Australian Society of Medical Imaging and Radiation Therapy The national professional organisation representing medical radiation practitioners



ABN 26 924 779 836

APPLICATION FOR

MAGNETIC RESONANCE IMAGING (MRI) LEVEL 2 CERTIFICATION

CONTACT DETAILS							
MEMBERSHIP NO.							
SURNAME							
MAIDEN NAME							
GIVEN NAMES							
TITLE: MR/MRS/MS/MISS/OTHER							
DATE OF BIRTH							
RESIDENTIAL ADDRESS							
TOWN/SUBURB				STATE		POSTCODE	
TEL (HOME)			TEL (WORK)				
TEL (MOBILE)			EMAIL				
MRI LEVEL 2 CERTIFICATION NO.						EXPIRY	

F B CLINICAL CO	OMPONENT: STA	ATEMENT OF	CLINI		PERIENCE	IN	MRI	
	, certify tha	it I have:						
had a minimum of 3 years full-time equivalent experience in MRI; and								
1000 clinical MRI exa	aminations within the	<u>3-year period</u> b	etween	the dates o	of			and
. This perio	d must have occurred	d within the 3 yea	ars prior	to applica	tion submi	ssion.		
Signed Date								
	SUPERVISO	R'S VERIFICA	TION					
	, superviso	r of the individua	al identi	fied on the	applicatio	n veri	fy that the	e individual
		ivalent experien	ce in Mł	RI and has	completed	1000	clinical M	RI
		Date						
		Name o	of Site					
	SUPERVISOR	CONTACT D	DETAIL	S				
			1					
		STATE			POSTCOL	DE		
		EMAIL						
OFFICE USE ONLY								
MRI LEVEL 2 CERTIFICATION NO.				DATE OP	ERATIVE			
PAYMENT RECEIVED				RECEIPT	NO.			
	of 3 years full-time e L000 clinical MRI exa This perio leted a minimum of he time period desc	, certify that of 3 years full-time equivalent experience L000 clinical MRI examinations within the This period must have occurred , superviso , superviso leted a minimum of 3 years full-time equiple he time period described above. 	, certify that I have: of 3 years full-time equivalent experience in MRI; and L000 clinical MRI examinations within the <u>3-year period</u> b Date 	, certify that I have: of 3 years full-time equivalent experience in MRI; and L000 clinical MRI examinations within the <u>3-year period</u> between This period must have occurred within the 3 years prior Date SUPERVISOR'S VERIFICATION 	, certify that I have: f 3 years full-time equivalent experience in MRI; and 1000 clinical MRI examinations within the <u>3-year period</u> between the dates of 	, certify that I have: of 3 years full-time equivalent experience in MRI; and L000 clinical MRI examinations within the <u>3-year period</u> between the dates of This period must have occurred within the 3 years prior to application submi 	, certify that I have: of 3 years full-time equivalent experience in MRI; and 1000 clinical MRI examinations within the <u>3-year period</u> between the dates of 	In this period must have occurred within the <u>3-year period</u> between the dates of This period must have occurred within the 3 years prior to application submission Date, supervisor of the individual identified on the application verify that the leted a minimum of 3 years full-time equivalent experience in MRI and has completed 1000 clinical M he time period described above Date

DECLARATION – ASMIRT

This	is	to	certify	that
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has satisfactorily completed all requirements and is recommended for the award of MRI LEVEL	2 CERTIFICATION.
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Signed

Name

Date

Position

PART A POINTS COMPONENT: ACCRUAL OF 100 MRI-RELATED LEVEL 2 POINTS MRI LEVEL 2 POINTS TABLE

	MAX. POINTS PER UNIT	MAX. POINTS
Clinical Experience		
Full-time equivalent MRI experience (max. claimable 5 years); or	3	15
Full-time equivalent MRI supervisor (max. claimable 5 years)	5	25
Post-Graduate MRI Academic Qualifications		
Tertiary post-graduate MRI course or part thereof (1 unit = 1 semester)	10	40
MRI Masters by Research	40	40
MRI PhD Thesis	60	60
MRI Oral Presentations		
MRI conference/national user group meeting/meetings/seminars	8	40
Local user group meeting/departmental in-service	3	15
Workshops/webinars/sessional lecturing	8	40
Poster presentation (1 unit = 1 poster)	5	25
MRI Event Attendance		
MRI conference/national user group meeting/workshop participation (1 unit	10	30
= 1 event, 3 points /day)		
Local user group meeting/departmental in-service	1	10
Webinar/online learning modules	2	16
Publications		
Non-peer reviewed articles (1 unit = 1 report)	2	20
Peer reviewed publications (single author 1 unit = 1 paper)	10	50

CLINICAL EXPERIENCE

- Full-time equivalent need to demonstrate that you have been rostered and working in the MRI unit for at least the full-time equivalent (1 year FTE = 1 unit).
- Supervisor definition a person who has responsibility for the overall operations in MRI. They are usually head radiographer i.e. MRI section head, or person in charge of MRI equivalent to a grade 4/5 level. This does not include supervision of students.
- If you are in an "acting" position, this needs to be an appointment from the organisation and for a minimum period of 6 months tenureship.
- Clinical experience to be evidenced by a letter on letterhead from your employer stating the dates of commencement in the MRI unit until this application and detail responsibilities undertaken. Evidence can also include rosters.

