

| Title of Document: | IR(ME)R PROCEDURE (B): To identify individuals entitled to act as referrer, practitioner or operator within a specified scope of practice |  |  |
|--------------------|---|--|--|
| Directorate:       | RADIOLOGY DIRECTORATE   |  |  |

| Document type & number:  | IRMPR 2   |
|--|---|
| Approval committee:  | DIRECTORATE AND GOVERNANCE GROUP  |
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| Complete re-write of procedure   | 01.08.21  |
| Hyperlinks added for operator and practitioner list                                    | 03.05.2026  |
| Update to operator table following update to IRMER procedure J                         | 08.02.2024  |
| Individuals involved in developing / reviewing / amending this document: (titles only) |   |
| Radiology Clinical Services manager  |   |
| Radiation Protection Advisor   |   |
| Quality Governance Lead Radiographer   |   |
| RPS  |   |
| Key staff responsibilities   | Post:   |
| Responsible for establishing who can act as  | Worcestershire Acute Hospitals NHS Trust,   |
| referrer, practitioner, and operator.  | Radiology Clinical Director, Radiology Services   |
|  | Manager and Quality/Governance Radiographers  |
| Responsible for creating, updating and   | Radiology Clinical Services Manager   |
| ensuring that the procedure is followed on all   |   |
| sites.   | Local Conseriate and ent De disconnected and for each site                                |
| Responsible for the day to day implementation of the procedure                         | Lead Superintendent Radiographers for each site   |
| To comply with this procedure  | Dadiagraphers / assistant practitioners   |
| To comply with this procedure  | Radiographers / assistant practitioners /radiologists / sonographers /RDAs /receptionists |
| Provide adequate information on request  | Medical doctors/Non-medical   |
| and fulfil duties as designated under referrer   | referrers/dentists/Sonographer/Radiographer   |
| in IR(ME)R   |   |

In-line with regulation 6 schedule 1 (b) requirements within IRMER 2017, the purpose of this procedure is to clearly identify who is entitled by Worcestershire Acute Hospitals Trust (WAHT) to act as a referrer, practitioner and operator and their duties.

This procedure applies to all exposures in Radiology, Cardiology and interventional.

Employees receive clear communication of any duty holder role that they have been given entitlement for. Roles such as operators are included in the job description. Practitioners and referrers are entitled formally in writing and where appropriate are given certificates to confirm this.

19506 date. 22.02.2024 VS | Neview date. 14.02.2021



### 1. Duties and Responsibilities of referrer:

"referrer" means a registered health care professional who is entitled in accordance with the employer's procedures to refer individuals for exposure to a practitioner; It is a legal obligation that the referrer provides all necessary clinical information relating to the patient and the exam, to enable the practitioner to decide whether there is a sufficient net benefit giving appropriate weight to:

- (a) The specific objectives of the exposure and the characteristics of the individual involved;
- (b) The total potential diagnostic or therapeutic benefits, including the direct health benefits to the individual and the benefits to society, of the exposure;
- (c) The individual detriment that the exposure may cause; and
- (d) The efficacy, benefits and risk of available alternative techniques having the same objective but involving no or less exposure to ionising radiation.

As a requirement of Worcester Acute Hospitals Trusts, the referrer must always supply the following information:

- The patient specific details to include, full name, address and Date of birth and hospital number where possible, so that they can be accurately and uniquely identified prior to an examination
  - Where the patient's identity is unknown, standard Trust identification procedures must be followed.
- Accurate clinical information to justify the associated medical exposure
- Information on pregnancy and breast feeding, and whether the referrer wishes (subject to practitioner approval) any restrictions to be waived for female patients undergoing x ray procedure, which involves irradiation of the abdomen and all nuclear medicine procedures.
- A clear name and role uniquely identifying the referrer; this can be electronic if processed through the ICE order comms to RIS system.
- To act on the outcomes of the referrals within a timely manner and in the patients best interests
- Referrals for medical exposures should be made in accordance with documented referral criteria. The criteria used by the WAHT will be based on those provided in the latest version of "iRefer - Making the best use of clinical radiology" document, published by the Royal College of Radiologists\*. (\* iRefer is available internally from the radiology pages of the Trusts website: <u>Radiology</u>)
- We ask that all referrers adhere to Appendix A: Pause & check IR(ME)R referrers checklist when requesting a diagnostic procedure to ensure all requirements are met.
- It should be noted that there is no requirement for a named referrer when an individual undergoes an exposure as part of a national screening programme following an

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invitation (e.g. the Breast Screening Programme). However Breast screening is covered by separate IR(ME)R procedures.

