium Sphere Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
4697	32.8	30.8	8.2	572.8	0.52%

P. Surface RF Coil –

RF coil description : Large Flex Array SN 040-4-0205 Date: 28-Sep-22
 Phantom Description : Medium Sphere Phantom
 Pulse Sequence : Type: Spin Echo flip angle: 90°
 TR: 200 msec TE: 20 msec
 FOV: 25 cm² Matrix: 256x256
 BW: 31.25 kHz NSA: 1
 Slice Thickness: 20 mm Scan Time: 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
9250	114.6	100.0	13.6	680.1	1.09%

13. Radiofrequency Coil Checks (Continued)

Q. Surface RF Coil –

RF coil description : Medium Flex Array SN 033-4-0135 Date: 28-Sep-22
Phantom Description : Medium Cylinder Phantom
Pulse Sequence : Type : Spin Echo flip angle : 90°
TR : 200 msec TE : 20 msec
FOV : 20 cm² Matrix : 256x256
BW : 31.25 kHz NSA : 1
Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
5155	79.8	77.0	11.1	464.4	1.33%

R. Surface RF Coil –

RF coil description : Small Flex Array SN 034-4-0169 Date: 28-Sep-22
Phantom Description : Small Cylinder Phantom
Pulse Sequence : Type : Spin Echo flip angle : 90°
TR : 200 msec TE : 20 msec
FOV : 16 cm² Matrix : 256x256
BW : 31.25 kHz NSA : 1
Slice Thickness : 20 mm Scan Time : 0:56

Maximum Signal	Ghost Signal	Background Signal	Noise Standard Deviation	Maximum Signal-to-Noise Ratio	Percent of Max. Signal Ghosting
5850	105.6	109.1	14.6	400.7	1.56%

14. Soft Copy (Monitor) Displays

Result : PASS

Photometer Make/Model : Raysafe Model X2
 Monitor description : -

Calibration Date : -
 Luminance Measured : Cd m²
Cd m² or Ft. Lamberts

Monitor Description	Center of Image Display	Top Left Corner	Top Right Corner	Bottom Right Corner	Bottom Left Corner
Control Console	24.4	23.8	25.1	23.3	24.9

Average luminance from four corners of screen : 24.3 Cd/m²

Percent Difference : 7.4 %

Luminance Uniformity **PASS**

Maximum Luminance : 138 Cd/m²

Minimum Luminance : 0.4 Cd/m²

Luminance Ratio 345 Cd/m²

Luminance Ratio **PASS**

SMPTE Test Pattern on Soft Copy (Monitor) Display:

PASS

	Yes	No	N/A
a. Is the 5% block clearly visible?	☒	☐	☐
b. Is the 95% block clearly visible?	☒	☐	☐
c. Is the visibility of each block equally visible?	☒	☐	☐
d. Does each block going from 0% to 100% represent an approximately equal step from minimum to maximum brightness?	☒	☐	☐

Additional Comments: _____

Evaluation of Site Technologist QC Program

Result : PASS

	Pass	Fail	N/A
1. Set up and positioning accuracy : (weekly)	☒	☐	☐
2. Center frequency : (weekly)	☒	☐	☐
3. Transmitter attenuation or gain : (weekly)	☒	☐	☐
4. Geometric accuracy measurements : (weekly)	☒	☐	☐
5. Spatial resolution measurements : (weekly)	☒	☐	☐
6. Low contrast detectability : (weekly)	☒	☐	☐
7. Film quality control : (weekly)	☐	☐	☒
8. Visual checklist : (weekly)	☒	☐	☐

SPECIFIC COMMENTS :

Additional Medical Physicist Evaluations

1. Image Intensity Uniformity

Result : PASS

Is the large ROI between 195 cm² and 205 cm² ? Yes ☒ No ☐ N/A ☐
 Is the small ROI approximately 1 cm² ? Yes ☒ No ☐ N/A ☐ note: set WW = 0
 Main Magnetic Field Strength : ☒ 3 T ☐ 1.5 T

Study	Dark / Low Signal Mean Pixel value	Bright / High Signal Mean Pixel value	Percent Integral Uniformity	Result	Criteria
ACR T1	6475	8047	89.18%	Pass	82.0%
ACR T2	3322	4153	88.88%	Pass	82.0%

Additional Comments: with SCIC on.

