MINUTES OF THE MAGNETIC RESONANCE ADVISORY GROUP (MRAG) HELD ON THURSDAY 19TH SEPTEMBER 2013, AT THE OFFICES OF THE SOCIETY OF RADIOGRAPHERS, 207 PROVIDENCE SQUARE, LONDON SE1 2EW

PRESENT: Muriel Cockburn {MC} Carolyn Costigan {CC} Carolyn Graham {CG} Baljit Jagpal {BJ} Jenny Jones {JJ} Rakesh Puni {RP} Rebecca Vosper {RV} Rachel Watt {RW}

IN ATTENDANCE: Valerie Asemah {VA} {Minutes} Alex Lipton {AL} (Chair) Audrey Paterson {AP}

1. WELCOME AND INTRODUCTION
1.1 AP welcomed everyone to the meeting and round table introductions were made, especially for the benefit of new members, Carolyn Costigan, Baljit Jagpal and Rakesh Puni.

1.2 AP gave an overview of how this group works and the process of being appointed to the group. It is now three years since Council agreed the new policy of electing people onto advisory groups. This group has two meetings per year. The terms of reference for this group is being currently reviewed and revised. Members will have a four year term of office with renewal by application.

1.3 AL will chair the meeting today.

2. APOLOGIES FOR ABSENCE
2.1 Apologies were received from Pam Black, Sharon Burton, Susan White and Gillian Winter.

3. APPOINTMENT OF CHAIR FOR THE GROUP
3.1 Carolyn Graham was elected as Chair following a ballot. She will chair at the next meeting. The term of appointment will last for one year as per the group’s terms of reference.

4. MINUTES OF THE PREVIOUS MEETING
4.1 The minutes of the meeting held on Thursday 21st March 2013, were approved as a true and accurate record.
5. **MATTERS ARISING OTHERWISE NOT ON THE AGENDA**

5.1 **Consent for Pregnant Patients (minutes 7.1)**

GW brought this to the group at the previous meeting (radiographers consenting pregnant patients). AL reported to the group that the subject had been discussed at the previous BIR SIG when they were reviewing the draft update to the MHRA device bulletin where a couple of members from different institutions questioned the need for any consent at all. AL will report back to the next MRAG meeting when further updated MHRA guidance has been produced and further discussion with GW has taken place.

**ACTION:** AL

5.2 **Any Other Business (minute 11.5)**

At the last meeting a query was made as to whether screening forms in different languages were being used and following discussion CC agreed that she would mention it at the next BAMRR meeting. BAMRR did not feel that producing sample screening forms was an appropriate action for them, as most organisations have access to language lines and should seek advice from within their own organisation regarding production of written materials.

6. **SYNAPSE**

6.1 AL gave an overview of Synapse the College’s collaboration tool and explained that members should now use it to communicate with each other instead of emails.

7. **e-LfH AUTHOR MSK SHOULDER MODULE**

7.1 AL invited members of the group to nominate themselves to become authors for this module and discussion followed. If any of the members knew of any colleagues that would be suitable and interested they should contact AL with names and contact details.

**ACTION:** ALL

CG will also put this request to the BAMRR PB as there was very little response from the first request. Some members queried whether this was restricted to UK radiographers and AL agreed to find out if this is the case and let the group know.

**ACTION:** CG/AL

8. **EUPAD UPDATE**

8.1 The EU PAD was finally adopted earlier on this year and has a transposition date of 1st July 2016. The derogation for MRI from the ELVS has been retained but the wording of the document and the associated conditions mean that certain activities within MRI may not meet the derogation conditions.
AL informed the group that the MR community was now working with the HSE in producing practical guidelines prior to transposition. Each member state will be producing their own guidance and the HSE had indicated that they would work closely with the MR community.

**ACTION:** AL to keep this group informed

Group- review ARTICLE 10 OF THE DIRECTIVE – feedback any comments to AL

AL asked the group to look at the document and make comments. HSE and Industry sectors are having a meeting, and the first meeting of this working group will be held on 30th September 2013. David Grainger will be representing MRI and it is crucial this group feedback to him on any concerns they may have. AL reiterated that MR radiographers have an input into this.

**9. IPEM SAFTEY UPDATE – 6th NOVEMBER EDINBURGH**

9.1 AL queried if any member of the group wanted to attend this meeting and report back. It was noted that MC, CG and CC are attending. VA to sort booking for MC.

**ACTION:** VA

**10. FEEDBACK FROM BIR MR SIG/SAFETY GROUP**

10.1 It was noted that under a recently adopted EU Directive each device will have its own unique identifier code for all implants and devices, which should allow hospitals to obtain up to date information for each patient. However there is no requirement for MR safety information to be recorded. The MHRA are working to have MR safety information included and have asked the MR community to support this and lobby in Europe where possible.

**ACTION:** AL to report back from BIR SIG meeting

**11. MHRA DEVICE BULLETIN**

11.1 For the benefit of the new members AL gave the group an overview of the feedback that MRAG had provided to the MHRA following the sharing of the first draft update and informed them that David Grainger is working on the second draft of this update where there should be a further opportunity for MRAG to comment.

**ACTION:** AL to share 2nd update with the group via Synapse

**12. IPEM MRPSE**

12.1 AL informed group members that SCoR has responded to this document. IPEM had responded to this and a revised statement from IPEM is forthcoming.

**13. ANY OTHER BUSINESS**

13.1 MC informed the group of an implant survey produced by the FDA and encouraged them to respond to the survey.
13.2 JJ had a query concerning changing patients from their clothes into hospital gowns and wanted the group’s opinion from a legal standpoint regarding risk. There was a discussion and it was agreed that ideally every patient should be changed however many services have difficulty in practically achieving this due to issues such as high patient throughput, environment (mobile scanner) lack of changing facilities etc. It was queried whether this group should produce some guidance for departments.

**ACTION – AL to discuss with TUIR and P and E colleagues regarding “risk” item to be retained on agenda for next meeting**

13.3 AL tasked the group with thinking what should form topics for next year’s meetings.

**ACTION: ALL**

14. **DATE OF FUTURE MEETINGS**

14.1 The date of future meetings has been agreed as:
- Thursday 3rd April 2014, commencing at 1.30pm (lunch from 1.00pm)
- Thursday 16th October 2014, commencing at 1.30pm (lunch from 1.00pm)