## TECHNICAL SPECIFICATION

ISO/TS 10974

First edition 2012-05-01

# Assessment of the safety of magnetic resonance imaging for patients with an active implantable medical device

Évaluation de la sécurité de l'imagerie par résonance magnétique pour les patients avec un dispositif médical implantable actif





#### **COPYRIGHT PROTECTED DOCUMENT**

#### © ISO 2012

All rights reserved. Unless otherwise specified, no part of this publication may be reproduced or utilized in any form or by any means, electronic or mechanical, including photocopying and microfilm, without permission in writing from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office
Case postale 56 • CH-1211 Geneva 20
Tel. + 41 22 749 01 11
Fax + 41 22 749 09 47
E-mail copyright@iso.org
Web www.iso.org

Published in Switzerland

#### **Contents**

Page

Forew	ord	vii
Introd	uction	viii
1	Scope	1
2	Normative references	1
3	Terms and definitions	2
4	Symbols and abbreviated terms	
5	General requirements for non-implantable parts	
6	Requirements for particular AIMDs	
7	Protection of patients from potential hazards caused by interactions of the AIMD and MR scanners	
8	Test signals	
8.1	Gradient sequence of sequences	9
8.2	RF sequence of sequences	11
9	General considerations for application of the requirements of this Technical Specification	
9.1	Compliance criteria	
9.2	Monitoring equipment	
9.3	Validation of models and test equipment	
9.4 9.5	Uncertainty assessment	
9.5	Test reports	
10	Protection from harm to the patient caused by RF-induced heating	
10.1	General	
10.2	Outline of the four-tier approach	
10.2.1		
10.2.2		
10.2.3		
10.2.4 10.3	Tier 4  Determination of the induced electric and magnetic fields	
10.3.1		
10.3.1		
	Assessment procedure	
10.3.4		
10.4	Validation of electromagnetic AIMD models	
10.4.1	Validation procedure	21
10.4.2	Validation criteria	
10.5	Generation of incident fields for Tier 1 to Tier 3 and minimal medium requirements	
10.6	Measurement system requirements	
10.6.1	Probe specification	
10.6.2	Validation and characterization of the measurement system	22
10.7	Procedures and protocols for determination of the distribution and magnitude of the	^^
40 7 4	absorbed energy in the tissue equivalent material by SAR and $\Delta T$ measurements	
10.7.1 10.7.2	Determination of 3D relative distribution of local energy deposition	
10.7.2 10.8	Measurement protocol for determination of maximum amplitude  Uncertainty assessment of energy deposition using SAR or temperature probes	
10.9	Compliance criteria	
10.3	·	20 28

11	Protection from harm to the patient caused by gradient-induced device heating	
11.1	General	
11.2	Testing considerations	
11.2.1	General	
11.2.2	Determination of clinical dB/dt exposure limits	
11.2.3	Test duration	
11.2.4	Data collection	
11.3	Test requirements	
11.3.1	General	
11.3.2	In vitro, phantom or other suitable container	
11.3.3	Gelled solution	
11.3.4	Optical temperature probes	
11.3.5	Temperature survey to determine worst-case orientation and hot spots	
11.3.6	Minimum temperature instrumentation	
11.3.7	Temperature data collection	
11.3.8	Monitor applied dB/dt	
11.3.9	Gradient field vector orientation relative to device	
	Monitoring AIMD for heating and malfunction	
11.4	Lab testing using simulated MRI gradient field	
11.4.1	Simulated field requirements	
11.4.2	Pulse waveform RMS value	
11.4.3	Gradient sequence of sequences	
11.5	MR scanner testing	
11.6	Analysis of gradient heating test	
11.7	Uncertainty assessment	
11.8	Test report	. 34
12	Protection from harm to the patient caused by gradient-induced vibration	. 35
12.1	General	
12.2	General test considerations	
12.2.1	Equipment	
12.2.2	Determination of clinical $dB/dt$ and $B_0$ exposure limits	. 39
12.2.3	Test signals	
12.3	Test method for the evaluation of AIMD functionality during exposure to gradient-induced	
	vibration	. 39
12.3.1	General requirements	
12.3.2	Conducting functional testing using a research scanner	. 40
12.3.3	Conducting functional testing using simulated fields	
12.3.4	Conducting functional testing using a clinical scanner	
12.3.5	Conducting functional testing using a shaker table or other vibration test equipment	. 40
12.4	Test method for the evaluation of patient discomfort during exposure to gradient-induced	
	vibration	. 41
12.4.1	General requirements	. 41
12.4.2	Conducting patient discomfort testing using a research scanner	. 42
12.4.3	Conducting patient discomfort testing using simulated fields	. 42
12.4.4	Conducting patient discomfort testing using a clinical scanner	. 42
12.4.5	Conducting patient discomfort testing using a shaker table or other vibration test	
	equipment	. 43
12.5	Test method for the evaluation of risk of tissue injury during exposure to gradient-	
	induced vibration	
12.5.1	General requirements	
12.5.2	Conducting testing for the evaluation of risk of tissue injury using a research scanner	. 46
12.5.3	Conducting testing for the evaluation of risk of tissue injury using simulated fields	
12.5.4	Conducting testing for the evaluation of risk of tissue injury using a clinical scanner	. 46
12.5.5	Conducting testing for the evaluation of risk of tissue injury using a shaker table or other	
	vibration test equipment	
12.6	Uncertainty assessment	
12.7	Test report	. 47
13	Protection from harm to the patient caused by $B_0$ -induced force	47
	The contract of the patient caused by $D_0$ -induced lords	. <del></del> /

