

SUBJECT: CRITICAL TESTS AND CRITICAL RESULTS AND VALUES REPORTING	REFERENCE #2010
	PAGE: 1 OF: 5
DEPARTMENT: IMAGING SERVICES	EFFECTIVE:
APPROVED BY:	REVISED:

DEFINITIONS:

- Critical Tests: Tests which will always require communication of the results, even if normal, i.e., STAT exams.
- Critical Results: Findings (even if from routine tests) which always require rapid communication of the results, i.e., panic values or red-line values.

POLICY:

- It is the policy of _____ (name of organization) to communicate critical test results and critical results and values to the licensed independent practitioner (LIP) and/or clinician who is licensed by the state of _____ and approved by this institution to take clinical action pursuant to the results of critical test results and critical results and values.
- Generally critical results or “panic” values are defined by the medical staff, with input from nursing services for specific tests.
- However, critical results are understood to be any resultant test values/levels/interpretations where delays in reporting have the potential for causing serious adverse outcomes for patients.
- Critical test results and critical results and values can occur for Clinical Laboratory, Imaging/Radiology, Cardiology and other diagnostic tests in any setting in this organization.
- Critical tests are defined as those tests that are STAT exams which demand the rapid reporting of results, whether normal or abnormal.

PROCEDURE:

- A list of prioritized critical tests and critical results and values (panic values) specific to the individual department will be kept in the Clinical Laboratory, Imaging/Radiology Department, Cardiopulmonary Department, Cardiology Department, Neurology Department, Pathology Department, other departments and all patient care units.
- Lists of critical tests and critical results and values will be developed in conjunction with nursing services and approved by the medical staff.
- Lists of critical tests and critical results and values will include, at a minimum, the name of the test, the critical value, the time frame for performing the test and obtaining the result.

SUBJECT: MRI PATIENT SAFETY	REFERENCE #2027B
DEPARTMENT: IMAGING SERVICES	PAGE: 1 OF: 2
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

Patients shall be instructed on any necessary preparations for the MRI scan. (See also MRI Scan Exams - Patient Preparation Policy)

PROCEDURE:

- All patients undergoing MRI scan shall be screened by trained personnel:
 - Non-emergent patients shall be screened twice, providing two separate opportunities for them to answer questions about any metal objects they may have on them, any implanted devices, drug delivery patches, tattoos and any electrically, magnetically or mechanically activated devices they may have.
 - If the patient is unconscious or unable to answer questions, question the patient’s family member or surrogate decision maker.
 - In cases where patient history is unclear or if the patient/patient representative is unsure, other means shall be used to determine if the patient has implants or other devices that could be negatively affected by the MRI scan, including:
 - Look for scars or deformities
 - Scrutinize the patient’s medical record
 - Use plain-film radiography
 - Use of ferromagnetic detectors to assist in the screening process
 - Use of conventional metal detectors to help identify metal objects in and on patients

Note: Healthcare personnel should be aware that conventional metal detectors are not 100 percent accurate and can give false-positives and false-negatives, and that metal detectors will also not detect all objects that are subject to heating, malfunction or failure during an MRI scan.

- Precautions shall be taken to prevent patient burns during scanning, including:
 - ◆ Ensure that no items (such as leads) are formed into a loop

SUBJECT: PERFORMANCE IMPROVEMENT PLAN	REFERENCE #5001
DEPARTMENT: IMAGING SERVICES	PAGE: 1 OF: 12
APPROVED BY:	EFFECTIVE: REVISED:

PURPOSE/OBJECTIVE:

- The Imaging Services Department participates in a hospitalwide performance improvement (PI) program designed to monitor, evaluate and improve the quality, appropriateness and outcomes of clinical services by:
 - Planning, designing, measuring, assessing, improving new or revised processes of patient care and service,
 - Identifying opportunities through continuous assessment of systems and processes of care through a collaborative, interdisciplinary focus,
 - Implementing solutions and actions which will bring about the desired change, to
 - Facilitate a positive patient outcome, while
 - Maintaining a safe environment for personnel, patients and visitors.

RESPONSIBILITY:

- The Imaging Services Nurse Manager is responsible for establishing and implementing an Imaging Services Department performance improvement plan. The plan shall integrate Imaging Services Department quality assessment/improvement, continuous quality improvement (CQI) and quality control activities into a system that will foster improvement in patient care. The Imaging Services Manager also shall delegate responsibilities for monitoring, action, evaluation and reporting.
- The Imaging Services Manager will report all Imaging Services Department performance improvement activities to the hospitalwide Performance Improvement Committee and the _____ (medical staff oversight committee) Committee for their review and recommendations.
- The hospitalwide Performance Improvement Committee and the _____ (medical staff oversight committee) Committee will in turn report their evaluations to the Medical Executive Committee.