2. Percent Signal Ghosting

Result : PASS

Is the large ROI between 195 cm² and 205 cm² ? Yes ☒ No ☐ N/A ☐
 Is the rectangular ROI approximately 4:1 and 10 cm² ? Yes ☒ No ☐ N/A ☐

Region ofInterest	ACR T1		ACR T2	
	ROI Mean	ROI Std Dev	ROI Mean	ROI Std Dev
Large	7239	471.0	3825	293.0
Top	51.0	9.0	48.9	8.2
Bottom	51.2	8.6	46.7	7.2
Left	61.5	9.4	57.8	9.7
Right	58.9	9.5	54.0	8.8
	Ghosting Ratio:	0.0013	Ghosting Ratio:	0.0021

Additional Comments: Criteria : T1 Ghosting Ratio ≤ 0.025

MRI Safety Program Assessment Checklist

Site: Kaiser Permanente Redwood City Med Ctr

The site's written MRI safety policy addresses the following:

	Yes	No	N/A
1 Designated MR medical director	☒	☐	☐
2 Site access restrictions (MR zones)	☒	☐	☐
3 Documented MR Safety education/training for all personnel	☒	☐	☐
4 Patient and non-MR personnel screening	☒	☐	☐
5 Pediatric patients	☒	☐	☐
6 Magnet quench	☒	☐	☐
7 Cryogen safety	☒	☐	☐
8 Acoustic noise	☒	☐	☐
9 Pregnant patients and staff	☒	☐	☐
10 Contrast agent safety	☒	☐	☐
11 Sedations	☒	☐	☐
12 Thermal burns	☒	☐	☐
13 Emergency code procedures	☒	☐	☐
14 Device and object screening	☒	☐	☐
15 Designation of MR safe/MR conditional status	☒	☐	☐
16 Reporting of MR safety incidents or adverse incidents	☒	☐	☐
17 Patient communication	☒	☐	☐
18 Infection control and medical waste	☒	☐	☐

Criteria for compliance:

	Yes	No	N/A
1 Written policies are present and readily available to facility staff.	☒	☐	☐
2 Written policies are reviewed and updated on a regular basis.	☒	☐	☐
3 Facility has appropriate MR safety warning signage and methods of controlled access.	☒	☐	☐

15. MR Safety Program Assessment

Overall Pass/ Fail : **PASS**

Comments:

 Reviewed by : Shaohua Liu, Ph.D., DABR
 Qualified Medical Physicist

28-Sep-22
 Date

Kaiser Permanente Clinical Technology
Medical Equipment Service History
Northern California
as of 3/14/23

Service History for EIN: 960509
Time period: 3/14/20 to 3/14/23
Service Type: PM

 **Print Report**
» **Return to the request page**

Equipment

EIN	Status	Facility	Dept. No.	Location Detail	Description	Manufacturer	Model	Serial No.	Cond. Code	Installed
960509	Active	Redwood City Hospital	0852	3T mri inside hosp, Rm IN97	Scanning Systems, Magnetic Resonance Imaging	GE Healthcare	Discovery MR750 3.0T	650780MR750	Mid Life	07/02/14

Service History - Preventive Maintenance (PM)

