



Magnetic Resonance Imaging

1. Introduction

Candidates applying for certification and registration under the primary eligibility pathway are required to meet the Professional Education Requirements specified in the *ARRT Rules and Regulations*. ARRT's *Magnetic Resonance Imaging Didactic and Clinical Competency Requirements* are one component of the Professional Education Requirements.

The requirements are periodically updated based upon a [practice analysis](#) which is a systematic process to delineate the job responsibilities typically required of magnetic resonance imaging (MRI) technologists. The result of this process is a [task inventory](#) which is used to develop the clinical competency requirements (see section 4 below) and the content specifications which serve as the foundation for the didactic competency requirements (see section 3 below) and the examination.

2. Documentation of Compliance

After the candidate submits the *Application for Certification and Registration*, the program director (and authorized faculty member if required) will verify that ARRT requirements were met using the Program Verification Form on the ARRT Educator website. The verification includes confirming the applicant has completed the educational program, including the ARRT Didactic and Clinical Competency requirements and conferment of a degree meeting ARRT requirements. Candidates who complete their educational program during 2025 or 2026 may use either the 2020 Didactic and Clinical Competency Requirements or the 2025 requirements. Candidates who graduate after January 31, 2027, must use the 2025 requirements.

3. Didactic Competency Requirements

The purpose of the didactic competency requirements is to document that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice, and hone affective and critical thinking skills required to demonstrate professional competence. Candidates must successfully complete coursework addressing the topics listed in the [ARRT Content Specifications](#) for the MRI Examination. These topics would typically be covered in a nationally recognized curriculum published by organizations such as ASRT or ISMRT. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified in the content specifications and clinical competency documents.

4. Clinical Competency Requirements

The purpose of the clinical competency requirements is to document that individuals have demonstrated competence performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills as documented by the examination requirement, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means the candidate has performed the procedure independently, consistently, and effectively during the course of their formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.



General Requirement: Remote scanning is not acceptable for completion of ARRT Clinical Requirements. The candidate must complete the examination or procedure at the facility where the patient and equipment are located. The candidate must be physically present during the examination or procedure.

4.1 General Performance Considerations

4.1.1 Patient Diversity

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

4.1.2 Simulated Performance

The ARRT requirements specify that general patient care procedures may be simulated as designated in the specific requirements below. Simulations must meet the following criteria:

- ARRT defines simulation of a clinical procedure routinely performed on a patient as the candidate completing the hands-on task of the procedures on a live human being, using the same level of cognitive, psychomotor, and effective skills required for performing a procedure on a patient in a clinical setting standardized to mirror the physical facilities where practice occurs.
- ARRT requires that competencies performed as a simulation must meet the same criteria as competencies demonstrated on patients. For example, the competency must be performed under direct observation of the program director or program director's designee and be performed independently, consistently, and effectively.

4.1.3 Elements of Competence

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the course of the candidate's formal educational program.

Remote scanning is not acceptable for completion of ARRT Clinical Requirements. The candidate must complete the examination or procedure at the facility where the patient and equipment are located. The candidate must be physically present during the examination or procedure.

4.2 Magnetic Resonance Imaging Specific Requirements

As part of the education program, candidates must demonstrate competence in the clinical procedures identified below. These clinical procedures are listed in more detail in the following sections.

- 7 mandatory general patient care procedures
- 8 mandatory MRI safety requirements
- 17 mandatory MR imaging procedures
- 12 of the 32 elective MR imaging procedures and
- 7 mandatory MRI quality control procedures

* The abbreviation "e.g.," is used to indicate that examples are listed in parenthesis, but that it is not a complete list of all possibilities.

4.2.1 General Patient Care Procedures

Candidates are required to be BLS/CPR certified. They must have demonstrated competence in the remaining 6 patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state or institutional regulations prohibit candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
BLS/CPR		
Vital Signs (Blood Pressure, Pulse, Respiration)		
Sterile Technique		
Standard Precautions		
Transfer of Patient		
Care of Patient Medical Equipment (*e.g., Oxygen Tank, IV Tubing)		
Venipuncture		

4.2.2 MRI Safety Requirements

Candidates must demonstrate competence in 8 areas of MRI Safety listed below.