GOALS OF PERFORMANCE IMPROVEMENT:

- The primary goals of the Imaging Services Department performance improvement plan are to continually and systematically plan, design, measure, assess and improve performance of priority focus areas, improve healthcare outcomes and reduce and prevent medical/health care errors. To achieve these goals the plan strives to:
 - Incorporate quality planning.

SUBJECT: SCOPE OF SERVICES	REFERENCE #6001
DEPARTMENT: IMAGING SERVICES	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

GOAL:

The goal of the Imaging Services Department will be to ensure that all patients treated will receive high quality care in the most expedient and professional manner possible.

SCOPE OF SERVICES:

- The Imaging Services Department is under the control and direct supervision of the Chief Radiologist, who is directly responsible to the Chief of the Medical Staff and the Governing Body.
 - The Chief Radiologist is certified by the American Board of Radiology and has a current license from the state of _____ to practice medicine.
- The Imaging Services Manager in the Imaging Services Department is directly responsible to the Chief Radiologist. In his/her absence, the Imaging Services Manager shall be responsible to the Assistant Radiologist. It is the Imaging Services Manager's duty to attend all administrative and technical functions within the department.
- All personnel within the department are under the guidance and control of the Imaging Services Manager. In the Chief Radiologist's absence, the position is filled by the technologist on duty. It is his/her responsibility to carry out the duties of the Chief Radiologist in his/her absence.
- After routine hours of the Imaging Services Department, the Imaging Services technologist on-call is responsible for the department. It is his/her duty to cover all Imaging Services Department procedures while on call. He/she is to be contacted by the hospital Nursing Supervisor on duty for any and all emergencies, external and internal disasters, etc. He/she is directly responsible to the Imaging Services Manager at all times.
- A technologist registered by the American Registry of Radiologic Technologists and certified by the state of _____ is available 24 hours per day and will assist the radiologist(s) in acquiring needed images on a referred patient.
- Radiographs must be ordered by an attending physician and are made in one of the department's facilities or by portable equipment by the registered and certified Radiologic Technologists. Following processing of the radiographs, the radiologists dictate their interpretation and the Imaging Services transcriptionist types the results for the Radiologist's signature. The original copy is signed by the Radiologist and is attached to the patient's medical record. The second copy is filed in the patient's film folder as a permanent record, which is maintained in the Imaging Services Department. The third copy is used for billing. The fourth copy is mailed or delivered to the referring physician.

POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Imaging Services Technologist
 Prepared by: _____
 Date: _____

Supervised by: Imaging Services Manager
 Approved by: _____
 Date: _____

Job Summary: Performs a variety of imaging procedures and is responsible for patient safety protocols. Functions as the first line interface with customers in the successful accomplishment of their imaging needs. Participates in CQI activities.

DUTIES AND RESPONSIBILITIES:

3 = Exceeds Performance 2 = Expected Performance 1 = Needs Improvement

Demonstrates Competency in the Following Areas:

Responsible for the care and safety of patients undergoing treatment and use of equipment to minimize hazards of electric shock, burns and extraneous radiation to patients.	3	2	1
Responsible for safe handling of equipment and films.	3	2	1
Instructs and prepares patients for roentgenographic and/or fluoroscopic examinations.	3	2	1
Selects appropriate equipment to use for procedure.	3	2	1
Determines most suitable anatomical posture and positions and shields patients accordingly.	3	2	1
Able to assess patient pain interfering with imaging procedure; makes appropriate physician contact for intervention.	3	2	1
Performs all aspects of patient care in an environment that optimizes patient safety and reduces the likelihood of medical/health care errors.	3	2	1
Makes special radiographic examinations requiring special equipment and procedures such as: intravenous pyelograms, intravenous cholangiograms, bronchograms, mammograms, hysterosalpingograms, tomograms, cholangiography, arthrograms, myelograms and hip pinnings in surgery.	3	2	1
Programs portable or stationary x-ray machines and makes radiograms for a variety of examinations.	3	2	1
Processes x-ray film, if a darkroom technician is not available.	3	2	1
Practices medical and surgical aseptic procedures.	3	2	1
Assists in maintaining basic records and reports.	3	2	1
Assists in maintaining files.	3	2	1
Assists in training of students and ancillary personnel.	3	2	1
Takes x-ray, CAT, U/S and Angio calls according to monthly schedule after the closing of the regular department hours.	3	2	1
Interacts professionally with patient/family.	3	2	1
Completes all work before clocking out and leaving. This includes checking with nurses' stations.	3	2	1