

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

No: X-RAY-14

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Subject: X-RAY START UP PROCEDURE

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T.J.C. Standards: EC. 02.04.03. the hospital inspects tests and maintains medical equipment Risk

LD.04.01.1: The hospital makes space equipment available a for the provision of care treatment and services

Related Policies No. RAD-6 Radiology Patient Safety

Issued by: Radiology Department .

I. PURPOSE

To ensure the X-Ray Operating Room is properly stocked and equipment is functioning properly and in accordance with manufacturer specifications.

II. DEFINITION

POLICY

Equipment will be checked each day before starting work for the day.

RESPONSIBILITIES

Radiology Staff

PROCEDURE/ GUIDELINES

1. All equipment must turned on and checked for functionality This includes all X-ray equipment as well as any support IT equipment.
2. Daily room check log is posted in each room, all items on the list be marked / verified as operational prior to performing an examination on a patient.

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3. If any one component of the X-ray equipment fails to operate properly the unit must be shut down immediately and reported to the supervisor
4. The supervisor will report all malfunctions to the vendor and initiate a service call .
5. The unit will not be energized until all repairs have been made by the vendor.
6. Check that required equipment and supplies are available (protective apparel /shields/ immobilization devices/ positioning sponges.

III. ATTACHMENTS

Copy of the daily room check list .

IV. REASON FOR REVISION

Review

VIII. REFERENCES

- *Joint Commission Standards*
- *UHB Policy RAD-6 Radiology Patient Safety*

Date Reviewed	Revision Required (Check One)		Responsible Staff Name and Title
9/2008	(Yes)		Charles Carbone, Assoc. Dir. Radiology
6/2010	Yes	(No)	Charles Carbone, Assoc. Dir. Radiology
9/2013	Yes	(No)	Charles Carbone, Assoc. Dir. Radiology
1/15	(Yes)	No	Charles Carbone, Assoc. Dir. Radiology