

### **Part IV:**

### Institutional Infrastructure for Fluoroscopy Exposure Monitoring & Tracking

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AAPM Spring Clinical Meeting, Fluoroscopy Patient Peak Skin Dose Monitoring and Tracking Diagnostic Symposium April 9 , 2018.

Slide: 2

## **Clinical Radiation Safety Office**

### **Clinical Radiation Safety Initiative and Committee**

<u>Vision</u>: To create a best practice for use of ionizing radiation in an academic medical center setting.

**Goals:** • Compliance with TJC requirements,

• Create a safe environment for patients, and

• Create a safe working environment for users and staff.

As part of the Initiative, the Clinical Radiation Safety Office and the Clinical Radiation Safety Committee were created to achieve the established vision and goals. Primary intentions of the Clinical Radiation Safety Office include the following Enterprise-wide clinical objectives:

- · Provide medical physicist(s) to address clinical matters,
- · Provide an educator to convey clinical radiation safety practices,
- · Implement and monitor a radiation dosage program,
- · Investigate ionizing radiation equipment performance,
- · Organize quality control of imaging systems,
- · Participate in the design of radiation equipment installations, and
- Contribute clinical and scientific advice and resources to solve Complex issues related to radiation safety.

The Clinical Radiation Safety Committee began meeting in April 2012. This committee meets monthly and addresses clinical radiation safety issues and reports to the Radiation Safety Leadership Committee and the Radiation Safety Committee.





## **Clinical Radiation Safety Office**





## TASKS

Build the framework for our Patient Radiation Dose Monitoring Program
Establish "Levels" of PSD and Necessary Actions

- Primary fluoroscopy dose monitoring system chosen
- Evidence-based threshold levels that correspond to increasing potential for skin effects established
- Clear accountability of roles for threshold monitoring, documentation, and patient care identified
- A systemic infrastructure to manage the patient follow-up process outlined



# **Evidence Base for VCU Health Criteria**

	Single-Site Acute	NCI Skin Reaction		Approximate Tim	e of Onset of Effects	
Band	Skin-Dose Range (Gy)*	Grade <sup>+</sup>	Prompt	Early	Midterm	Long Term
A1	0–2	NA	No observable effects expected	No observable effects expected	No observable effects expected	No observable effects expected
A2	2–5	1	Transient erythema	Epilation	Recovery from hair loss	No observable results expected
В	5–10	1–2	Transient erythema	Erythema, epilation	Recovery; at higher doses, prolonged erythema, permanent partial epilation	Recovery; at higher doses, dermal atrophy or induration
C	10–15	2–3	Transient erythema	Erythema, epilation; possible dry or moist desquamation; recovery from desquamation	Prolonged erythema; permanent epilation	Telangiectasia <sup>‡</sup> ; dermal atrophy or induration; skin likely to be weak
D	>15	3–4	Transient erythema; after very high doses, edema and acute ulceration; long- term surgical intervention likely to be required	Erythema, epilation; moist desquamation	Dermal atrophy; secondary ulceration due to failure of moist desquamation to heal; surgical intervention likely to be required; at higher doses, dermal necrosis, surgical intervention likely to be required	Telangiectasia <sup>‡</sup> ; dermal atrophy or induration; possible late skin breakdown;wound might be persistent and progress into a deeper lesion; surgical intervention likely to be required

Radiology, 2010 Feb;254(2):326-41, Fluoroscopically guided interventional procedures: a review of radiation effects on patients' skin and hair. Balter S, Hopewell JW, Miller DL, Wagner LK and Zelefsky MJ. http://www.ncbi.nlm.nih.gov/pubmed/20093507



