

**SUNY DOWNSTATE MEDICAL CENTER
UNIVERSITY HOSPITAL OF BROOKLYN
POLICY AND PROCEDURE**

No:CT-11

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Subject: IMAGING PROTOCOL REVIEW

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T.J.C. Standards: EC.02.04.03. (EP15 & 17)

The hospital maintains the quality of the diagnostic computed tomography (CT images produced).

MS.05.01.03 Communication of findings, conclusions, recommendations, and actions to improve performance to appropriate staff members and the governing body

Related Policies No. RAD-6Radiology Patient Safety

Issued by: Radiology Department

I. PURPOSE

To ensure imaging protocols are reviewed annually and are based on current standards of practice.

II. DEFINITION

None

III. POLICY

1. All departmental imaging protocols will be reviewed on an annual basis.
2. Protocols will be designed to reflect current standards of practice.
3. Protocol will address key criteria:
 - Patient Age
 - Patient Size
 - Body Habitus
 - Clinical Indication
 - Contrast Administration
 - Patient Dose

IV. RESPONSIBILITIES

Radiologist, Division Supervisor, Medical Physicist, Department Chairperson

V. PROCEDURES/GUIDELINES

- Imaging will be reviewed on an annual basis
- The review process will be performed by the following individuals
Medical Physicist/ Interpreting Radiologist/chief technologist

VI. ATTACHMENT

VII. REFERENCE

Refer to the sections **CT12 & CT13** adult and pediatric protocol
Joint Commission Standard

Date Review	Revision Required (Check One)		Responsible Staff Name and Title
<u>4/2000</u>	Yes		James Shanahan, Director Radiology Department
5/008	(Yes)	No	James Shanahan, Director Radiology Department
<u>2/0016</u>	(Yes)	No	Vincent Monte, Assoc. Dir. Department of Radiology
10/2018	Yes	(No)	Vincent Monte, Assoc. Dir. Department of Radiology