• Please note self-referrals are not accepted.

#### **Category of Referrers:**

| Referrer Group   | Expected level of<br>Training   | Scope of referral   | Entitled by  |
|--|---|---|--|
| Medical or Surgical<br>Consultant or Senior<br>Registrar | State Registration & Appropriate Royal College Fellowship   | All ionising radiation examinations including nuclear medicine, Cardiology and interventional procedures                | Clinical Director  |
| Resident Medical<br>Officer (RMO)                        |   |   | Clinical Director  |
| General Practitioners                                    | Medical Degree & registration   | All non- restricted diagnostic exam   | Clinical Director  |
| Junior Doctor  | Provisional Registration<br>& Medical degree  | As above (may be some restrictions)   | Clinical Director  |
| General dental<br>Practitioners /<br>orthodontist        | State Registration & Dental Degree  | All plain<br>radiography of<br>the head and jaw.<br>Chest x-ray for<br>inhaled tooth                                    | Clinical Director  |
| Non-medical<br>referrers                                 | Registration, Appropriate degree, IRMER training modules 00-03 via Electronic Service Record (ESR)/e-LfH. Requesting competencies and support from relevant Clinical director. Requires radiology approval. | Only the examinations laid down in their referral protocol included in 'Nurse/ Non- Medical Requested X-ray Policy'/SOP | Quality / Governance Lead radiographer  New groups agreed by Clinical Director |

## **Non-Medical Referrers**

All non-medical referrers are requesting on behalf of a medically qualified responsible referrer.

A list of all non-medical referrers is kept centrally within radiology: M:\Acute\Radiology\Radiology\Radiology Team Share Point\NON MEDICAL REFERRERS

This list is updated by a person designated by the Radiology Directorate and enables the operators/Practitioners to use as a reference guide as to who is an authorised non-medical referrers and their scope.

All Non-medical referrers are expected to as a minimum have completed:

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- Training to include e-learning IRMER modules 01-03 via Electronic Service Record (ESR)/e-LfH, (refreshed at a minimum every 3 years)
- Completed relevant continuing professional development
- Competencies for radiology requesting

They must be approved by the Radiology Quality/ Governance following the application process documented:

http://www.treatmentpathways.worcsacute.nhs.uk/referenceguides/radiology-information-portal/radiology-information-portal/

All applications, training, certificates of entitlement and other relevant documentation for referrers are saved electronically within Radiology and are reviewed as a whole every 3 months to ensure updates and relevant requests for training are completed.

### 2. <u>Duties and Responsibilities of the Practitioners</u>

"practitioner" means a registered health care professional who is entitled in accordance with the employer's procedures to take responsibility for an individual exposure; the practitioner is responsible for the justification of an exposure to ionising radiation and, to the extent of their involvement, keeping the dose to the patient as low as reasonable practicable consistent with the intended purpose. This involves ensuring that the requested examination is the most suitable examination for the clinical question/patient.

# The Practitioner must:

- Check that patient has not already had the examination recently, on the RIS system (or other relevant system). There will be some clinical reasons for the same examination to be undertaken again.
- When the practitioner agrees with the examination request and relevant clinical history
  this will be recorded electronically on the RIS System as per appropriate vetting SOP.
  M:\Acute\Radiology\Radiology\Radiology\Team Share Point\SOPs\VETTING SOPs
- Radiographers who have undertaken appropriate training in CT Colonography are allowed to include a CT Thorax if they determine that the CT scan requires further CT imaging.
- Radiographers, who are not entitled to act in the role of a practitioner, must follow
  justification criteria in the relevant IRMER folder, under that specific examination. The
  Clinical Director will act as practitioner for most Radiology examinations. For Nuclear
  Medicine this will be the ARSAC license holder.

Newly appointed radiographers will be assessed after their induction period by Band 6/7 radiographer as to whether they are competent to act as a practitioner for plain films. If not then in-house training will be provided. A list of practitioners can be found under appendix C.

