Step 1: Getting Started

☐ **Review the IAC Standards & Guidelines for MRI Accreditation**

The *Standards* are the basis for the IAC MRI accreditation program and can be downloaded [www.intersocietal.org/mri/seeking/mri_standards.htm](www.intersocietal.org/mri/seeking/mri_standards.htm).

☐ **Perform a Thorough Facility Self-Assessment**

Prior to completing the online application, facilities should ensure policies, protocols, images and final reports comply with the *IAC Standards*.

☐ **Create or Access Existing IAC Online Accreditation Account**

To apply for IAC accreditation, login to your existing account ([iaconlineaccreditation.org](iaconlineaccreditation.org)) or create a new IAC Online Accreditation account. To learn more about accessing or creating an Online Accreditation account, please visit [iaconlineaccreditation.org/webdriver/AcctAssistance.aspx](iaconlineaccreditation.org/webdriver/AcctAssistance.aspx).

For facilities applying for reaccreditation, the IAC QuickFill Reaccreditation ([www.intersocietal.org/QuickFill](www.intersocietal.org/QuickFill)) feature retains previous application data (answers and attachments) and copies the information into your reaccreditation application, making reaccreditation easier than ever.

Step 2: Gather Information for Submission

☐ **Physician Medical License(s)** (for each state in which the facility is located)

☐ **Credential Information** (e.g., ABMS or board certification for physicians; RT (R), RT (R)(MRI), ARMRIT for technologists)

☐ **Certificates of Training and/or Experience** (i.e., equipment training, when applicable)

☐ **Continuing Medical Education (CME)/Continuing Education (CE) Information** (for all interpreting physicians and technologists) - All staff members are required to have a minimum of 15 hours of CME/CE relevant to MRI every three years. This documentation must be kept on file at the facility and available for review.

**MRI Unit Information and Documentation**

☐ **Manufacturer, model, serial number, field strength, date of installation, year of manufacture**

☐ **Report of acceptance test performed post installation or post system upgrade**

☐ **Routine operator quality control (QC) documentation (phantom images and QC test results/log sheets)**

☐ **Report of preventative maintenance (PM) performed by the service engineer within the past 12 months (prior to date that the application will be submitted)**
Policies and Protocols

- **Environmental Safety** - A policy that outlines the process for the management of contraindications to the MRI environment, hearing protection and avoidance of radio-frequency burns.

- **Acute Medical Emergency Policy** - A policy that outlines the process for the management of acute medical emergencies (e.g. respiratory/cardiac arrest, quench, etc.) in the MRI environment.

- **Patient Pregnancy Screening Policy** - A policy that outlines the process that assures that patients who could be pregnant are identified. This must be documented and contain the signature/initials of the patient and/or staff verifying the information. This procedure must include an explanation of the proper steps to be taken if a patient may be or is pregnant.

- **Patient Complaint Policy** - A policy that outlines the process for patients to issue a complaint/ grievance in reference to the care/services they received at your facility.

- **Primary Source Verification Policy** - A policy for verifying all medical and technical staff member credentials through the applicable issuing agencies.

- **Medication and Contrast Administration and Supervision Policy (if applicable)** - A policy that outlines the process for screening patients for possible contraindications (e.g., Renal disease, diabetes, etc.), contrast material sensitivity, allergies to medication and the delegation of the supervision of the administration of contrast and/or medication administration to alternative licensed providers, if the Medical Director or medical staff are not present.

- **Education, Training and Screening Policies for all Facility Staff and Ancillary Personnel** - A written policy must be established to educate, train and screen all MRI facility staff members and personnel that may be required to enter the MRI environment.

- **Stress Protocols for Cardiovascular MRI Only (if performed)** - MRI safety policies in a cardiovascular facility must include a detailed description of graded protocols and/or infusion protocols used.

Quality Improvement

- A written process (policy) must be in place that outlines the periodic assessment of all QI measures:

  - Test Appropriateness (Appropriate Use Criteria – AUC)
  - Technical Quality (Clinical Image Quality) and Safety of the Imaging Process
  - Interpretive Quality (Report Accuracy)
  - Report Completeness and Timeliness

- The minutes of the two most recent QI Committee meetings (for applications of reaccreditation) that include the results of periodic quality assessments of the QI measures and notations of corrective action plans (if appropriate).

