



Registration Information Checklist

1. Site and Contact Information

- Verify imaging facility address
- Designated contact person

- Hours of operation
- · Accreditations and expiration dates

2. Equipment Information

For each modality (if applicable)

- Manufacturer
- Model
- Year Made
- Number of channels
- Magnet strength
- Table weight limit (if applicable)

- · Volume of exams per month
- · Accreditations and expiration date
- · State registration and expiration date
- Procedures performed
- Average lead time to schedule appointment

3. Staff Information

For each Interpreting Physician

- Specialty
- Board certification and effective date
- Sub specialties/CAQ

For each Technologist/Imager

- State license number and expiration date(s)
- Modalities performed
- · Certification(s) by modality
- Certification expiration date(s)

4. Shared and Mobile Services

Other users of equipment & facility

Note: All registration information is subject to audit verification