I. Purpose:
To ensure emergency CT scans are performed in a timely manner.

II. Definition(s): (Optional)

III. Policy:
Emergency CT scans will be given priority over all routine and elective examinations. An order must be received by Radiology and reviewed by a Radiologist prior to performing the exam.
The following emergency CT requests will be exempt from review & approval by a radiologist:
1. Non-Contrast head to rule out a bleed
2. Non-Contrast C-Spine
3. Pediatric abdomen/Pelvis
4. PE Study

IV. Responsibilities (Include all departments/services involved in development/implementation and/or monitoring): Radiology staff / Emergency Rm staff / House Staff / Nursing

V. Procedures/Guidelines:
- Upon receiving an order for an emergency CT, the technologist will confirm the CT room is available and contact the referring unit to send the patient to CT.
- Pt transport will be coordinated by the referring unit.
- If a radiologist approval or protocol is necessary, the technologist will bring the order sheet to the Radiologist for review.
- Once approved the technologist will prepare the CT room for the patient.
- Upon patient arrival in CT, the technologist will confirm the patients name with transport service.
- The technologist will proceed to perform a time out and verify the patients identity as specified in the hospital’s policy/procedure manual. Note- time out will include verification of correct procedure/correct laterality (if applicable)/correct site or body part/correct contrast (including agent/dose/& route, if applicable).
- Upon completion of the time out, the technologist will proceed to perform the exam.
- Following completion of the exam, the technologist will confirm all patient and exam related information and close out the exam in RIS and send the Images to pacs.
- For all emergent cases the technologist will contact the Radiologist to inform them of the need for an urgent reading.

VI. Reasons for Revision:
- Changes in regulatory or statutory laws or standards
- System failures/ changes
- Institutional/operational changes

VII. Attachments:

VIII. References:

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<th>Date Reviewed</th>
<th>Revision</th>
<th>Required (Circle One)</th>
<th>Responsible Staff Name and Title</th>
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<tr>
<td>3/2010</td>
<td></td>
<td></td>
<td>James Shanahan, Dir. Radiography</td>
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<tr>
<td>Dec. 7, 2015</td>
<td>YES</td>
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<td>Donna Mckenzie, Dir. Radiology</td>
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<tr>
<td>5/2018</td>
<td>YES</td>
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<td>Vincent Monte, Assoc. Dir. Radiology</td>
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<td>Vincent Monte, Assoc. Dir. Radiology</td>
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