

Policy Category:

CBA

Who usually applies for funding?

Not applicable

Upright / Open MRI scanners

Commissioning
decision

The ICB will provide funding for Upright / Open for patients who meet the criteria defined within this policy.

Policy Statement:

Upright / Open MRI scanners

The Commissioner will provide funding approval for a referral to an Open MRI provider for consideration, and subsequent provision of, an **Open MRI** if the following criteria are met.

For Claustrophobia:

- If a locally commissioned Wide Bore Scanner has been attempted in the first instance either through GP Direct Access or by speciality led consultant referral.

OR

- If an oral prescription sedative has not been effective (flexibility in the route of sedative administration may be required in paediatric patients as oral prescription may not be appropriate)

For Body Habitus:

- If a patient's body habitus prevents them from accessing comfortably either a conventional or Wide Bore MRI scanner as determined by a Consultant Radiologist/Radiology department policy.

In all cases:

- A consultant led clinical team (for example, MSK service, orthopaedics, or neurosciences) must have reviewed the case or directly initiated the request and made a recommendation following discussion with a consultant radiologist that Open MRI is **clinically essential to the management of the case**.

The Commissioner will provide funding approval for a referral to an Upright MRI provider for consideration, and subsequent provision of, an **Upright MRI (uMRI)** if any of the following criteria are met:

- If the patient has severe pain which cannot be ameliorated by appropriate analgesia and is relieved by standing or sitting.
- **Or** if the patient has significant desaturation and/or severe breathlessness due to a cardiorespiratory condition(s).

In all cases:

- A consultant led clinical team (for example, MSK service, orthopaedics, or neurosciences) has reviewed the case or directly initiated the request and made a recommendation following discussion with a consultant radiologist that Upright MRI is **clinically essential to the management of the case**.

IN ADDITION, The ICB will only fund uMRI of the specific anatomy requested.

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Not applicable

Further information

Claustrophobia: -The fear of enclosed spaces.

This phenomenon is seen by personnel every day in the MR environment with the relatively small apertures on the MRI scanner, placement of the patient within the small bore can induce anxiety and claustrophobia. This may be severe enough for the patient to refuse to continue with the procedure.

Rationale:

Generally Open and Upright MRI scanners produce a lower magnetic field strength which can result in reduced quality of the image and an increase in the duration of the examination. Imaging of some body areas may also be limited.

Patients also have to travel outside of Gloucestershire to access these services.

For GP Direct Access MRI one of NHS Gloucestershire ICBs locally commissioned MRI providers, Cobalt provides services in relation to claustrophobia management which utilises larger scanning rooms, with the alleviation of anxiety in mind. Each room also encompasses the use of technology to provide relaxation-based lighting, sound and vision. Their scanners have short wide bores and Cobalt's Wide Bore Scanners are 36% larger than many 'conventional' scanners. Cobalt would be pleased to discuss any concerns the patient may have either directly with the patient or via their GP prior to the appointment. An MRI Scan App is also available to download with explains the whole MRI experience and what to expect which further supports claustrophobic or anxious patients.

To support both In Patients and Outpatients at Gloucestershire Hospitals NHS Foundation Trust, the Radiology Department have recently purchased their own Wide Bore MRI Scanner. As with Cobalt, this scanner is 36% larger than a conventional scanner and can be offered in addition to the existing 'standard' MRI scanner. The Radiology Team at GHFT simply request that should a patient require the use of the Wide Bore MRI scanner, that this is clearly marked on the referral along with the rationale. This will ensure the patient is booked for the scanner they require, negating the need for patients to reattend an appointment for the Wide Bore Scanner at a later date.

Plain English Summary:

This policy attempts to clarify MRI imaging routes for patients who experience claustrophobia or where body size doesn't allow for entry into the scanner comfortably. Gloucestershire currently has access to Wide Bore MRI Scanners locally and the preferred method for scanning patients, including those who suffer with Claustrophobia is through the use of these Wide Bore Scanners. This policy accepts that in certain circumstances -namely where a claustrophobic patient has attempted a scan via Wide Bore Scanner or where a patient's body size prohibits them entering the scanner – that the option for scanning in an Open or Upright Scanner needs to be offered. In all cases, a consultant led team must have discussed the case with a consultant Radiologist and a decision reached that Open or Upright MRI scanning is in the patient's best interest.

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Washington State Health Care Authority found that there was insufficient scientific evidence to make any conclusions about upright MRI's effectiveness, including whether upright MRI: accurately identifies an appropriate diagnosis; can safely and effectively replace other tests; or results in equivalent or better diagnostic or therapeutic outcomes.

[Upright / positional MRI | Washington State Health Care Authority](#)

For further information please contact glicb.ifr@nhs.net

Date of publication	April 2023
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Policy sign off:

Reviewing Body	Date of review
Effective Clinical Commissioning Policy Group	09.06.2022
System Effectiveness Group	13.03.2023
System Quality Committee	12.04.2023

Version Control:

Version No	Type of Change	Date	Description of Change
1		29.03.21	Initial draft policy
2	Wording	15.11.21	Description of Cobalt's service and addition of information relating to Wide Bore Scanner at GHT
3	Review date	April 2023	Policy agreed by System Quality Committee 12.04.2023. 3-year review date agreed at ECCP 09.06.2022