### **Fluoroscopy Exposure Monitoring Process**

Responsibility	Investigation Level (2,000 mGy-5,000 mGy)	Evaluati (>5,000-10,000 anatomi	On Level mGy to a single cal area)	Reporti (≻10,000-1	ng Level 5,000 mGy)	TJC Sentinel Event (≥15,000 mGy)			
	Single Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose		
CRSO Educators	1. Data collection 2. Investigate for cumulative dose >5,000 mGy	1.Data collection and evaluation as indicated by CRSO Evaluation Level Decision Tree     2.Document raw data values in Worksheet on Fluoroscopy Exposure Monitoring, Upload to patient's electronic medical record(EMR) when complete     3.Notify CRSO Medical Physicist as indicated by Decision Tree, using the Worksheet on Fluoroscopy Exposure Monitoring     4.Follow up with patient at Medical Physicist's recommendation, as indicated by the CRSO Fluoroscopy Patient Follow-up Process	1. Data collection and evaluation as indicated by CRSO Evaluation Level Decision Tree     2. Document raw data values in Worksheet on Fluoroscopy Exposure Monitoring, Upload to patient's EMR when complete     3. Notify CRSO Medical Physicist as indicated by Decision Tree, using the Worksheet on Fluoroscopy Exposure Monitoring     4. Follow up with patient at Medical Physicist's recommendation, as indicated by the CRSO Fluoroscopy Patient Follow- up Process	In addition to completing the Evaluation Level oriteria: 1. Inform Office of Environmental Health and Safety - Radiation Safety Section	In addition to completing the Evaluation Level criteria: 1. Inform Office of Environmental Health and Safety - Radiation Safety Section 2. Patient Safety Net (PSN) submission	In addition to completing the Evaluation Level oriteria, and after Medical Physicist evaluation: Inform the following: 1. Department or Division Director/Chair 2. Department Manager 3. Director of Risk Management 4. Procedural Attending Physician 5. Inform Office of Environmental Health and Safety - Radiation Safety Section	In addition to completing the Evaluation Level criteria, and after Medical Physicist evaluation: 1.PSN submission Inform the following: 1.Department or Division Director/Chair 2.Department Manager 3.Director of Risk Management 4.Procedural Attending Physician 5.Inform Office of Environmental Health and Safety - Radiation Safety Section		
CRSO Medical Physicist		1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators		
Clinical Area Designee				1. PSN submission 2. Procedural Attending Physician documents event in patient's EMR		1.PSN submission 2.Notify Procedural Attending Physician, Department Manager, and Department/Division Medical Director and/or Chair immediately 3.Procedural Attending Physician documents event in patient's EMR			
Consult				All patients who have potentially sustained radiation skin damage will be followed by the CRSO, with documentation in Cerner. These patients will be monitored per the CRSO Fluoroscopy Patient Follow-Up Process					
RSO				Report occurences at Radi	ation Safety Committee mee	ting			
Risk Mgt						Initiate Root-Cause Analys The Joint Commission	is. As required, report to		



## **Fluoroscopy Exposure Monitoring Process**

Investigation Level	Evaluat	ion Level	Reporti	ng Level	TJC Sentinel Event		
	(>5 000-1	0 000 mGv)	To A Single A	natomical Area	To A Single Anatomical Area		
(2,000 mGy-5,000 mGy)	(>3,000 1	0,000 may	(>10,000-1	5,000 mGy)	(>15,000 mGy)		
	To A Single A	natomical Area	. ,		/		
Single Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	



## **Dose Monitoring System**





## **Patient Information**





# **Dose Threshold "Alerts"**

#### Investigation Level 2,000 mGy-5,000 mGy

Single Dose         1. Data collection         2. Investigate for cumulative dose >5,000 mGy         CRSO Educators	Responsibility	Investigation Level (2,000 mGy-5,000 mGy)
CRSO Educators		Single Dose
	CRSO Educators	2. Investigate for cumulative dose >5,000 mGy

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pjlin@vcu.edu
Pemnet Alert

Sum OF Dose A:6679

Patient\_ Patient\_ Study Date:2017-02-24 Study Time:14:12:27.0000000 Procedure Lab:OR\_36 StudyType:Peripheral^Vascular AlertID:19 mGyValue:>4999



