

Title of Document:	Non-Medical Referrer Application Process
Directorate:	RADIOLOGY DIRECTORATE

Document type & number:	SOP 85
Approval committee:	DIRECTORATE GOVERNANCE MEETING
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Key amendments:	Date:
Addition of MRI safety training requirement for those referring for MRI exams	February 2024
Individuals involved in developing / reviewing / amending this document: (titles only)	
Quality/Governance Team	
Key staff responsibilities	Post:
To follow the process as laid out in the SOP	All non-medical referrers
To follow the process as laid out in the SOP	Quality Governance Team

Purpose of the SOP:

To provide guidance for non-medical referrers on the process involved in applying for radiology requesting rights

Please note that the key documents are not designed to be printed, but to be used on-line. This is to ensure that the correct and most up-to-date version is being used. If, in exceptional circumstances, you need to print a copy, please note that the information will only be valid for 24 hours and should be read in conjunction with the key document supporting information and/or Key Document intranet page, which will provide additional information including approval and review dates.

Contact Radiology Quality/Governance team for an application form

wah-tr.radiologygovernanceteam@nhs.net

Complete the application form electronically including:

- Clear description of role and protocol required
- Letter of support / email from clinical director/ clinical lead or GP practice lead
- Evidence of continuing professional development which demonstrates the applicant is sufficiently competent in patient assessment, history taking and decision making.

The application is reviewed by Radiology Quality Governance Team

Applications will be reviewed every two weeks as a minimum and delays may occur if the application is not completed in full

Feedback provided:

- If you have been successful at this point you will be asked to complete all relevant training (electronic modules 00, 01, 02 & 03 IR(ME)R accessed via ESR/e-LfH). Once completed, please save certificates as a PDF and forward to the Radiology Governance Team by e-mail
- For protocols including MRI, MRI safety training is also required.
- The next stage is to complete competencies for requesting with your mentor.
- It is your responsibility at this point to contact your IT provider to gain access to ICE. You will be given a unique username which must be provided to Radiology Quality Governance

All evidence & username submitted:

Radiology will review & save all returned documentation, add requesting rights to ICE, and record the NMR name on the NMR register.

Evidence of IRMER refresher training and MRI safety training is required every 3 years to remain on the register. Please note that if IRMER modules are completed on different dates, the renewal date for all modules is three years from the date on the earliest