



INODAYAHospitals - Kakinada

Documentation code:

INH/AAC.Doc.No:21

Policy on Radiology Services & Legal Requirements

Prepared Date: 05/09/2023

Reference: AAC.9. a NABH Standards – 5th Edition

Issue date: 05/09/2023

Issue No:2

Review NO:01

Review Date: 04/09/2024

1.0 POLICY: Imaging Services are provided as per the scope of services of our hospital. The policy addresses the legal & statutory requirements, infrastructure requirements, manpower requirements, and transportation needs of the patients undergoing imaging, reporting, critical results, and quality control of the imaging services

2.0 PURPOSE: The purpose of the policy is to standardize the imaging services of the organization

3.0 SCOPE: Scope of the policy covers the imaging services, OPD area, In-Patient Care areas & Emergency areas

4.0 DISTRIBUTION: Imaging Services, OPD services, In-Patient Care areas & Emergency Care areas

5.0 POLICY DETAILS:

5.1 Imaging services provided by our hospital comply with legal & statutory requirements; necessary documentation is maintained in the respective departments. Our hospital maintains & updates the compliance status of legal & statutory requirements

5.2 The scope of radiology services is commensurate to serve the basic needs of the clinical care requirements of the hospital

5.3 Adequate infrastructure (Physical & Manpower) are provided as defined by the scope of the imaging services

5.4 Adequately trained & qualified personnel perform, supervise and interpret the investigations (As defined by AERB guidelines) – evidenced by the privileging & credentials in Human Resource departmental records

Prepared by: 	Verified By: 	Approved by: 
Dr. Gayatri	Dr. D.N.S. Prakash	Mrs. G..Lakshmi Lavanya
Radiologist	Medical director	Chief executive Officer



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- 5.5 Our hospital has documented policies and procedures for informing the patients about the imaging activities, their identification and safe transportation to the imaging services. The policies also address the transfer of unstable patients to imaging services
- 5.6 Imaging results are available with a defined time frame according to the imaging services turnaround time policy
- 5.7 Critical results are intimated according to the Imaging Services - Critical results Policy
- 5.8 Imaging results are reported in a standardized format – the report contains the name of the hospital, patient's identity details, UMR, Name & Signature of the consultant reporting the test result
- 5.9 Imaging tests requiring specific sequences are outsourced to organizations based on their quality assurance system
- 5.9.1 Documented procedures are clearly defined for safe transport of patients and completion of imaging results
- 5.9.2 Test requisition details as required for testing are clearly mentioned for identification of the patients
- 5.9.3 Our hospital has an memorandum of understanding with the outsourced organization which incorporates the quality assurance requirements

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POLICY ON RADIOLOGY-LEGAL COMPLIANCE

1.0 PURPOSE:

To comply with the legal requirements applicable to Radiology Department

2.0 SCOPE:

All the Out -Patients & In-Patients, staff and general public

RESPONSIBILITY:

Radiologist, Radiographers & Hospital Administration

CT SCAN:

Ct machine No:106124, Installation Feb 5th 2018

AERB:

- Siemens Shanghai Medical Equipment Ltd,China, G-XL-83635
- **Case File Number:** AP-49196-RF-XL-006
- Document Number: 18-LOP-311829
- **Issue Date:** 08/06/2023

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- **Expiry Date:** 30/08/2028

- CT scanner is available for performing routine studies and special procedure.
- Atomic Energy Regulatory Board (AERB) certification has been obtained and displayed in the Department.
- Personnel monitoring services (TLD badges) are provided for all doctors and technicians
- Dose report of the radiation workers obtained
- Radiation dose is routinely monitored every 3 months by the accredited laboratory is filed
- Radiation leave is given for all permanent Staffs
- Lead aprons and thyroid shields are available in the department for protecting the Doctors and Technicians during various radiology procedures.
- Scanning of pelvis/abdominal region of the women of reproductive age is discouraged as far as possible.