# **Sample Patient Dose Alert Log**

Physicist Assigned	PSN #	Educator Initials	Identifier	MRN	STUDY DATE	PROCEDURE	PHYSICIAN	PT NAME	LAB	SINGLE DOSE A PLANE mGy	6 MON CUM DOSE A PLANE mGy	SINGLE DOSE B PLANE mGy	6 MON CUM DOSE B PLANE mGy	TO PHYS > 5K
		SLR	J1363		12/20/2017	Fibroid embolization			Angio 1	2342				
FC		SLR	F0992		12/5/2017	IVC with stent placement			Angio 3	6119	7470			12/7/2017
		SLR	R7839		12/28/2017	Embolization of splenorenal shunt			Angio 3	2087				
						common hepatic			1.1.8.0 0					
		SLR	B1413		12/20/2017	artery			Angio 4	2624				
						SMA/celiac								
		SLR	P1467		12/26/2017	arteriogram			Angio 4	2240				
		SLR	G6267		12/15/2017	PCI			Cath 1	3952				
MG		SLR	G5520		12/27/2017	PCI			Cath 1	2367	6775			12/27/2017
FC		SLR	G4765		12/5/2017	LHC/PCI			Cath 2	5969	5969			12/7/2017
		SLR	R8906		12/21/2017	LHC			Cath 2	2930				
		SLR	G8200		12/29/2017	PCI			Cath 2	2554				



# Evaluation Level >5,000 mGy-10,000 mGy

Responsibility	Evaluati (>5,000-10,000 mGy to	on Level a single anatomical area)	Responsibility	Investigation Level (2,000 mGy-5,000 mGy)	Evaluat (>5,000-10,000 anatomi	ion Level mGy to a single ical area)	rel Reporting Level a single (>10,000-15,000 mGy)			TJC Sentinel Event (≥15,000 mGy)	
	Single Dose	Cumulative Dose		Single Dose	Single Dose	Cumulative Dose	Sing Dose	Cumulative Dose	Single Dose	Cumulative Dose	
	1.Data collection and evaluation as indicated by CRSO Evaluation	1.Data collection and evaluation as indicated by CRSO Evaluation		1. Data collection 2. Investigate for comulative dose >5,000 mG	I. Data collection and evaluation as indicated by CRSO Evaluation Level Decision Tree	I. Data collection and evaluation as indicated by CRSO Evaluation Level Decision Tree	In addition to completing the Evaluation evel criteria: 1. Inform Office of	In addition to completing the Evaluation Level criteria: 1. Inform Office of	In addition to completing the Evaluation Level criteria, and after Medical Physicist evaluation:	In addition to completing the Evaluation Level criteria, and after Medical Physicist evaluation: 1 DPN submission	
	Level Decision Tree	Level Decision Tree			2.Document raw data values in Worksheet on Elucroscopy Europy ro	values in Worksheet on Fluoroscopy Exposure	Safety - Radiation afety Section	Safety - Radiation Safety Section	1. Department or Division Director/Chair	Inform the following: 1 Department or Division	
	2.Document raw data values in	2.Document raw data values in	e S		Monitoring. Upload to patient's electronic medical	Monitoring. Upload to patient's EMR when		2. Patient Safety Net (PSN) submission	2.Department Manager 3.Director of Risk	Director/Chair 2.Department Manager	
	Worksheet on Fluoroscopy	Worksheet on Fluoroscopy	ducat		record(EMR) when complete 3.Notify CRSO Medical	complete 3.Notify CRSO Medical			Management 4.Procedural Attending	3.Director of Risk Management	
	Exposure Monitoring. Upload to	Exposure Monitoring. Upload to	RSO E		Physicist as indicated by Decision Tree, using the Worksheet on Elucroscopy	Physicist as indicated by Decision Tree, using the Worksheet on Eluoroscopy			Physician 5.Inform Office of Environmental Health and	4. Procedural Attending Physician 5. Inform Office of	
	patient's electronic medical	patient's EMR when complete	0		Exposure Monitoring 4.Follow up with patient at	Exposure Monitoring 4.Follow up with patient at			Safety - Radiation Safety Section	Environmental Health and Safety - Radiation Safety	
	record(EMR) when complete	3.Notify CRSO Medical Physicist			Medical Physicist's recommendation, as	Medical Physicist's recommendation, as				Section	
CRSO Educators	3.Notify CRSO Medical Physicist	as indicated by Decision Tree,			indicated by the CRSO Fluoroscopy Patient Follow- up Process	indicated by the CRSO Fluoroscopy Patient Follow-					
	as indicated by Decision Tree,	using the worksheet on		5	1.Evaluation of raw data values	1.Evaluation of raw data	1.Evaluation of raw data values	1.Evaluation of raw data values	1.Evaluation of raw data values	1.Evaluation of raw data values	
	Eluoroscopy Exposure Monitoring	A Follow up with patient at	CRSC		2.Estimation of Peak Skin Dose	2.Estimation of Peak Skin Dose	2.Estimation of Peak S n Dose	2.Estimation of Peak Skin Dose	2.Estimation of Peak Skin Dose	2.Estimation of Peak Skin Dose	
	A Follow up with patient at	4.ronow up with patient at Modical Dhysicist's			3.Notify Educators	3.Notify Educators	3.NotifyEducators 1. PSN submission	3.Notify Educators	3.NotifyEducators 1.PSN submission	3.Notify Educators	
	Medical Physicist's	recommendation, as indicated by	signee				2. Procedural Attenting Physician documents		2.Notify Procedural Attending Physician, Department Manager, and		
	recommendation, as indicated by	the CRSO Fluoroscopy Patient	a Des				reventin patient strain		Department/Division Medical Director and/or		
	the CRSO Fluoroscopy Patient	Follow-up Process	cal Are						Chair immediately 3.Procedural Attending		
	Follow-up Process		Gini						Physician documents event in patient's EMR		
			Consult				All patient who have pote documentation in Cerner." Process	ntially sustained radiation skir These patients will be monitor	damage will be followed by ed per the CRSO Fluoroscop	the CRSO, with py Patient Follow-Up	
CRSO Medical	1.Evaluation of raw data values	1.Evaluation of raw data values	0				F port occurences at Rad	iation Safety Committee mee	ing		
Physicist	2.Estimation of Peak Skin Dose	2.Estimation of Peak Skin Dose	82						Initiate Root-Cause Analys	is. As required, report to	
riiysicist	S.NOUTY Educators	5.NOTTY EQUCATORS	Risk						The Joint Commission		