Sample versions of policies, QI meeting minutes and protocols listed above can be found at [www.intersocietal.org/mri/seeking/sample_documents.htm](http://www.intersocietal.org/mri/seeking/sample_documents.htm).
Case Study Requirements

Applicant facilities must submit six case studies for each MRI scanner for review of the interpretive and technical (clinical image) quality. Each case study to be submitted must have been performed within 12 months prior to the date of submission of the application and must contain:

- The final report
- A completed MRI Scan Parameter Form (download at www.intersocietal.org/mri/seeking/case_studies.htm)
- All images (source and reconstructed) that have been reviewed by the interpreting physician

The case studies to be submitted must demonstrate an extensive variety of MRI examinations that include:

- all testing areas selected in the application (i.e., body MRI, cardiovascular MRI, musculoskeletal MRI, neurological MRI, breast MRI and MRA) e.g., if your facility is applying in two testing areas you must submit three cases for each testing area; if your facility is applying in one testing area, you must submit six case studies for that testing area.
- as many different MRI examinations performed at the facility for each testing area selected e.g., neurological MRI - brain, lumbar spine, cervical spine, etc.; musculoskeletal MRI - knee, shoulder, wrist, etc.
- as many different medical staff members who interpret and technical staff members who perform MRI examinations. At least one case study interpreted by the Medical Director must be submitted. All case studies to be submitted must have been performed/interpreted by current technical/medical staff members.
- some type of pathology

Case Study Requirements (Listed by Testing Area)

Body MRI

The case study submissions must demonstrate as many different types of Body MRI examinations performed at the facility as possible.

- Abdomen without, with, or without and with intravenous contrast that must contain pathology such as:
  - Liver pathology (e.g., hepatitis, hemangioma, etc.)
  - Biliary pathology (e.g., cyst, stone, etc.)
  - GU / Renal pathology (e.g., cyst, stone, etc.)
  - Adrenal pathology (e.g., cyst, tumor, etc.)
  - Pancreatic pathology (e.g., pancreatitis, tumor, etc.)
  - Other pathology

- Pelvis without, with, or without and with intravenous contrast that must contain pathology such as:
  - GU pathology (e.g., bladder cancer, tumor, calcification, etc.)
  - Uterine / Ovarian pathology (e.g., fibroid, cyst, tumor, etc.)
  - Prostate pathology (e.g., cancer, BPH, etc.)

Soft Tissue Neck without, with, or without and with intravenous contrast that must contain pathology such as:

- Tumor / cancer / metastasis
- Other pathology
## Breast MRI

The case study submissions must demonstrate as many different types of Breast MRI examinations performed at the facility as possible. All case study submissions must contain pathology such as:

- Unknown primary malignancy
- Metastatic axillary lymphadenopathy
- Implant rupture
- Other pathology related to breast anatomy

## Cardiovascular MRI

The case study submissions must demonstrate as many different types of Cardiovascular MRI examinations performed at the facility as possible. The case study submissions must contain pathology such as:

- Myocarditis/cardiomyopathy
- Right ventricular dysplasia
- Cardiac mass
- Valvular disease
- Other pathology related to cardiac anatomy (e.g., LA, LV, RA, RV)

## Musculoskeletal MRI

The case study submissions must demonstrate as many different types of Musculoskeletal MRI examinations performed at the facility as possible.

<table>
<thead>
<tr>
<th>Extremity – Upper (e.g., shoulder, humerus, elbow, forearm, wrist, hand) or Lower (boney pelvis, hip, femur, knee, lower leg, ankle, foot)</th>
<th>Spine – Cervical, Thoracic or Lumbar spine without or without and with intravenous contrast that must contain pathology such as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Ligament / tendon tear</td>
<td>• Herniated disc</td>
</tr>
<tr>
<td>• Osteomyelitis / infection</td>
<td>• Trauma / fracture</td>
</tr>
<tr>
<td>• Tumor / cancer / metastasis</td>
<td>• Tumor / cancer / metastasis</td>
</tr>
<tr>
<td>• Other pathology</td>
<td>• Other pathology</td>
</tr>
</tbody>
</table>

## Neurological MRI

The case study submissions must demonstrate as many different types of Neurological MRI examinations performed at the facility as possible.

<table>
<thead>
<tr>
<th>Brain / Orbits / Internal Auditory Canals without, with, or without and with intravenous contrast that must contain pathology such as:</th>
<th>Spine – Cervical, Thoracic or Lumbar spine without or without and with intravenous contrast that must contain pathology such as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Infarct</td>
<td>• Herniated disc</td>
</tr>
<tr>
<td>• Multiple Sclerosis</td>
<td>• Trauma / fracture</td>
</tr>
<tr>
<td>• Tumor / cancer / metastasis</td>
<td>• Tumor / cancer / metastasis</td>
</tr>
<tr>
<td>• Trauma / fracture</td>
<td>• Other pathology</td>
</tr>
<tr>
<td>• Hearing loss</td>
<td>• Other pathology</td>
</tr>
<tr>
<td>• Other pathology related to brain anatomy</td>
<td></td>
</tr>
</tbody>
</table>
## MRA

The case study submissions must demonstrate as many different types of MRA examinations performed at the facility as possible.