An examination must not be carried out without a written/electronic request from the referrer. If the request is incomplete the following must be undertaken:

- 1. Outpatient requests are to be rejected as per vetting SOP
- 2. Inpatient requests require you to contact referring clinician for discussion and rejection. If contact cannot be made then the above process should be followed.

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All actions must be documented under CRIS event comments and any non-conformance should be raised as an incident on DATIX.

# **Category of Practitioner:**

| Practitioner Group                  | Expected level of Training  | Scope of justification  | Entitled by   |
|-------------------------------------|---|---|---|
| Plain film/CT/DEXA                  |   |   | Clinical Director   |
| Consultant Radiologists             | GMC registration<br>FRCR  | All medical exposures for Radiology examinations (Including dental, excl. Nuclear Medicine) |   |
|                                     |   | All Non-medical exposures for radiology examinations  |   |
| Authorised<br>Radiographers         | HCPC Registration,  Diagnostic  Radiography degree  | All plain film<br>examinations/<br>dental/DEXA/CT<br>as per protocol or<br>SOW              | Radiology Services<br>Manager                                   |
|                                     | Completion of relevant competencies/SOW   |   |   |
| Nuclear Medicine                    |   |   |   |
| ARSAC license/certificate holder    | GMC registration<br>FRCR<br>Possession of valid<br>ARSAC license /<br>certificate<br>appropriate to<br>scheme of work.            | As per<br>examination<br>schedule on<br>ARSAC license /<br>certificate.                     | Clinical Director   |
| Consultant Radiologists             | GMC registration<br>FRCR,<br>Authorisation from<br>the ARSAC license<br>holder & certificate<br>appropriate to<br>scheme of work. | Those studies<br>agreed by the<br>ARSAC license<br>holder                                   | ARSAC<br>License/Certificate<br>holder and Clinical<br>Director |
| Cardiology Consultant Cardiologists |   | Cardiology  | Clinical Director   |
| Consultant Cardiologists            |   | Cardiology<br>Angiographic and  |   |

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|                                     | GMC Registration,<br>Royal College<br>Registration                                  | interventional procedures             |                   |
|-------------------------------------|---|---------------------------------------|-------------------|
| Fluoroscopy Consultant Radiologists | GMC registration<br>FRCR  | MII & fluoro lists<br>for orthopaedic | Clinical Director |
| Oral Surgeons and<br>Orthodontists  | GMC Registration,<br>Appropriate Dental<br>Degree and Royal<br>College Registration | Intra-oral films                      | Clinical Director |



### 3. <u>Duties and Responsibilities of the operator:</u>

"operator" means any person who is entitled, in accordance with the employer's procedures, to carry out practical aspects including those to whom practical aspects have been allocated, medical physics experts and, except where they do so under the direct supervision of a person who is adequately trained, persons participating in practical aspects as part of practical training; all **operators** have a duty to ensure that, in their role, the radiation exposure to the patient is as low as reasonably achievable and compatible with the diagnostic purpose. Reporting is seen as an operator function under IR(ME)R.

A person undergoing practical training may undertake certain operator duties whilst under the supervision of an appropriately trained operator.

No ionising radiation may be used unless an appropriately trained operator is present. The operator must inform the RPS if there is a need to change the exposure chart e.g. better exposure for a certain view. This needs to be updated in that room's control panel and exposure chart.

List of all operators can be found in Appendix B

#### The operator must:

- Follow the Society of Radiographers 'Paused & Checked' directive as documented in IR(ME)R procedure A.
- Check that examination has been justified **BEFORE** the examination either on Radiology Information System (RIS) or on request.
- Make a **final check** on RIS that the examination has not been performed recently before the exposure takes place.
- If outside of these criteria then advice must be sought from senior radiographer or radiologist and documentation of who has justified the request must be made on the form and RIS.
- Examination can now take place.
- Ensure that the image is evaluated for quality and technical requirements.

| Practical Aspects of<br>Operator                                   | Category of operator                      | Requirement  | Entitled<br>by                       |
|--|---|--|--------------------------------------|
| Authorising exposure and performing examination in Radiology exams | Radiographers                             | Diagnostic Radiography degree. With exam protocol or agreed justification of practitioner. | Radiolog<br>Y<br>Services<br>Manager |
|  | Named Trainee/<br>Assistant Practitioners | Attending/ completed recognised assistant practitioner course                              | Radiolog<br>Y<br>Services<br>Manager |
|  | Student Radiographer                      | With the agreement and supervision of the  | Radiolog<br>y                        |