### **Evaluation Level Decision Tree**

Investigation Level

(2,000 mGy-5,000 mGy)

Single Dose

2. Investigate for cumulative

1. Data collection

dose >5,000 mGy



Evaluati	on Level
(>5,000-10,000 mGy to	o a single anatomical area)
Single Dose	Cumulative Dose
1.Data collection and evaluation	1.Data collection and evaluation
as indicated by CRSO Evaluation	as indicated by CRSO Evaluation
Level Decision Tree	Level Decision Tree
2.Document raw data values in	2.Document raw data values in
Worksheet on Fluoroscopy	Worksheet on Fluoroscopy
Exposure Monitoring. Upload to	Exposure Monitoring. Upload to
patient's electronic medical	patient's EMR when complete
record(EMR) when complete	3.Notify CRSO Medical Physicist
3.Notify CRSO Medical Physicist	as indicated by Decision Tree,
as indicated by Decision Tree,	using the Worksheet on
using the Worksheet on	Fluoroscopy Exposure Monitoring
Fluoroscopy Exposure Monitoring	4.Follow up with patient at
4.Follow up with patient at	Medical Physicist's
Medical Physicist's	recommendation, as indicated by
recommendation, as indicated by	the CRSO Fluoroscopy Patient
the CRSO Fluoroscopy Patient	Follow-up Process
Follow-up Process	
1.Evaluation of raw data values	1.Evaluation of raw data values
2.Estimation of Peak Skin Dose	2.Estimation of Peak Skin Dose
3.Notify Educators	3.Notify Educators