14	Protection from harm to the patient caused by $B_0$ -induced torque	47
15	Protection from harm to the patient caused by image artefact	48
16	Protection from harm to the patient caused by gradient-induced extrinsic electric	
16.1	potential	
16.1 16.2	Test procedure	
16.2 16.3	Uncertainty assessment	
16.3 16.4	Test report	
-	·	
17	Protection from harm to the patient caused by RF rectification	
17.1	General	
17.2	Test procedure	
17.3	Uncertainty assessment	
17.4	Test report	50
18	Protection from harm to the patient caused by $B_0$ -induced malfunction	50
18.1	General	
18.2	Test procedure	
18.3	Test equipment	
18.3.1	Generating the $B_0$ field	
18.3.2	Phantom and tissue simulation medium	_
18.4	Uncertainty assessment	
18.5	Test report	51
19	Protection from harm to the patient caused by RF-induced malfunction	51
19.1	Introduction of tiered approach	
19.2	Injected immunity test	
19.2.1	Using the tiers	
19.2.2	Test procedure	
19.2.3	Test equipment	55
19.2.4	- · · · · · · · · · · · · · · · · · · ·	
19.2.5	Test report	
19.3	Radiated immunity test	
19.3.1	Using the tiers	
19.3.2	Test procedure	
19.3.3	Test equipment	
19.3.4		
19.4	Test report	
20	Protection from harm to the patient caused by gradient-induced malfunction	
20.1	Introduction of tiered approach	
20.2	Injected immunity test	
20.2.1	Tier 1	
	Tier 2	
20.2.3		
20.2.4	Test procedure	
20.2.5	Test equipment	
20.2.6	Uncertainty assessment	
20.2.7	Test report	
20.3 20.3.1	Radiated immunity test	
20.3.1 20.3.2	Applicability Tier 1	
20.3.2 20.3.3	Tier 2	
20.3.3 20.3.4	Test procedure	
20.3.4	Test equipment	
20.3.6	Uncertainty assessment	
20.3.7	Test report	
	·	
21	Combined fields test	69
22	Markings and accompanying documentation	70

Annex A (informative) Gradient vibration patent declaration form	
Annex B (informative) Derivation of lead length factor for injected volt induced malfunction	
Annex C (informative) Basic MR physics	78
Annex D (informative) Gradient injection network	80
Annex E (informative) RF injection network	82
Annex F (informative) Estimation of the temperature rise in vivo from deposition	
Annex G (informative) Methods of assessment of the temperature rise	in vivo 88
Annex H (informative) Assessment of dielectric and thermal paramete	rs91
Annex I (normative) Measurement system validation	94
Annex J (informative) Example of coil systems	107
Annex K (informative) Current distribution on the AIMD as a function of the incident field	
Annex L (informative) Recipe and rationale for tissue simulating mate	rials111
Annex M (informative) Generation of incident fields	113
Annex N (informative) Dielectric parameters	117
Annex O (informative) Thermal and electrical properties of scar tissue	s 119
Annex P (informative) Estimation of conservative B <sub>1</sub> and 10g average RF-induced heating and malfunction	
Annex Q (informative) AIMD configurations	
Annex R (normative) Uncertainty evaluation	127
Annex S (informative) Guidance on gradient field interactions and test	methods for pacemakers 145
Annex T (informative) Characterization of lead port interface impedance induced extrinsic electric potential effects	ce for evaluating gradient- 169
Annex U (informative) Method for in vitro measurement of gradient-in	duced <i>E</i> -field173
Annex V (informative) Basic physics and interactions of gradient mag	netic fields with AIMDs 184
Bibliography	197

#### **Foreword**

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

In other circumstances, particularly when there is an urgent market requirement for such documents, a technical committee may decide to publish other types of normative document:

- an ISO Publicly Available Specification (ISO/PAS) represents an agreement between technical experts in an ISO working group and is accepted for publication if it is approved by more than 50 % of the members of the parent committee casting a vote;
- an ISO Technical Specification (ISO/TS) represents an agreement between the members of a technical committee and is accepted for publication if it is approved by 2/3 of the members of the committee casting a vote.