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|   |  | HCPC registered   | Services                             |
|---|--|---|--------------------------------------|
| Doufouries interpreting   | Caranda at Dadiala sist                              | radiographer  | Manager                              |
| Performing interventional and fluoroscopic procedures                                     | Consultant Radiologist                               | FRCR registration   | Clinical<br>Director                 |
|   | Named Radiographers<br>with Scheme of Work           | Radiography<br>degree/ Diploma in<br>Radiography &<br>additional training<br>with radiologists  | Clinical<br>Director                 |
| Performing barium swallows & meals & proctogram   | Consultant Radiologist                               | FRCR  | Clinical<br>Director                 |
| examinations  | Named Radiographers<br>with Scheme of Work           | Radiography<br>degree/ Diploma in<br>Radiography &<br>additional training<br>with radiologists  | Clinical<br>Director                 |
| Assisting during interventional, Cardiology   | Consultant Radiologists                              | FRCR  | Clinical<br>Director                 |
| and fluoroscopic procedures   | Radiographers  | Radiography<br>degree/ Diploma in<br>Radiography  | Radiolog<br>Y<br>Services<br>Manager |
| Performing fluoroscopy during orthopedic procedures in theatre & department               | Radiographers  | Radiography<br>degree/ Diploma in<br>Radiography  | Radiolog<br>Y<br>Services<br>Manager |
|   | Named Orthopedic<br>Consultants (mini C Arm<br>only) | Consultant<br>qualification in<br>orthopedics and<br>IR(Me)R certificate                        | Clinical<br>Director                 |
| Performing CT scans (Excluding CT Colon)  or assisting in the performance of all CT scans | Radiographers  | Radiography<br>degree/ Diploma in<br>Radiography plus<br>in- house CT<br>training               | Radiolog<br>Y<br>Services<br>Manager |
| Performing CT colon studies   | Named Radiographers<br>with Scheme of Work           | Radiography degree/ Diploma in Radiography plus in- house CT training  Attended a recognised CT | Clinical<br>Director                 |
|   |  | colon course & in house   |                                      |



| Controlling CT fluoroscopy   | Consultant Radiologists  | FRCR  | Clinical                                    |
|--|--|---|---|
| only   |  |   | Director                                    |
| QA (including testing before use and routine level B tests)  | Medical Physics Expert Clinical Scientists (Physicists) Clinical Technologists | See list of staff of IRS personnel and qualifications obtained  | Radiolog<br>Y<br>Services<br>Manager        |
| Imaging processing QA excluding Nuclear Medicine   | Radiographers  | In-house training & with IRS  | ARSAC<br>license/<br>certificat<br>e holder |
| Nuclear Medicine<br>equipment QA   | NM Radiographers   | Radiography<br>degree/ Diploma in<br>Radiography and in<br>house NM training.   | ARSAC<br>license/<br>certificat<br>e holder |
| Performing Nuclear<br>Medicine Imaging / Non<br>imaging procedures<br>including:   | Radiographer   | Radiography<br>degree/ Diploma in<br>Radiography.   | ARSAC<br>license/<br>certificat<br>e holder |
| <ul> <li>Administration of radiopharmaceutica Is to patients</li> <li>Drawing up of radiopharmaceutica Is from multi dose vials</li> </ul> |  | In house NM training +/- SOR training appropriate to administration route of radiopharmaceutic al being administered.       |   |
|  |  | Acting under protocol approved by an ARSAC license/certificate holder whose schedule lists the procedure being carried out. |   |
|  | ARSAC<br>license/certificate<br>holder   | ARSAC license/certificate holder whose schedule lists the procedure being carried out                                       | ARSAC<br>license/<br>certificat<br>e holder |
| Reporting NM imaging   | Radiologist with ARSAC<br>license/certificate<br>holder                        | FRCR ARSAC license/certificate holder whose schedule lists the procedure being carried out                                  | Clinical<br>Director                        |