### **Worksheet on Radiation Exposure Monitoring & Tracking**

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		W	orkshe	et on	Fluor	oscop	y Exp	osure	Monit	<u>oring</u>	Page:	<u>1 of</u>	1
Alert	Date:		15.00		CR Radia	SO ation	Dos	se Alert	Event (m	iGy)	≥ >5,0	00~10,00	0 mGy
Patier	nt Name:				Espo	sure	Sing	le Dose		0	□ >10,	000~15,0	00 mGy
Patier	nt MRN#:				Leu	vel:	<b>⊡</b> Cum	ulative (	)ose	5365	□ >15	,000 mG	/
			40.00	<u>Radi</u>	ation Do	ose (RAV	V DATA)	Sheet (	<u>mGy)</u>				
Repor	t Date:	Ju	ne 16, 20	016		T	Ra	w data l	ast repo	rted on:	<u>N/A</u>		141
Date	X-ray	не	aŭ & Ne	CK Lateral		per ior	s0 Lateral		Erontal	s0 Lateral		er Extrer	Right
Raw	Data		riontai	Latera		riontai	Lateral		riontai	Latera	CI	Leit	ngin
La	st												
			Additio	nal Radi	ation Ex	posure	Receive	d Since	Last Re	ported			
6/1	Cath 3					351							
6/13	Cath 4					4117							
6/15	Cath 1					897							
Raw Da	ata i otai	0	0	0	0	5365	0	0	0	0	0	0	0
Raw D	ata Comp	ilation	6	Vila	Perc		(804) 828-6605					ora	
кероп	Generate	а ву:	Shelia	a Regan, E	3.S., RT-F	S., RT-R,M,CT Refer To Medical Physicist: DO REF							
Medica	l Physic	st's App	olication	of Corr	ections	& Modi	ifications For Estimation of Peak Skin Dose (PSD, mGy)						
Repor	t Date:	Ju	ne 17, 20	)16									
$\sim$		He	ad & Ne	eck	Upper Torso		Lower Torso		Lower Extremities		nities		
		СТ	Frontal	Lateral	СТ	Frontal	Lateral	СТ	Frontal	Lateral	СТ	Left	Right
PSD Pre	viously												
on													
Addit	ional					5126							
Receiv	se ved on					5156							
Total Pe	ak Skin												
(mGy)					0	5136	0	0	0	0	0	0	0
								Pa	tient Fo	llowup:		<b>⊡</b> ′ES	
Des	ak Skin Do	se			#70	4							
Calculation Reported By:				V				2	(804) 8	328-349	97		
			Pe	i-Jan Pau	ul Lin, Ph	n.D.				pei-jan.	lin@vcul	health.o	
							)ose Tracking Form (Rev: 2016-06-17)						



### **Evaluation Level-Electronic Medical Record Documentation**

*Type: Clinical Radiation Safety Note *	Author: Recan. Sheila
*Date: 10/23/2015	atus: Unauth
Subject: Clinical Radiation Safety Event	
Associated Providers:	view Modify
Arial 🔸 10 👻 🍕 🍳	୬ 🖻 🖻 🕱 🖪 ೮ / ୫ 🗐≣ 🗏 🖦 🕸 🛛
* Prel	iminary Report*
[Use F3 to revice to underscores. Use F5 to insert the current date/line	
Evamination Description:	Coil Embelization
Examination Accession #.	_NR1543615
Equipment Room # or I dentifier.	_OR 33
Recorded Examination Dose:	Plane A- Single dose for this procedure 3,799 mGy. This triggered a Cumulative dose in Plane A (Frontal) 10,104 mGy (since June 4th, 2015)
	Plane B -Single dose for this procedure was 1,794 mGy. This triggered a Cumulative dose in Plane B (Lateral) 5,733 mGy (since June 4th, 2015)
Procedural Physician Performing Examination:	
Procedural Attending Physician for Examination:	
Referring Physician for Examination (CT Only):	
Educator's Data Collection, Review and Analysis: Collection, review and analysis completed: Yes X No _ N	of required _
Clinical MicroSystems	
Selected Dates Se Start Date: #221/2016 Til End Date: 2/21/2017 Til Period : Custon •	IAB: Study:
Sox         Patient's Name         Date (mm/s/M/M/my)         Lab           1         //1/2/017 12:00:00 AM         CT_ED#1         CT-Head*1           1         //2/2/017 12:00:00 AM         CT_ED#1         CT-Head*1	Study Type         MRH         Dose A         Dose B         Study CTD/red         PHYSICIAN I           KCV_DE_USL0_CTA (Adult         0         0         131.51         PHYSICIAN I           Interpheraf=Noun         1225         400         0         55.24           VCV_DELD_CXARE (Adult         0         0         55.24           Pelipheraf=Nouni         2032         908         6           VCV_UEDD_CXARE (Adult         0         0         56.24
1 . 2/20/2017 12:00:00 AM OR 36	Pelipheral/Vascula 17/13 377 0