X RAY: Radiography (Fixed)

Machine No: 32301, Installation: 22 sep 2017

M/s Siemens Healthcare Private Limited,India,Radiography (Fixed).Multiphos-15 R,G-XR-79448

- **Case File Number:** AP-49196-RF-XR-004
- **Document Number:** 18-LOP-304932

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Review Date: 04/09/2024

- **Issue Date:** 8 th June 2023
- **Expiry Date:** 03/08/2028

Radiography (Mobile)

Achine No: 36283 Installation 17 th Oct 2017

- (Mobile) M/s Siemens Healthcare Private Limited, India, Multimobil 2.5 G-XR-79444
- **Case File Number:** AP-49196-RF-XR-002
- **Document Number:** 18-LOP-304790
- **Issue Date:** 8/06/2023
- **Expiry Date:** 03/08/2028

- Department offers full range of radiographs in the department.
- Safety measures are ensured for all staff handling the X ray unit
- Two Siemens machines are available for bedside radiography for critical patients in all wards including ICU and Emergencies.
- Personnel monitoring services (TLD badges) are provided for all doctors and technicians
- Dose report of the radiation workers is obtained.

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- Radiation dose is routinely monitored every 3 month by the accredited laboratory is filed
- Radiation leave is given for all permanent Staffs'
- Lead shields, lead aprons and thyroid shields are available in the department for protecting the Doctors and Technicians during various radiology procedures.

Scanning of pelvis/abdominal region of the women of reproductive age is discouraged as far as possible

C-Arm- 1

Machine No: 32632, Installation Date 18/09/2018

- C-Arm M/s Siemens Healthcare Private Limited, India,
- Multimobil-5C G-XR-99910
- **Case File Number:** AP-49196-RF-XR-007,
- **Issue Date:** 14/11/2023
- **Document Number:** 18-LOP-336495,
- **Expiry Date:** 03/12/2028

INTERVENTIONAL RADIOLOGY: (cath lab)

Machine No: 956, Installation Date 30/10/2017

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- Interventional Radiology -M/s. Philips Medical Systems,
- The Netherlands Allura Xper FD 10 G-XL-86163
- **Case File Number:** AP-49196-RF-XL-001
- **Issue Date:** 23/08/2023
- **Document Number:** 18-LOP-312692
- **Expiry Date:** 23/08/2028

ULTRASOUND AND DOPPLER:

- Philips HD5 pHLtps / c152170342,
- Ftofi Date: 26h0120,t7 To Date :2611012022
- PHILIPS INDIA LIMITED, PHtL|PS / Cr53160083 / HO7 XE HD7
- Philphs Echo sg41600076
- Ultrasound: s,no : us119f0841
- The above are available for all routine studies and special procedure in the Department.
- As per the Prenatal Diagnostic Techniques (PNDT) act our Ultrasound is registered with the appropriate authority (State Government).
- The Registration Certificate (Form B) is displayed.
- The PNDT Registration No 403/2017
- The Registration valid : Refer PNDT certificate

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- As per the Prenatal Diagnostic Techniques act, we maintain monthly report register for implementation of PNDT Act, Form G and Form F.
- Form F: We obtain details of the patients with declaration from both patients as well as the doctor who performs the Ultrasound ,that the sex, of the fetus will not be determined and will never be disclosed (The Form F has been displayed).
- The consent from the patient for performing Antenatal Ultrasound is obtained in Form G (The Form G has been displayed).
- Monthly report is submitted to DM&HO.
- Display of board which consist of ‘Disclosure of the sex of the fetus is prohibited under law’ in English, Telugu(Local language) and Hindi as required by PNDT act

Radiation Safety Officer: Refer Rso Certificate

Valid till :Refer Rso Certificate

Hospitals comply with the legal requirements applicable to Radiology Department.

Document Revision History

DOCUMENT REVISION HISTORY		
Version	Date of issue	Reason for Revision
Original version - 1	10/03/2022	Prepared 5 th edition

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Revised version - 2	05/07/2023	Periodic revision and update
Revised version - 3		
Revised version - 4		
Revised version - 5		

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