### Intracranial / Cerebral MRA that must contain pathology such as:
- Stenosis
- Aneurysm
- Other pathology

### Extracranial MRA (carotid/subclavian) that must contain pathology such as:
- Stenosis
- Aneurysm
- Post-stent placement
- Post-endarterectomy
- Trauma
- Other pathology

### Thoracic Aorta MRA that must contain pathology such as:
- Stenosis
- Aneurysm
- Post-surgery (e.g., endovascular stent placement)
- Dissection
- Other pathology

### Body MRA must contain pathology such as:
- Stenosis
- Aneurysm
- Post-surgery (e.g., endovascular stent placement)
- Dissection
- Other pathology

### Extremity MRA (upper or lower) that must contain pathology such as:
- Stenosis
- Aneurysm
- Trauma
- Post surgery (e.g., stent placement, bypass)
- Other pathology

*If applying in MRA, the facility must also be granted in or applying in Body MRI, Neurological MRI or Cardiovascular MRI. Comment: If your facility does not perform the required exams listed above, please contact the IAC MRI staff to discuss possible alternatives.*

For complete details on case study submission, please visit [www.intersocietal.org/mri/seeking/case_studies.htm](http://www.intersocietal.org/mri/seeking/case_studies.htm).

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### Step 3: Complete Online Application

IAC Online Accreditation has two major aspects: an account profile and an application questionnaire. After completing required fields and sections of the account profile (Manage Staff, Manage Sites and Manage Equipment), proceed to the questionnaire by clicking the **Applications** tab.

It is within the questionnaire that applicant facilities will provide detailed information about the facility and upload the supporting documentation (detailed above in Step 2). For facilities applying for reaccreditation, the IAC QuickFill Reaccreditation feature retains and copies previous application data into your reaccreditation application.

When the questionnaire is completed, the [Begin Pre-submission Check] button is presented on the Conclusion screen. Once the pre-submission case requirements check is initiated, changes to the application are not permitted unless the IAC staff find errors in the case selection.
Step 4: Pre-Submission Case Study Requirements Check

- About two weeks prior to the expected final submission date, the pre-submission case study requirements check must be initiated. IAC staff will review case study documentation in the application to ensure accurate case study selection, staff and site representation.

- Facilities will receive an e-mail from the IAC within two business days to update their case study documentation, as requested, or proceed to final submission.

- The check is performed to provide a more efficient application submission and review process for the facility. Case study images should not be uploaded or sent to the IAC office until the pre-submission case study check is complete.

- Once the pre-submission case study requirements check has been completed and any errors rectified, you will proceed to final submission via the conclusion screen of the online application (see Step 5).

Step 5: Submitting the Application

- During final submission, the payment method will be selected, and you will be instructed to send the QC phantom images and the case study images and fee* (if paid by check) within 5 business days to the IAC office.

- There are two methods by which a facility may submit case studies:
  1. Ship Via Traceable Carrier (FedEx, UPS, etc.) | View Instructions»
  2. Upload Online Through Secure, HIPAA-Compliant Vigilant Web Viewer | View Instructions»

**The application fee paid during final submission covers the three-year accreditation cycle. View the complete fee structure at www.intersocietal.org/mri/seeking/fees.htm.**

Step 6: After You Submit

- After submission, the application is locked and becomes your final application submission. A read-only copy of the submitted application questionnaire is accessible by using the Applications link (click on Online Application Tools icon) in your Online Accreditation account.

- Upon submission of the application and case studies the IAC will begin the internal review process. The internal review, peer review and board review are conducted prior to a decision being rendered.

- The application review process takes approximately 8 to 10 weeks* to complete. The accreditation decision will be provided to the facility via a notification letter that may be downloaded from the Online Accreditation account.

*For expedited applications, ensure that the case study images and QC phantom images are received by the IAC within two business days after final submission of the application.
Quick Links

• Sample Documents (www.intersocietal.org/mri/seeking/sample_documents.htm)
• Upcoming Webinars (www.intersocietal.org/mri/main/upcoming_events.htm)
• On Demand Webcasts (www.intersocietal.org/mri/main/on_demand.htm)
• Frequently Asked Questions (www.intersocietal.org/mri/main/faq.htm)
• CME Resources (www.intersocietal.org/mri/main/cme_resources.htm)
• Quality Improvement (QI) Self-Assessment Tool (www.intersocietal.org/QITool)

New! Looking for ways to market your IAC accreditation?

Visit our website at intersocietal.org/marketing to learn more.