An ISO/PAS or ISO/TS is reviewed after three years in order to decide whether it will be confirmed for a further three years, revised to become an International Standard, or withdrawn. If the ISO/PAS or ISO/TS is confirmed, it is reviewed again after a further three years, at which time it must either be transformed into an International Standard or be withdrawn.

ISO/TS 10974 was prepared by Technical Committee ISO/TC 150, *Implants for surgery*, Subcommittee SC 6, *Active implants*.

#### Introduction

This Technical Specification came about following a joint meeting between ISO/TC 150, *Implants for surgery*, and IEC/SC 62B/MT 40, *Magnetic resonance equipment for medical diagnosis*, in Vienna, Austria, in September 2006. An agreement was reached to coordinate efforts on the development of a new Technical Specification for the safety of patients with active implantable medical devices (AIMD) undergoing an MRI exam and related further development of IEC 60601-2-33.

This Technical Specification represents a broad-based effort to capture the current understanding of relevant issues and concerns at 1,5 T, the most common MR field strength. The Joint Working Group (JWG) responsible for this Technical Specification (ISO TC150/SC6/JWG2 and IEC SC62B/JWG1) recognizes its incomplete understanding and coverage of relevant details. The JWG releases this edition to promote developments in this area.

The JWG plans to refine this first edition with the intention of publishing a second edition in the time frame allowed by the ISO/IEC Directives and seeks input from interested parties. At this time, the JWG anticipates the possibility that eventually an International Standard might result from this work.

IEC 60601-2-33:2010 provides supporting information. By mutual agreement between the JWG and MT 40, any and all MR scanner-related requirements will be considered by IEC/SC 62B/MT 40 and will be released through future amendments and editions of IEC 60601-2-33.

The relationship between product committees is shown in Figure 1. Straight lines represent the relationship and not necessarily a physical connection. Ellipses represent scope, i.e. the effects between patient and scanner, patient and AIMD, and AIMD and scanner.

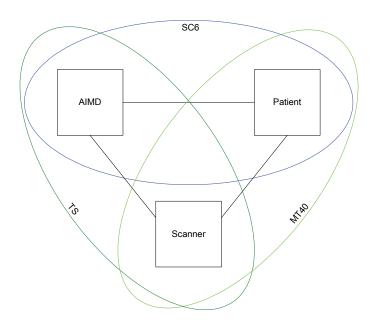
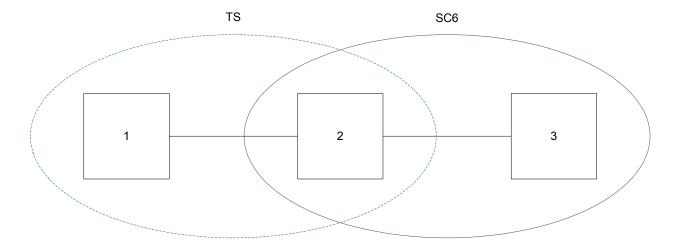


Figure 1 — Diagram showing the responsibilities of product committees and illustrating the extent of the scope of this Technical Specification in terms of the effects between AIMDs and MR scanners

This Technical Specification is concerned with interactions on the AIMD caused by the scanner. ISO/TC 150/SC 6 product committees are concerned with how those interactions affect patient safety.

This Technical Specification is general for all AIMD types, while ISO/TC 150/SC 6 product committees deal with specific types. ISO/TC 150/SC 6 will turn the general provisions of this Technical Specification into product-specific requirements, if necessary.



- 1. Hazardous situation/mechanism/phenomenon: Interactions between the AIMD and scanner and resulting phenomenon, e.g. induced voltage.
- 2. Hazard: Potential source of harm, e.g. heating or malfunction. A knowledge of known or foreseeable hazards resulting from physical interactions will guide comprehension, selection and development of TS test methods.
  - 3. Risk: Probability of occurrence of harm x severity of harm.

