## **MRI Service Center**

## **MRI Research Study Identification Form**

This form will helps us to make sure that your images have your study name and ID information on them.

Please fill out and print this form. You can put any identifiers on Name, ID and DOB that your study needs.

Please consult with MRI staff about your protocol name when you have set up new research study.

Patient Name to be used:	Patient ID to be used:	
Weight:	Height:	
Date of Birth to be used:	Provided Protocol name:	