

Hull and East Yorkshire Hospitals NHS Trust

Radiology Department

Procedure To Ensure That Accidental Or Unintended Doses To Patients From Radiological Practices Are Reduced As Far As Is Reasonably Practicable

Purpose

To reduce as far as reasonably practicable the likelihood and extent of accidental or unintended exposure of patients, arising from equipment malfunction or procedural breakdown.

Scope

All diagnostic x-ray examinations.

Responsibility

It is the responsibility of the Imaging Services Manager to ensure that:

Regular preventative maintenance and repairs are undertaken on each item of equipment involved in the imaging process.

All staff are adequately trained and qualified.

Quality control procedures are in place, implemented and monitored.

It is the responsibility of all staff to identify equipment faults or procedural breakdowns which could lead to an accidental or unintended dose to a patient. These occurrences should be reported to their line manager to resolve.

Documentation

- IR(ME)R 2000 Procedural documents.
- Equipment Service Contract schedules.
- Department Quality Control procedures.
- Quality Assurance procedures for Routine performance testing of Diagnostic X-ray Imaging Systems.
- Fault records log.
- Training / Qualification records (In-house and external)
- Incident investigation procedures / records for radiological equipment

Procedures

1. Patient identity checked, prior to any radiation exposure, by the operator.
2. All equipment subject to regular preventative maintenance – to manufacturers and / or RPA advice.
3. Quality assurance programme as outlined in IPEM 77 and advised by the RPA.
4. Equipment faults logged and reported to the Superintendent / Senior Radiographer.
5. Equipment with known faults likely to cause patient overexposure must be taken out of use until repair by a service engineer. Written confirmation must be obtained that the unit is safe for clinical use. Alterations affecting output must be checked and certified before use by the Medical physics department.
6. All staff must undertake manufacturers or suitable in-house training before operating equipment for clinical use.
7. All incidents must be reported using the Incident Reporting forms, with correct investigation and follow up procedures.
8. Incident investigation reports must be reviewed and appropriate action taken to minimise the risk of recurrence.
9. When examining patients the most appropriate equipment available must be selected and operated in accordance with manufacturers' tolerances and Trust and imaging department procedures.

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