POST-GRADUATE MRI ACADEMIC QUALIFICATIONS

- These include any recognised post-graduate MRI course from a recognised tertiary institution. Subjects relating to MRI need to part of a recognised MRI post-graduate qualification. This can include the subject cross-sectional anatomy.
- Post-graduate MRI academic qualifications to be evidenced with a transcript of unit and a syllabus detailing a description of the subject.

MRI ORAL PRESENTATIONS

- Conferences will be considered if they are a minimum of 2 days or more. These can include RADaim, ASMIRT, SMRT, ISMRM
- MRI oral presentations are to be evidenced with the title of the presentation/s or handout of the presentation. Further evidence may be requested in the form of your actual presentation/s.

MRI EVENT ATTENDANCE

• All events need to be related to MRI specifically and evidenced by a certificate of attendance. In the case of online learning modules, these are modules which have content and MCQs to be undertaken resulting in and evidenced by a certificate of completion e.g. Tip Ed

PUBLICATIONS

- Non peer-reviewed publications can include documents such as training manuals/consultancy reports which have been undertaken outside the scope of employment. Articles can include submissions for vendor/hospital newsletters/Spectrum.
- Peer-reviewed publications max. credits eligibility is if you are the sole single author of the paper.
- If there are co-authors on your submissions for both non peer-reviewed article and peer-reviewed publications, a percentage of credits will be allocated. You will need to specify percentage contributions of all co-authors including study design/data collection/literature review etc.



MRI Level 2 Application/Renewal Points Accrual Log

This Log should provide a summary of the supporting documents that must accompany your application for MRI Level 2 certification/renewal. Please provide points claimed with relevant documentation as per Part A or C Points Table.

* This Log must be submitted with supporting documentation <u>electronically</u>.

1. Clinical Experience	Points Claimed	Points Granted by MIAP1 Only
1. Full-time equivalent MRI experience		
or 2. Full-time equivalent MRI supervisor		
2. Post-Graduate MRI Academic Qualifications		
1. Tertiary post-graduate MRI course or part thereof		
2. MRI Masters by Research		
3. MRI PhD Thesis		
3. MRI Oral Presentations		
 MRI conference/national user group meeting/meeting: 	s/seminars	
2. Local user group meeting/departmental in-service		
3. Workshops/webinars/sessional lecturing		
4. Poster presentation		
 4. MRI Event Attendance 1. MRI conference/national user group meeting/worksho 	p participation	
2. Local user group meeting/departmental in-service		
3. Webinar/online learning modules		
5. Publications		
1. Non peer-reviewed articles		
2. Peer-reviewed publications		

6. Minimum of 3 years equivalent full-time MRI experience must be completed prior to application.

 $7.\ensuremath{\text{Points}}$ must be accrued within the 3 years prior to application.

• Course content information must be provided for post-graduate courses, fellowship courses and vendor courses to enable appropriate point allocation.

 $8. \ {\rm Documented\ proof\ of\ attendance/participation\ must\ be\ submitted\ with\ application.}$

 $9.\ensuremath{\text{Points}}$ will be allocated at the discretion of the MRIRG.

10. Points must be submitted on the MRI Level 2 Application/Renewal Points Accrual Log (see Page3).

• MRI Supervisors cannot claim points for oral presentations that would be considered part of their normal role (e.g. Safety talk to nursing staff)

PAYMENT AUTHORITY							
606T6							
COSTS				Total Costs:			
	Cheque		Credit Ca	rd			
	Please make payable to the		Please sele	ect the card below			
PAYMENT TYPE	"Australian Society of Medical Imaging and Radiation Therapy"		VISA	MASTERCARD	AMEX		
CREDIT CARD NUMBER							
EXPIRY DATE		CCV NO. (LAST 3 DIG	SITS ON BACK OF CARD,	OR LAST 4 DIGITS FOR AMEX)			
CARDHOLDER'S NAME							
CARDHOLDER'S SIGNATURE							

REQUIREMENTS TO GAIN MRI LEVEL 2 CERTIFICATION

DOCUMENTED EVIDENCE OF THE FOLLOWING MUST BE PROVIDED ELECTRONICALLY AS A .pdf FILE: Points must be submitted on the MRI Level 2 Application/Renewal Points Accrual Log (see Page 3)
Accrued minimum 45 points within the 3-year period immediately prior to application (see Points Table Part C)
3 years full-time equivalent experience in MRI prior to submission of application.

Registered Office:

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Updated July 2024

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