Service Date	Problem	Resolution	Engineer	WO Number
12/21/22	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	Completed PM per OEM's instructions.	Paul Zelasko	CWKD2880533
09/22/22	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	Scheduled PM for Tuesday, Sept 20th, 1050-1645. PM completed per GE's instructions.	Paul Zelasko	CWKD2758829
06/24/22	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	Scheduled PM for June 21st. PM Completed per GE's instructions.	Paul Zelasko	CWKD2591335
03/15/22	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	ran PM tests	Enrique J. Ruiz	CWKD2433889
12/23/21	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	PM done	Enrique J. Ruiz	CWKD2244451
10/26/21	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	vendor completed PM report attached	Robert A. Sorum	CWKD2105872
06/30/21	Paperwork correction for PM work order CWKD1731818, completed 6/15/2021	Paperwork correction for PM work order CWKD1731818, completed 6/15/2021	Enrique J. Ruiz	CWKD2026674
06/15/21	PM\\GE Healthcare\\Discovery MR750 3.0T\\Month_3	performed PM	Enrique J. Ruiz	CWKD1731818
03/16/21	0541_Magnetic Resonance Imaging, MRI Units_Month_3	completed PM	Enrique J. Ruiz	CWKD1585564
12/15/20	0541_Magnetic Resonance Imaging, MRI Units_Month_3	Completed PM	Enrique J. Ruiz	CWKD1453316
09/15/20	0541_Magnetic Resonance Imaging, MRI Units_Month_3	PM, Completed	Enrique J. Ruiz	CWKD1272294
06/16/20	0541_Magnetic Resonance Imaging, MRI Units_Month_3	completed	Enrique J. Ruiz	CWKD1145204
03/17/20	0541_Magnetic Resonance Imaging, MRI Units_Month_3	PM completed per checklist	Enrique J. Ruiz	CWKD0998324

Kaiser Permanente
Environmental Health & Safety
Incident Report

TYPE: SRAE INCIDENT
LOCATION: MRI room Main Hospital RWC
INCIDENT DATE & TIME: 02-23-2023
DATE ACCIDENT REPORTED: 02-23-2023
INVOLVED PARTIES: MRI TECH 1
MRI TECH 2
RN ICU

NARRATIVE SUMMARY

An RN brought the patient to the MRI for a study. The patient's bed was pulled into the zone 4 (strong magnetic area) causing the RN to be pinned in between the bed and the MRI machine. The RN was taken to the ED for treatment and treated for lacerations and abdominal injury.

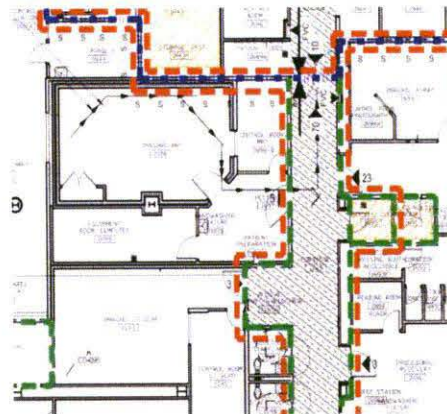
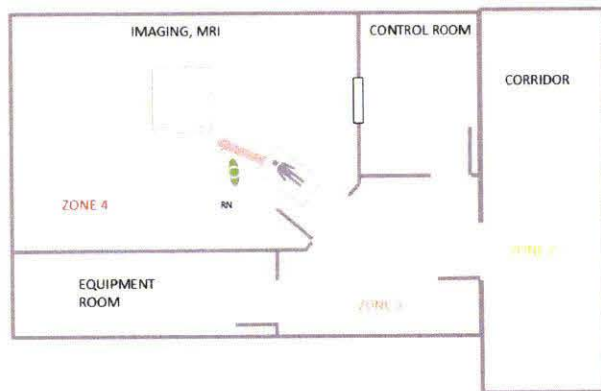
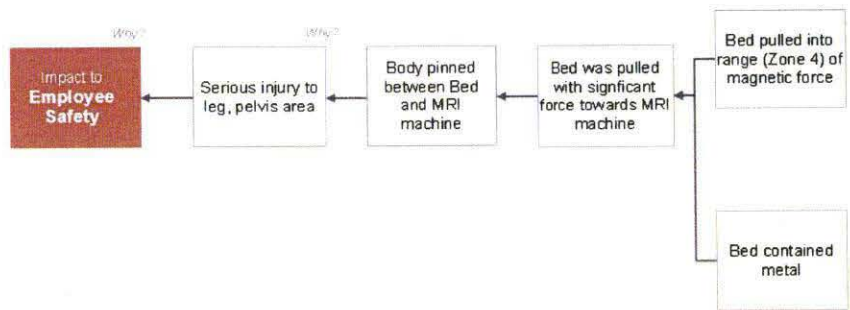
INVESTIGATION

