Title of Document:	IR(ME)R Procedure (P) - For making, amending and cancelling any referrals for Radiation
Directorate:	RADIOLOGY DIRECTORATE

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Key amendments:	Date:
Information for referrers on how to cancel / amend a request	10.06.2026
Individuals involved in developing / reviewing / amending this document: (titles only)	
Radiology Governance	
Medical Physics Expert	
General Radiographer Lead	
Radiation Protection Supervisors	
Key staff responsibilities	Post:
Responsible for creating, updating and ensuring that the procedure is followed on all sites.	Radiology Clinical Services Manager
To comply with this SOP	Radiographers / Assistant Practitioners /Radiologists / Sonographers /RDAs /Receptionists/Referrers
Provide adequate information on request and fulfil duties as designated under referrer in IR(ME)R	Medical doctors / Non-medical referrers/dentists/Sonographer/Radiographer

Amendment to regulation 7 Schedule 2 of the 2017 Regulations (employer's duties)

For Making, amending and cancelling any referrals for Radiation exposure.

Introduction

The Ionising Radiation Medical Exposure Regulations 2017 have been updated following a parliamentary session in September 2024.
Ionising Radiation (Medical Exposure) (Amendments) Regulations 2024 Statutory Instrument legislation are now due to come into force on 1 October 2024.

A wide range of improvements have been made to the regulations, in line with recommendations from the 2022-2023 post-implementation review, to better reflect current healthcare delivery practices.

New amendments will ensure the radiography workforce has a robust system within which professionals can confidently deliver patient and service user exposures that are appropriate, safe and effective.

Purpose of this Procedure/Procedure Statement

To clarify procedures for the making, amending and cancelling of referrals for exposures involving ionising radiation. It has been acknowledged that this procedure will vary between health care establishments because it reflects local policies and practices.

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* and written imaging protocols which have been reviewed and approved by the designated Practitioner.

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Scope

This procedure should cover:

- All medical, non-medical imaging, screening or research exposures carried out by the organisation.
- The procedure is relevant to all referrals for such exposures originating from within or outside the organisation
- The procedure is inclusive of all referrers entitled under the Employments procedures (b) Entitlement of duty holders. This includes all non-medical referrers, names and assigned SOW detailed in spread sheet in Radiology Team Share point.
- M:\Acute\Radiology\Radiology Team Share Point\NON MEDICAL REFERRERS\Master IRMER NMR List..xlsx
- Agreed Scope of practice/protocol assigned following robust Radiology Governance Application Process. 3-year mandatory renewal of IR\(ME)R training on esr, renewal process trigger off spreadsheet. Policy located on Radiology Team Share point and Trust Key Documents page for wider use.

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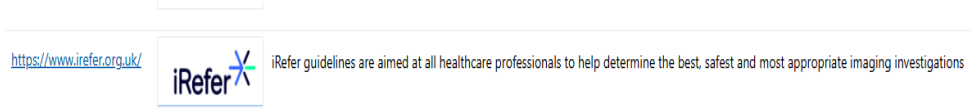
Practice

- iRefer, RCR guidance for radiographic imaging is available to all referrers, operators and practitioners via a link on the Trust Share point.
- https://www.irefer.org.uk/



- Radiology Quality Governance approved Booking process (SOP)s followed by Radiographers and Booking staff to allocate appropriate appointments for Radiological Examinations

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Acceptable methods of referral

- Request for exposure to radiation are received electronically, ICE orders generating an event on the CRIS system.
- Paper requests can be submitted and accepted from establishments **outside** WAHT only. These requests can be posted paper version or uploaded to a confidential radiology admin email address. A new request would be created for the patient and the request scanned on to the patient's attendance. *See subsection 3 of the Radiology Admin Duties Guide …. adding paper referrals /or referrals received electronically by email.*
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- In the event of an IT incident whereby electronic orders/ request are not received correctly. CRIS /PACS downtime policy would be followed.
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Acceptable source of referrals

- Referrers from within Worcester Acute Hospitals Trust (WHAT)
- Non-Medical referrers
- GP within own ICB
- Specific Private Health care organisations
- External Orthodontic Practices
- Prison Services that fall within (WHAT) Methods of contact linked with in booking SOP
- M:\Acute\Radiology\Radiology Team Share Point\SOPs\BOOKING SOPs\SOP BOOKING PLAIN FILM.pdf
- Requests generated from named Approved Research Programmes supported by WHAT

Types of Referrals

- GP referrals/Specific private Health care organisations: standard plain film radiographic procedures, Fluoroscopy, CT scans with and without contrast, bone density, Nuclear Medicine.
- Hospital Consultant Lead Teams, standard plain film radiographic procedures, fluoroscopy, CT examinations, Bone density and Nuclear Medicine studies.
- Non-Medical referrers. Following an agreed SOW, allocated by Radiology Quality Governance Team, Scope inclusive of plain film radiography, fluoroscopy, comp, nuclear medicine and bone density studies.