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1	Last 100 Documents : 107 out of 108 documents are accessible. (Documen
📋 June 28, 2016 🔺	
Dune 23, 2016	Educator's Data Collection, Review and Analysis
April 16, 2016	Collection, review and analysis completed: Yes X No _ Not required _
April 14, 2016	This has been sent to the Medical Physicist for review. 10-23-2015 SLR
February 24, 2016	PSN #SI-3908-PSN updated to reflect follow-up information 11-23-2015
Debruary 03, 2016	Physicist Review.
December 02, 2015	Adjusted patient dose: 6,800 mGy Not required _
Ctober 30, 2015	Physicist Report Up-loaded in to Cerner: Yes X No Not required _
Ctober 26, 2015	Physicist recommends follow-up with patient: Yes X No Not required _
Ctober 23, 2015	Patient Follow-Up: Yes_X No_ Not required_
16:05 Anesthes = 16:00 Nursing I	Patient has been scheduled for follow-up. Physicians notified. 10-27-2015 SLR
15:51 Clinical R 15:42 Operativ	#1 Follow-Up (30 days): Date:11-23-2015
14:40 Anesthes 14:18 Neurosur 14:08 IntraOp 1 14:05 Operativ	Pt said she experience deplation in a square spot on the back/top of her head. During her follow-up appointment she was told it was from the radiation and that it would grow hark. She said it is growing back and is having no issues with it whatsoever. Patient Follow-up Process noted - message sent to Dr. regarding follow-up visit on Dec. 3rd. Will continue to follow patient as scheduled
10:31 Anesthes 10:27 Neurosur	and update according to
10:10 Admission 09:57 Neurosur	#2 Follow-Up (60 days): Date: 12-23-2015 Attempt #: 1 X 2_ Letter sert_left message SLR Mitampt #: 1 / 2016 laft message
00:00 Condition	Attempt #3 129-2016 left message 1.29-2016 Patient called Patient called back-said she was followed-up by He said the redness was improving and ther har was growing back. She said her hair had fully grown back by the time of our call. She also said she is doing fine-no additional
	effects. #3 Foliow-Up (120 days): Date: 2-25-2016 Doing great-no side effects. SLR Attempt # 1 2 Letter sent
O By status	
By date	ime romow-op (nor ozys). Date: _ 4-26-2010 Leit message: SLR: 3-9-2010 Leit message: SLR: 3-11-200 Patient called-satu she is doing fine, no ill efects. SLR
Performed by     By encounter	Attempt #. 1 _ 2 _ Letter sent _
	EEFORE calling: In Cerner, reviewed patient's last medical status with VCUHS.     Yes _X No _

**Clinical Radiation Safety Departure Instructions** 

While you were here at VCU Health System, you had a test that used x-rays. The amount of radiation you got from the x-rays depends on many factors including how long the procedure took or how hard it was to perform.

Most people do not have any problems. You might see some redness on your skin like a sunburn, or see a rash. You may also have hair loss. Over the next few weeks, look at your skin for these changes in the area where your exam was done. If you have changes, call the Clinical Radiation Safety Office at (804)828-6368. They will let you know what to do.

You may also get a call from the Clinical Radiation Safety Office just to see how you are doing. Feel free to call the Clinical Radiation Safety Office if you have questions at (804)828-6368.



## Reporting Level >10,000 mGy-14,999 mGy

Description	Reporti	ng Level					
Responsibility	(>10,000-15,000 mGy)						
	Single Dose	Cumulative Dose					
CRSO Educators	In addition to completing the Evaluation Level criteria: 1. Inform OEHS Radiation Safety Office (RSO)	In addition to completing the Evaluation Level criteria: 1. Inform OEHS Radiation Safety Office (RSO) 2. Patient Safety Net (PSN) submission					
CRSO Medical Physicist	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	L				
Clinical Area Designee	1. PSN submission 2. Procedural Attending Physician documents event in patient's EMR						

- If single dose exceeds 10,000 mGy, Clinical Area Designee submits a Patient Safety Report
- Per physicist, Educators follow-up with patient and notify OEHS/RSO
- Attending physician responsible to document in patient's electronic medical record.