MRI Safety Requirements	Date Completed	Competence Verified By
Screening Patients, Personnel, and Non-Personnel for MR Safe, MR Conditional, and MR Unsafe Devices and Objects		
Identify MR Safety Zones		
Static Magnetic Field (e.g., Translational and Rotational Forces)		
Radiofrequency Field (e.g., Thermal Heating [SAR], Coil Positioning, Patient Positioning, Insulation)		
Gradient Magnetic Fields (e.g., Induced Current, Auditory Considerations)		
Communication and Monitoring Considerations (e.g., Sedated Patients, Verbal and Visual Contact, Vital Signs)		
Contrast Media Safety (e.g., NSF, Renal Function)		
Other MRI Safety Considerations (e.g., Cryogen Safety, Fire, Medical Emergencies, Laser Alignment Lights, Quench)		

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4.2.3 MRI Procedures

Candidates must demonstrate competence in the 17 mandatory procedures listed on the following pages. For the mandatory procedures, candidates must be evaluated while scanning actual patients. Candidates are also required to demonstrate competence for 12 of the 32 elective procedures. Elective procedures should be performed on patients; however, up to 5 of the elective procedures may be performed on volunteers, as long as your institution has a policy that assures the protection of both the volunteer's and the institution's interests.

When performing MRI procedures, the candidate must independently demonstrate appropriate:

Patient skills including:

- evaluation of requisition and/or medical record
- identification of patient
- documentation of patient history including allergies
- safety screening including implants
- patient education concerning the procedure
- patient care and assessment
- preparation of examination room
- Standard Precautions
- preparation and/or administration of contrast media
- MRI safety procedures and precautions
- patient discharge with postprocedure instructions

Technical and procedural skills including:

- selection of optimal imaging coil
- patient positioning
- protocol selection
- parameter selection
- image display, networking, and archiving
- postprocessing
- documentation of procedure and patient data in appropriate records
- data acquisition

Evaluation skills including:

- analysis of the image for technical quality
- demonstration of correct anatomic regions
- proper identification on images and patient data
- recognition of relevant pathology
- exam completeness

4.2.3 MRI Procedures (continued)

Head and Neck	Mandatory	Elective	Patient or Volunteer	Date Completed	Competence Verified By
Brain	✓		Patient		
Internal Auditory Canals (IACs)	✓		Patient		
Pituitary	✓		Patient		
Orbits		✓			
Cranial Nerves (nonIACs)		✓			
Vascular Head MRA	✓		Patient		
Vascular Head MRV		✓			
Brain Perfusion		✓			
Brain Spectroscopy		✓			
Soft Tissue Neck		✓			
Vascular Neck	✓		Patient		
Spine					
Cervical	✓		Patient		
Thoracic	✓		Patient		
Lumbar	✓		Patient		
Spinal Trauma		✓			
Total Spine (Large FOV)		✓			
Sacrum-Coccyx		✓			
Sacroiliac (SI) Joints		✓			
Thorax					
Chest (noncardiac)		✓			
Breast		✓			
Vascular Thorax		✓			
Brachial Plexus		✓			

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4.2.3 MRI Procedures (continued)

Abdomen and Pelvis	Mandatory	Elective	Patient or Volunteer	Date Completed	Competence Verified By
Liver	✓		Patient		
Pancreas		✓			
MRCP	✓		Patient		
Adrenals		✓			
Kidneys		✓			
Enterography		✓			
Vascular Abdomen		✓			
Female Soft Tissue Pelvis (e.g., Uterus)		✓			
Male Soft Tissue Pelvis (e.g., Prostate)		✓			
Musculoskeletal					
Temporomandibular Joints (TMJs)		✓			
Sternum/Sternoclavicular (SC) Joints		✓			
Shoulder	✓		Patient		
Long Bones (Upper Extremity)		✓			
Elbow		✓			
Wrist	✓		Patient		
Hand		✓			
Finger/Thumb		✓			
Bony Pelvis		✓			
Hip	✓		Patient		
Long Bones (Lower Extremity)		✓			
Knee	✓		Patient		
Ankle	✓		Patient		
Foot	✓		Patient		
Arthrogram		✓			
Soft Tissue (e.g., tumor, infection)		✓			

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4.2.3 MRI Procedures (continued)

Additional Imaging Procedures	Mandatory	Elective	Patient or Volunteer	Date Completed	Competence Verified By
Image Postprocessing (MIP Reformation, MPR, Subtraction)	✓				
CINE (e.g., CSF Flow Study, TMJs)		✓			

4.2.4 MRI Quality Control Procedures

Candidates must demonstrate competence in the 7 quality control activities listed below. The first 4 procedures are performed on a QC phantom.

MRI Quality Control Procedures	Date Completed	Competence Verified By
Signal to Noise Ratio		
Center Frequency		
Transmitter Gain or Attenuation		
Geometric Accuracy		
Equipment Inspection (e.g., Coils, Cables, Door Seals)		
Monitor Cryogen Levels		
Room Temperature and Humidity		

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