Total of 3 staff members (2 **MRI Tech/Assistant** and 1**PCT**) were interviewed as part of the investigation process. The names of the interviewer were kept confidential and will not be shared as part of the report. The investigation is still under progress and final report will be concluded after the injured nurse has been interviewed.

Please see below the key highlights from the interview process:

- At 8:02 am, the RN arrived with a PCT and a patient on the bed, and was buzzed into the MRI zone 3 by the MRI tech I
- The MRI tech I after greeting the RN, the PCT and the patient (on the bed) went to the control room and started to check in the patient.
- The RN after entering the zone 3 slowly started to push the bed towards the **zone 4** door (strong magnetic area).
- The **zone 4** door was open and blocked by the MRI table.
- The RN pushed the table aside and went straight into **zone 4**.
- This caused the bed to be pulled strongly towards the MRI machine resulting into the RN being pulled into the corner of the MRI machine

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Incident Report



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Environmental Health & Safety
Incident Report

Immediate correction action:

- Leadership call was initiated at 10:30am with local and regional leadership team. High level overview of the incident was provided with immediate action plan.
- Employees and departments involved provided support from the Employee Assistance Program.
- Chief Nurse Executive met with employee's husband and mother to offer support and assistance.
- MRI GE Tech was called on-site to perform risk assessment and determine the safety of the MRI machine.
- Small group of leaders and stakeholders convened to start deep dive on event and add to immediate corrective actions
- Comprehensive systemic analysis initiated.
- Safety alert regarding MRI safety shared with the RWC dept Managers.
- The incident was discussed during the Daily Safety briefing with all Dept Managers/leadership team

PHOTOGRAPHS:



**Kaiser Permanente
Environmental Health & Safety
Incident Report**



Kaiser Permanente

Entity: KFH/P
Location Code: 99999

Year: 2023

Facility:

OSHA's Form 300 Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to the employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Identify the person			Describe the case		Classify the case												
Case No.	Employee's Name	Job Title	Date of injury or onset of illness	Where the event occurred	Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill	Using these four categories, check ONLY the most serious result for each case: Days Job Other away transfer record- from or rest- able work work riction cases Death				Enter the number of days the injured or ill worker was: Away On job from transfer work or restrict. (days) (days)		Injury	Skin Disorder	Respiratory condition	Poisoning	Hearing loss	All Other illnesses
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
4A230184D1D-0001			1/2/2023	Patient Room	posterior upper back area (thoracic area) strain - pushing or pulling - patient		X			34	45	X					
2023010000434			1/6/2023	Back dock	left knee contusion (bruise, skin surface) - trip - cord		X			12	0	X					
2023010000924			1/7/2023	Med Tele 6N	bilateral eye(s) foreign body (eye) - struck/injured by body fluid, blood, saliva, etc. - bodily fluids				X	0	0	X					
2023010000584			1/12/2023	7 South Room 712A	right shoulder(s) strain - holding or carrying - patient		X			70	0	X					
2023010000821			1/16/2023	5 South Neuro Unit	right upper leg puncture - needle stick - needle				X	0	0	X					
2023020000967			2/23/2023	MRI Zone 3	abdomen including groin laceration - caught in/between-object handled - mri machine		X			28	0	X					
2023030000118			3/2/2023	"Willow Road East Palo Alto, CA"	posterior cervical sprain - motor vehicle, noc - mva		X			4	0	X					
2023030000770			3/16/2023	Marshall Pharmacy	right finger(s) sprain - caught in, under or between, noc - side wall				X	0	0	X					
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
Totals:						0	5	0	3	148	45	8	0	0	0	0	0