## TJC Sentinel Event Level >15,000 mGy

	TJC Sentinel Event (≥15,000 mGy)						
Responsibility							
	Single Dose	Cumulative Dose					
CRSO Educators	In addition to completing the Evaluation Level criteria, and after Medical Physicist evaluation: Inform the following: 1. Department or Division Director/Chair 2.Department Manager 3.Director of Risk Management 4.Procedural Attending Physician 5.OEHS Radiation Safety Office (RSO)	In addition to completing the Evaluation Level criteria, and after Medical Physicist evaluation: 1.PSN submission Inform the following: 1.Department or Division Director/Chair 2.Department Manager 3.Director of Risk Management 4.Procedural Attending Physician 5.OEHS Radiation Safety Office (RSO)					
CRSO Medical Physicist	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators	1.Evaluation of raw data values 2.Estimation of Peak Skin Dose 3.Notify Educators					
Clinical Area Designee	1.PSN submission 2.Notify Procedural Attending Physician, Department Manager, and Department/Division Medical Director and/or Chair immediately						

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- Single event that exceeds 15,000 mGy = Sentinel Event until proven otherwise
- Clinical staff's responsibility to:
  - notify the procedural physician of the high dose
  - alert the department manager and Department/Division Chair
- CRSO Medical Physicists evaluate and report findings to the Educators
- CRSO Educators notify Risk Management and the RSO
- CRSO Educators follow up with the patient according to the Patient Follow-Up and Consultation Process



