**Incidental Finding Review Form**

**Incidental findings are defined as previously undiagnosed medical conditions that are discovered unintentionally and may have health implications for the participant but are unrelated to the current medical condition or reason for which the individual is being treated or undergoing the MRI procedure. An incidental finding does not constitute a clinical diagnosis. Research MRI scans are a leading source of incidental findings.**

**This form, along with page 2 of this document (Request for Guest Image Uploading) can be sent with a DVD containing all pertinent image acquisitions to LHSC for a consultative read by one of the local radiologists.**

**Please also send a copy of this form to the Principal Investigator (PI) and** [**TIRFmri@uwo.ca**](mailto:TIRFmri@uwo.ca)

|  |  |
| --- | --- |
| Contact Information: | |
| Principal Investigator: | Email: |
| Department: | Phone #: |

|  |
| --- |
| Please indicate the following: |
| Study Name: |
| Date of Study: Click or tap to enter a date. |
| Participant Name: |
| Participant Date of Birth: |
| Participant Health Card Number: |
| In a brief summary, please describe the incidental finding noted, including the scan sequence and area of interest: Click or tap here to enter text. |

Department of Medical Imaging

Film Services

800 Commissioners Road East

P.O. Box 5010

London, ON, N6A 5W9

519-685-8500 Ext. 58298

**Request for Guest Image Uploading**

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| --- | --- |
| Date of Request: |  |
| Patient Name: |  |
| D.O.B.: |  |
| MRN#: |  |
| Exam Description: |  |
| Referring Facility: | Dr.  Service:  Signature: |
| Reason for Request: | Incidental finding noted on research scan performed at Robarts Research Institute |
| Request Approved by  Radiologist: | Dr.  Signature: |
| Medical Imaging Comments: |  |

|  |  |  |
| --- | --- | --- |
| **FILE ROOM USE ONLY** | | |
| **Order placed in RIS** | YES | NO |
| **Request Uploaded From** | CD | FILM |
| **Date of Upload:** |  | |
| **Upload Completed By:** |  | |