Specific referral Pathways

- **Cardiac Catheterization/interventional** are an inherent part of a wider procedure, The Cardiologist/ Radiologist act as the Referrer, Operator and Practitioner, In the case of Primary PCI the request is received retrospectively in some cases that are time sensitive, the duty radiographer will proceed with a manual data input that is integral to the cardiac system. The Cardiologist has the responsibility of submitting an ICE order when the patient has been stabilized, the images are stored on the Cardiac internal PACS system.

- **Colon Trained radiographers are permitted** to add a CT Chest on as a supplementary study in the presence of colon pathology and/or a third view of the abdomen and pelvis if clinical required. This is supported by a Quality Governance approved Scheme of Work (SOW). M:\Acute\Radiology\Radiology Team Share Point\SOWs and TAs\VETTING SOWS\CT\SOW CTC.pdf
- **Colon Trained Radiographers who have signed off the vetting SOW can authorise on behalf of a Practitioner**

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- **Stroke referrals. CT radiographers would be required to manually enter a CT perfusion (CSKPE) following a SOP**

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Advice for referrers

- Further advice for referrals can be sought by contacting the radiology department, out of hours the Duty Radiologist can be contacted on 39165
- If the radiographers/ Booking team are unable to offer resolution, then further guidance can be sought from the Duty radiologist

Amending Referrals

- Requests for radiological examinations should not be amended unless a prior discussion with the referrer has taken place. This discussion should be clearly documented in the CRIS attendance.
- Where request is received for an incorrect side or wrong body part this should be rejected. The referrer should be asked to resubmit a correct referral.
- Colon Radiographers are permitted to amend a CTC request following a SOW allowing for extended imaging of the chest or third view of the abdomen and pelvis Hyperlink above.
- CT Radiographer are permitted to add a perfusion scan following a SOP Hyperlink above.

Deferred orders on ICE

The deferred list is checked Monday –Friday 0830 – 1700 by the admin staff on each site

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Booking Process:

- Requests are vetted and justified by Radiographers / Radiologists following the appropriate vetting SOP

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- The radiology staff and dedicated booking team follow booking guidance outlined in the Radiology Quality Governance approved booking SOPs (Standard Operational Procedure). Training /competence recorded in staff induction matrix

How to amend or cancel a referral

Referrals can be cancelled or amended by using the following contact details

For amendments / cancellation to outpatient appointments and for queries about appointments, please contact:

wah-tr.wrhbookings@nhs.net – for CT, Nuclear Medicine, Fluoroscopy and plain film/Dexa. Contact numbers: 38246; 38243; 38247; 38245; 38244 and 38783

wah-tr.mribookings@nhs.net – for MRI bookings

wah-tr.ultrasoundbookings@nhs.net – for u/sound and obstetric bookings. Contact numbers: 42099 and 45754

wah-tr.interventionalradiology@nhs.net – for vascular and other interventional exams (biopsies/drainages/ ablations etc) Contact numbers: 30833 or 44603

Information for Referrers for Diagnostic Imaging Procedures

https://www.irefer.org.uk/

- It would be expected that the referrer would contact the radiology Department immediately if a request was to be cancelled or amended. Appropriate comment to be placed in the patient CRIS attendance. Radiographers should not cancel/amend requests exams unless instructed to by the referring team. (ref Inpatient SOP)
- When a patient is discharged form Hospital with an outstanding inpatient request that is no longer required the CRIS attendance is cancelled. Status “refer Cancel “Where

the X-ray request indicants a follow-up procedure for example a 6 week follow up CXR then this request is placed on a planned waiting list, converting to a patient request by location only.

- Where a request is placed in error and the radiology department is informed then the request is ***Rejected*** on CRIS by the radiographer. A supporting comment will be placed in the event comments section.
- Where a request is placed on CRIS but is NOT performed a NOT performed status can be applied to the event. (Ref inpatient SOP)
- Where an examination is abandoned due to patient intolerance a SOP is followed that provides feed back to the referrer. The radiographers can post process the event as "Abandoned "by selecting a prepopulated status in post processing

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- Where a referral is not justified the event is rejected and reason for rejection is placed in the status comment box, accountability of rejection based on CRIS log in
- Inpatient requests Rejected requests.
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Further Guidance:

https://www.gov.uk/government/publications/ionising-radiation-medical-exposure-regulations-2017-guidance/guidance-to-the-ionising-radiation-medical-exposure-regulations-2017

https://www.rcr.ac.uk/media/mmab2tga/rcr-publications_ir-me-r-implications-for-clinical-practice-in-diagnostic-imaging-interventional-radiology-and-diagnostic-nuclear-medicine_june-2020.pdf

https://www.rcr.ac.uk/media/smmkkrsa/ionising-radiation-medical-exposure-regulations-implications-for-clinical-practice-in-radiotherapy.pdf