Figure 2 — Responsibilities of product committees illustrating the extent of the scope of this Technical Specification in terms of the delineation between hazards and harms

Test methods described in this Technical Specification are primarily designed and intended as bench-top tests using equipment and techniques to simulate the fields ( $B_0$  static, gradient, and RF) found in MR 1,5 T scanners. Although, in a few cases, clinical scanner tests are implied, in all others, the AIMD manufacturer assumes the burden for development and validation of clinical scanner-based test methods. Furthermore, the test signals and parameters specifically described within this Technical Specification for bench-top testing (e.g. Clause 8) are not being encouraged or recommended for use on clinical scanners and to do so might result in scanner damage.

No requirements contained within this Technical Specification, including the use of clinical scanners, construe or imply any burden or obligation on the part of MR equipment manufacturers. Any statement to the contrary is strictly unintentional.

The requirements contained within this Technical Specification are based on specific potential hazards that have been identified as applicable to a general class of AIMDs (see Clause 7). Risks associated with these specific hazards, and any additional hazards and risks that might occur for any specific AIMD type (e.g. implantable neurostimulators), are outside the scope of this Technical Specification.

NOTE 1 Other interested parties, such as device manufacturers, regulatory agencies and particular product committees, are responsible for setting specific compliance criteria and determining risk.

NOTE 2 The discussion of risk and, in some cases, test methods in some of the informative annexes (e.g. Annex S, Annex T and Annex V) serves to provide additional information and a rationale that might assist readers in their comprehension of this material. The information provided in these annexes is supplementary and subordinate to the normative requirements in this Technical Specification.

The International Organization for Standardization (ISO) and the International Electrotechnical Commission (IEC) draw attention to the fact that it is claimed that compliance with this Technical Specification may involve the use of a patent concerning gradient vibration given in Clause 12.

ISO and IEC take no position concerning the evidence, validity and scope of this patent right.

The holder of this patent right has assured ISO and IEC that he or she is willing to negotiate licences under reasonable and non-discriminatory terms and conditions with applicants throughout the world. In this respect, the statement of the holder of this patent right is registered with ISO and IEC (a copy of the patent declaration is shown in Annex A). Further information may be obtained from:

Medtronic, Inc.
Open Innovation and Intellectual Property
8200 Coral Sea St. NE, MVN43
Mounds View, MN 55112
USA

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights other than those identified above. ISO and IEC shall not be held responsible for identifying any or all such patent rights.

### Assessment of the safety of magnetic resonance imaging for patients with an active implantable medical device

IMPORTANT — The electronic file of this document contains colours which are considered to be useful for the correct understanding of the document. Users should therefore consider printing this document using a colour printer.

#### 1 Scope

This Technical Specification is applicable to implantable parts of active implantable medical devices (AIMDs) intended to be used in patients who undergo a magnetic resonance scan in 1,5 T, cylindrical bore, whole body MR scanners for imaging the hydrogen nucleus.

NOTE 1 Requirements for non-implantable parts are outside the scope of this Technical Specification.

The tests that are specified in this Technical Specification are type tests intended to be carried out on samples of a device to characterize interactions with the magnetic and electromagnetic fields associated with an MR scanner. They can be used to demonstrate device operation according to its MR Conditional labelling. The tests are not intended to be used for the routine testing of manufactured products.

This Technical Specification contains test methods that are applicable to a broad class of AIMDs for the purpose of evaluating device operation against several hazards (see Clause 7). Tests for particular device types are not included. Specific compliance criteria and the determination of risk resulting from device behavioural response during these tests are outside the scope of this Technical Specification.

NOTE 2 Modification of these tests for particular device types is left to particular product committees.

NOTE 3 Other interested parties, such as device manufacturers, regulatory agencies, and particular product committees, are responsible for setting specific compliance criteria and determining risk.

NOTE 4 All safety requirements for MRI scanners can be found in IEC 60601-2-33.

#### 2 Normative references

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

IEC 60601-2-33:2010, Medical electrical equipment — Part 2-33: Particular requirements for the basic safety and essential performance of magnetic resonance equipment for medical diagnosis

IEC 61000-4-3, Electromagnetic compatibility (EMC) — Part 4-3: Testing and measurement techniques — Radiated, radio-frequency, electromagnetic field immunity test

ANSI/AAMI PC69:2007, Active implantable medical devices — Electromagnetic compatibility — EMC test protocols for implantable cardiac pacemakers and implantable cardioverter defibrillators

ASTM F2052, Standard Test Method for Measurement of Magnetically Induced Displacement Force on Medical Devices in the Magnetic Resonance Environment

© ISO 2012 – All rights reserved

ASTM F2213, Standard Test Method for Measurement of Magnetically Induced Torque on Medical Devices in the Magnetic Resonance Environment

ASTM F2503-08, Standard Practice for Marking Medical Devices and Other Items for Safety in the Magnetic Resonance Environment