### **Patient Follow-up and Consultation Process**





### Sample Patient Follow-Up Log

Educ- ator	MRN	Study Date	Procedure	Patient Name	Telephone #	<b>30 DAY COMMENTS</b>	60 DAY COMMENTS	120 DAY	180 DAY	
			Cerebral			7/15/2016 I spoke with his daughter, she is going to call		10-26-2016 I spoke with patient's daughter.		
SLR	1234567	6/4/2016	angiogram	Mickey, Mouse	(555)555-5555	me back after checking with him. He was at dialysis SLR	8/9/2016 Left message SLR	He is deceased. SLR		
CLD.	1004567	6/0/2016	U E thomholucia	Miekey Meyee		//15/2016 I spoke with patient. No noticeable effects.	8/0/2015 Lieft a manage with his sister to sell mar SLD	10-26-2016 I spoke with this patient. He is	12-13-2016 I spoke with patient-he	
SLK	1234567	6/8/2016	LLE thombolysis	wickey, wouse	(222)222-2220	SLK	8/9/2016 Tieft a message with his sister to call me_SLR	not naving any III effects. SLR	Is doing fine. No effects. SLR	
SLR	1234567	6/15/2016	I HC+PCI	Mickey, Mouse	(555)555-5557	7/15/2016 I spoke with natient-no ill effects. SI R	8/29/2016 I spoke with nation t. She is not having any skin issues. SIR	having no ill effects. SIR	no ill effects. SI R	
Jen	1254507	0/10/2010	Enc.r ci	makey, mouse	(000)000 0007	7,15,2515 (Spoke With patient no in energy set	8/29/2016 I spoke with his wife and left a message for him to call back.	nuving no in criccia, acri	no in circus, sur	
							SLR 8/29/2016 Patient returned my call. He is experiencing no skin	10-26-2016 I spoke with patients sister. She is	12-13-2016 I spoke with patient.	
SLR	1234567	6/17/2016	PCI	Mickey, Mouse	(555)555-5558	7/15/2016 I spoke with patient, no ill effects. SLR	effects. SLR	going to have the patient call me. SLR	He had had no side effects. SLR	
			uterine fibroid			7/15/2016 VM-Mailbox full. Could not leave message	8/29/2016 Left message SLR 8/29/2016 Patient returned my call. She is			
SLR	1234567	6/16/2016	embolization	Mickey, Mouse	(555)555-5559	SLR	having no skin effects. SLR	10/26/2016 Left message. SLR	12-13-2016 Left message SLR	
						Patient is still an inpatient. SLR 9-9-2016 I spoke with		12-13-2016 I spoke with patient-he is having		
SLR	1234567	8/1/2016	CTO/PCI	Mickey, Mouse	(555)555-5560	patient, he is having no adverse effects. SLR	10/17/2016 I spoke with patient. He is having no iff effects. SLR	no effects. SLR		
							10-17-2017 I spoke with Brandon's mother. She said he is having			
							hair loss and addressed it with doctor. He told her is was from the	12-13-2106 She said his hair has started to		
		- 1 - 1	Cerebral		·	9-9-2016 I spoke with patient-he is having no adverse	radiation and they are following it. I advised the patient to call me	"finally grow back and everything appears		This was a potential
SLR	1234567	8/4/2016	angiogram	Mickey, Mouse	(555)555-5561	effects. SLR	or doctor if she has any additional questions or concerns. SLR.	normal." SLR		Sentinel event
CLD	1004567	0/11/2016	Cerebral	Miskov Mouse	(555)555 5560	9-9-2016 I spoke with the patient's husband. He will	10-17-2016 Fattempted to call patient-ner voince mailbox has not been	10.10.2016 Loft morrage CLR		
SLK	1234307	8/11/2010	angiogram	witckey, wouse	(555)555-5502	nave ner can me wonday. SLK	Set up. SER 10.17-2016 Left message SLR 10.18-2016 Left message SLR 10.18-2016	12/13/2016 Lonoke with nationt, she said she		
SLR	1234567	8/16/2016	Unner Gl	Mickey Mouse	(555)555-5563	9-29-2016 Left message SLR	Isnoke with patient-no ill effects SLR	is doing fine SLR		
JEN	1234307	0/10/2010	opper of	Mickey, Mouse	(333/333 3303	9-29-2016 L called patient X 2-unable to leave message.	rapoke with parent no in ences our	is doing me, ser		
SLR	1234567	8/23/2016	Cerebral angiogra	Mickey, Mouse	(555)555-5564	SLR 10-3-2016 patient is still an inpatient	10-26-2016 Patient is still an inpatient. SLR	12-13-2016 Left message SLR		
			multiple Cerebral							
SLR	1234567	8/25/2016	angiograms	Mickey, Mouse	(555)555-5565	9-29-2016 Pt. is still an inpatient. SLR	10-26-2016 Patient is still an inpatient SLR	12-13-2016 Pt is still an inpatient. SLR		
			Percutaneous							
			placement of			12-13-2016 Left message SLR. 12-13-2016 Patient's				
			duodenal			daughter returned my cal He is in a rehab to be	12-13-2016 Left message SLR. 12-13-2016 Patient's daughter returned			
SLR	1234567	10/18/2016	occlusion device	Mickey, Mouse	(555)555-5566	discharged any day. SLR	my cal He is in a rehab to be discharged any day. SLR	2-18-2016 120 DAY		
			Bronchial artery							
			aneurysm			12-13-2016 Patient said he is not having any effects.				
SLR	1234567	10/18/2016	embolization	Mickey, Mouse	(555)555-5567	SLR	12-13-2016 Patient said he is not having any effects. SLR	2-18-2016 120 DAY		
			Angioplasty of			12/13/2016 I spoke with patient. She is not having any				
SLR	1234567	10/26/2016	celiac artery	Mickey, Mouse	(555)555-5568	side effects. SLR	12/13/2016 I spoke with patient. She is not having any side effects. SLR	2-26-2016 120 DAY		



### Statistics and Reporting Trends

- Physician
- Location
- Time
- Alert Level
- Procedure Type



	OR/Neuro		EP Lab		Cath Lab		Interventional Radiology		Multimodality		Total by Dose Level
Jan 1 – April 30, 2016	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	Single Dose	Cumulative Dose	
2,000 – 5,000 mGy	72	N/A	0	N/A	63	N/A	23	N/A	0	N/A	158
>5,000 – 10,000 mGy	10	0	0	0	3	0	6	0	0	7	26
>10,000 - 15,000 mGy	1	0	0	0	0	0	0	0	0	2	3
>15,000 mGy	0	2	0	0	0	0	0	0	0	0	2
TOTAL BY AREA	83	2	0	0	66	0	29	0	0	9	189



### **Summary**

- Created an infrastructure to support "The Care of the Patient".
- Developed a systemic structure to coordinate our incoming data and manage the patient dose monitoring process.
- Established levels of peak skin dose, and set up a threshold breach alert system.
- Built a structured Patient Care Process to follow patients who may need additional care.





