



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	

PART B CLINICAL COMPONENT: STATEMENT OF CLINICAL EXPERIENCE IN MRI	
<p>I, _____, certify that I have:</p> <ul style="list-style-type: none">• had a minimum of 3 years full-time equivalent experience in MRI; and• have completed 1000 clinical MRI examinations within the <u>3-year period</u> between the dates of _____ and _____ . This period must have occurred within the 3 years prior to application submission. <p>Signed _____ Date _____</p>	
SUPERVISOR'S VERIFICATION	
<p>I, _____, supervisor of the individual identified on the application verify that the individual has successfully completed a minimum of 3 years full-time equivalent experience in MRI and has completed 1000 clinical MRI examinations during the time period described above.</p> <p>Signed _____ Date _____</p> <p>Position _____ Name of Site _____</p>	
SUPERVISOR CONTACT DETAILS	
SUPERVISOR NAME	
SITE ADDRESS	
TOWN/SUBURB	
STATE	
POSTCODE	
TEL	
EMAIL	
OFFICE USE ONLY	
MRI LEVEL 2 CERTIFICATION NO.	
DATE OPERATIVE	
SIGNED	
PAYMENT RECEIVED	
RECEIPT NO.	
DATE MAILED	

DECLARATION – ASMIRT

This is to certify that _____

has satisfactorily completed all requirements and is recommended for the award of **MRI LEVEL 2 CERTIFICATION**.

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

	Points Claimed	Points Granted by MIAP1 Only	
1. Clinical Experience			
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			
1. MRI conference/national user group meeting/meetings/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/workshop 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. 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. Documented proof of attendance/participation must be submitted with application.

9. 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

COSTS			
			Total Costs:
PAYMENT TYPE	Cheque Please make payable to the "Australian Society of Medical Imaging and Radiation Therapy"	Credit Card Please select the card below <div style="display: flex; justify-content: space-around;"> VISA MASTERCARD AMEX </div>	
CREDIT CARD NUMBER			
EXPIRY DATE		CCV NO. (LAST 3 DIGITS 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.

ALTERNATIVE PAYMENT METHOD

Pay by Direct Deposit to ASMIRT: BSB 633000, Acct #: 5679675

Quote Ref: Invoice #, or email remittance advice to finance@asmirt.org

Registered Office:

Suite 1040 (Level 10)
1 Queens Road
Melbourne Vic 3004
Australia

All Correspondence to:

P.O. Box 16234
Collins Street West
Vic 8007
Australia

Contact us:

T +61 3 9419 3336
F +61 3 9416 0783
W www.asmirt.org