| Reporting DEXA (technical                           | Named Radiographer/Radiologi st within scheme of work  Radiographers | Acting under written instructions from an ARSAC license/certificate holder whose schedule lists the procedure being carried out. In house competencies  DEXA trained and | ARSAC license or certificat e holder & Clinical Director |
|---|--|--|--|
| reporti)  | nadiographers  | in-house<br>competency<br>assessment   | Director   |
| Appendicular and Axial Reporting (including dental) | Radiographers  | Postgraduate<br>Diploma  | Clinical<br>Director                                     |
| , 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,            | Radiologist  | FRCR   | Clinical<br>Director                                     |
| Chest and Abdomen Reporting                         | Radiographers  | Postgraduate<br>Certificate  | Clinical<br>Director                                     |
|   | Radiologist  | FRCR   | Clinical<br>Director                                     |
| Appendicular Skeletal<br>Reporting                  | Radiographers  | Postgraduate<br>Certificate  | Clinical<br>Director                                     |
|   | Radiologist  | FRCR   | Clinical<br>Director                                     |
| Reporting CT Head (OP only)                         | Named Radiographer within scheme of work                             | Postgraduate Certificate in head reporting   | Clinical<br>Director                                     |
| Reporting CT imaging                                | Radiologist  | FRCR   | Clinical<br>Director                                     |
| Reporting Cardiac CT                                | Radiologist  | FRCR   | Clinical<br>Director                                     |
|   | Cardiologist   | Consultant<br>qualification in<br>Cardiology and<br>IRMER training   | Clinical<br>Director                                     |
| Reporting Fluoroscopy                               | Radiologist  | FRCR   | Clinical<br>Director                                     |
|   | Radiographer   | Postgraduate<br>Certificate  | Clinical<br>Director                                     |
| Reporting Fluoroscopy<br>Urology exams              | Radiologist  | FRCR   | Clinical<br>Director                                     |
|   | Urologist  | Consultant<br>qualification in<br>Urology and IRMER<br>training  | Clinical<br>Director                                     |



| Reporting Angiography exams              | Radiologist         | FRCR   | Clinical<br>Director |
|--|---------------------|--|----------------------|
|  | Cardiologist        | Consultant<br>qualification in<br>Cardiology and<br>IRMER training | Clinical<br>Director |
| Reporting Interventional Radiology exams | Radiologist         | FRCR   | Clinical<br>Director |
|  | Vascular Consultant | Consultant<br>qualification in<br>Vascular and IRMER<br>training   | Clinical<br>Director |



# **Appendix A:**

| Diagnostic Radiology Referral  Have you "Paused & Checked"?  An IR(ME)R Referrers checklist for referring a patient for a diagnostic imaging examination |                      |   |
|--|----------------------|---|
|  |                      |   |
| Α  | Anatomy              | Ensure correct body part/laterality specified   |
| U  | User<br>Checks       | Confirm most appropriate investigation and consider non ionising radiation alternative (use of iRefer/local referral guidelines) Check previous investigations Confirm timing of examination (is date required clear?) Ensure pregnancy/breastfeeding status is verified Ensure any special needs/interpreter/disabilities/mobility documented (eg hoist required?) Ensure implantable cardiac defibrillator devices documented Ensure allergies documented and appropriate pathology results are available where requested |
| s  | System &<br>Settings | Confirm correct examination (code) requested Confirm correct imaging modality selection Confirm relevant clinical information is adequate to enable the Practitioner to justify the examination Confirm relevant clinical information will assist in the evaluation of the study  |
| E  | End                  | Confirm entitled Referrer against IR(ME)R procedures – eg unique identifier/correct user login Final check that this is the CORRECT patient Confirm the above and submit request  |
| D  | Draw to a<br>Close   | Ensure you have received an evaluation of the examination Ensure the results are discussed with the patient Confirm whether further investigation is required   |



IR(ME)R requires all duty holders to comply with their local employer's procedures. This 'pause and check' poster does **not replace** these procedures but represents a shortened summary of the main **checks**. You must adhere to your local procedures at all times.



## **Appendix B – Operators:**

M:\Acute\Radiology\Radiation Protection and IR(ME)R\IR(ME)R list of Operators-Practitioners\Lists of Operators and Practitioners\OPERATORS LIST IR(ME)R B C-WIDE.xlsx

## <u>Appendix C – Practitioners:</u>

M:\Acute\Radiology\Radiation Protection and IR(ME)R\IR(ME)R list of Operators-Practitioners\Lists of Operators and Practitioners\PRACTITIONER LIST IR(ME)R B C-WIDE.xlsx