OSHA's Form 300

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to the employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Kaiser Permanente

Entity: KFH/P
Location Code: 99999

Year: 2022

Facility:

Identify the person			Describe the case			Classify the case											
Case No.	Employee's Name	Job Title	Date of injury or onset of illness	Where the event occurred	Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill	Using these four categories, check ONLY the most serious result for each case: Remained at work: Days Job Other away transfer record- from or rest-able work action cases Death				Enter the number of days the injured or ill worker was: Away On job from transfer work of (days) (days)		Injury	Skin Disorder	Respiratory condition	Poisoning	Hearing loss	All Other illnesses
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
2022010000065			1/2/2022	Labor and Delivery Room 401	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022010002352			1/12/2022	ICU	left wrist sprain - pushing or pulling - patient			X		0	83	X					
2022010003962			1/24/2022	SS	left thumb puncture - needle stick - needle				X	0	0	X					
2022020000430			1/26/2022	MOB Parking Garage - Bike cage	bilateral knee strain - fall/slip on ice or snow - concrete floor				X	0	0	X					
2022020000909			2/11/2022	Dock	bilateral back (all other) strain - boxes		X			13	147						X
4A2203GW430-0001			3/1/2022	Nurse's station	right ankle sprain - twisting - bodily movement			X		0	71	X					
2022030000374			3/7/2022	Patient Room	bilateral soft tissue-neck strain - pushing or pulling - patient in wheelchair		X			180	75	X					
2022030000415			3/10/2022	Loading Dock Gate	left shoulder(s) contusion (bruise, skin surface) - fall on the same level - floor		X			180	30	X					
2022030000484			3/11/2022	6N Patient Room 671	left foot sprain - holding or carrying - patient		X			3	6	X					
2022030001182			3/25/2022	Kitchen	bilateral low back area (incl. lumbar & lumbo-sacral) strain - bending - hot pellet		X			180	0	X					
2022030001256			3/31/2022	OR 2 Main Hospital	left leg, multiple puncture - needle stick - needle				X	0	0	X					
2022040001017			4/25/2022	Mother baby unit patient room	right hand sprain - heat pack		X			124	95	X					
2022060000267			6/3/2022	Labor and Delivery Room 3	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022060001547			6/23/2022	Loading Dock	left shoulder(s) sprain - lifting - box of solution			X		0	20	X					
2022060001811			6/23/2022	SPD in Marshal Medical Office Building	low back area (incl. lumbar & lumbo-sacral) strain - pushing or pulling - cart		X			8	91	X					
2022070001458			7/22/2022	L&D OR	left finger(s) puncture - needle stick - straight needle				X	0	0	X					
2022080000327			8/3/2022	ICU	left face, multiple parts contusion (bruise, skin surface) - struck/injured by falling or flying object - ventilator hook		X			2	0	X					
2022080000343			8/4/2022	ICU	right foot strain - strain or injury by, noc - iv pump channel			X		0	28	X					
2022080001488			8/27/2022	Room 712	bilateral abdomen including groin contusion (bruise, skin surface) - patient foot		X			20	0	X					
2022080001555			8/29/2022	Outside freezer in kitchen	right thumb fracture - strike against/step on stationary object - bar		X			68	0	X					
4A2302Q9T24-0001			9/18/2022	Hospital	low back area (incl. lumbar & lumbo-sacral) strain - continuous trauma - supplies				X	0	0						X
2022090001113			9/25/2022	Patient Room 555	right hand sprain - patient			X		0	4	X					
2022100000465			10/6/2022	6N Room 661	left finger(s) puncture - needle stick - needle				X	0	0	X					
2022100000467			10/12/2022	Outside of Building on the West side pat	anterior scalp laceration - umbrella				X	0	0	X					
2022100000742			10/15/2022	ER Hallway near Radiology office	left forearm strain - fall on the same level - floor		X			1	0	X					
2022110000121			11/2/2022	MMOB Conference Room A	right finger(s) puncture - needle stick - needle				X	0	0	X					
2022110000833			11/9/2022	Medical Office	low back area (incl. lumbar & lumbo-sacral) strain - lifting - trash bag		X			39	0	X					
2022110001132			11/28/2022	ICU Rm 562	right foot contusion (bruise, skin surface) - caught in, under or between, noc - bed trapeze			X		0	37	X					
2022120000797			12/12/2022	Main PACU	bilateral eye(s) foreign body (eye) - struck/injured by body fluid, blood, saliva, etc. - blood				X	0	0	X					
2022120001066			12/19/2022	MOR 4	right hand contusion (bruise, skin surface) - strike against/step on stationary object - metal surgical table		X			3	0	X					
2022120001215			12/26/2022	ASU OR 3	right finger(s) puncture - needle stick - needle				X	0	0	X					
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
Totals:						0	13	6	12	821	687	29	0	0	0	0	2

Accident Report

State of California

☐ Fatality ?

Department of Industrial Relations

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

Date of Death

MOD	Date	1. Reporting ID R D 9506 [1] [3]	2. Previous Activity If yes yes [] No [X] enter type: Number	3. Event Number (Identifies this report)
2	23			159 200 5959

4.a. [] b. Establishment Name Change? Kaiser Permanente	5. Employer ID (State's option)
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6.a. [] b. Site address (Street, City, State, ZIP) Change? 1100 Veterans Blvd, RWC CA 94063	7. City Code 2980	8. County Code 081
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9. Mailing Address (if different) (Street, City, State, ZIP)
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Industry & ownership	10. Type of Business Hospital	11. Primary SIC/NAICS 622110	12. No. of employees
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13. Ownership (Mark "X" in one box)			
a. ☒ Private Sector	b. ☐ Local Government	c. ☐ State Government	d. [] Federal Agency Code

Receipt Information	14. Reported By Umar Mustafa	15. Date 2/23/23	16. Time 3:26	☐ AM ☒ PM
	17. Job Title Safety director	18. Telephone No. (650) 269-8648		

Employee Representation Site Contact	19. Group Name
	20. Name and Location
	21. Job Title
22. Telephone Number	

Classification	Mark an "X" in one box: a. ☐ Fatality b. ☐ Catastrophe c. ☐ Non-Fat/Cat Rptd by Professional or Media	d. ☒ Non-Fat/Cat Reported by EE ☒ ER or Other
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Event	24. Event Date 2/23/23	25. Event Time 8:30	☒ AM ☐ PM	26. Number of fatalities 0	27. Number of Hospitalized 1	28. Number of Nonhospitalized 0	29. Number of Unaccounted for 0
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30. Type of Event (e.g., Fall from scaffold) Pinched between two objects.
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31. Preliminary Description Name/Address of Injured Ainah Cervantes	Age/DOB [REDACTED]	Occupation Staff Nurse	Injury R-Leg and abdomen.
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Accident Description (Specify Mechanism/Condition/Hazardous Substance): EE got stuck into Magnetic Area, between the Glarney & MRI Machine. EE brought a patient to MRI area when her cart pulled in to magnetic field.
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Location Where Injured Employee was Moved To: Other Law Enforcement Agencies Present at Site: Workers' Compensation Insurance Carrier (Name & Address): (for Fatalities Only)	Kaiser RWC.
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TAKEN BY R1120

Action:	32. Inspection Planned? ☒ Yes [] No	If No, Reason:	33. Supervisors Assigned a. V0360 b. *	34. CSE/IH Assigned a. C0043 b.
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35. Optional Information

Type	ID	Value	Type	ID	Value
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37. District Manager Signature	Date 3/2/2023	Telephone Number ()
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