OUT OF HOURS CT SCAN PROTOCOL

Author: Imaging Directorate Team
Executive Lead: Dr Jane Hibbert, Consultant Radiologist

Status: Approval date: January 2017
Ratified by: Clinical Governance Committee
Review date: December 2020
OUT OF HOURS CT SCAN PROTOCOL

Guide for On-Call Referrers

MEDICA RADIOLOGIST: 0845 6522 579

Hours of Operation for Medica Reporting:

Monday – Friday 8.00pm – 8.00am
Saturday – Sunday (and Bank Holidays) 5.00pm – 9.00am

At all other times there will be a Radiologist present in the Imaging Department

General Information:

Out of hours CT reporting is contracted out to Medica, a Teleradiology company. CT scans are performed locally at the Trust, and reported by UK based Consultant Radiologists working for Medica.

Requests for out of hours CT should only be made after proper clinical assessment of the patient and after ascertaining that the scan cannot wait until the following morning.

Appropriateness of requests is monitored and prospectively audited.

Some CT scans may be requested directly to the CT Radiographer, others require prior discussion with a Medica Radiologist.

The criteria are outlined below.

It is essential to include the name, grade and contact number of the Referrer and the name of the Consultant on all request forms.

It is mandatory that the authorization code from Medica be included on the request when a scan is authorized by Medica. This will need to be typed into PAS in the clinical information section.

The Referrer must contact the CT Radiographer on bleep number 5355 to inform them of the request.

No patient is to attend CT without notification that the Radiographer is in CT.
Reports will be entered onto the hospital CRIS and PACS system within 1 hour of the scan.

In the event of the scan showing a significant finding the report will be verbally communicated directly to the referring clinician.

If it is necessary to discuss the scan findings the reporting Radiologist can be contacted on the number above.

**Scans requiring an urgent report from a Medica Radiologist but prior discussion not necessary.**

1) CT Heads.

Acute head injury fulfilling NICE guidelines for urgent brain CT.

Acute stroke fulfilling NICE guidelines for urgent CT (within 1 hour) brain scan. Possible subarachnoid haemorrhage.

2) Trauma (other than isolated head injury)

Quad CT.

Cervical spine CT according to NICE guidelines.

3) Acute abdomen pathway.

The above scans may be requested by a Registrar or Staff Grade directly to the Radiographer.

The report will be entered onto CRIS/PACS within 1 hour.

**Scans requiring a direct referral to Medica prior to scanning.**

1) Paediatric CT Heads (Paediatric Consultant referral to Medica).

2) Non trauma body CT scans (Registrar/Staff Grade or above).

3) Abdominal CT scans not on the acute abdomen pathway.
The referring Clinician should discuss each case with the Medica Radiologist. For paediatric referrals (under 16), the request must be made by a Paediatric Consultant.

If the scan is agreed the referring team should enter a request on PAS and inform the CT Radiographer to perform the scan. All requests MUST contain an authorization code.

The report will be entered on the CRIS/PACS system within 1 hour and in the event of a significant finding they will contact the Referrer directly to discuss the findings.

CTPAs should be deferred until the following day unless the patient cannot be anticoagulated.

Orthopaedic CT scans should be deferred until the following day if possible.

**Scans not usually requiring an urgent report:**

1) CT Carotids and CT Peripheral Angiography.

The on call vascular surgeon will request the scan directly to the Radiographer and will review the images themselves.

2) CT KUB’s

The above scans will be formally reported by an In House Radiologist the following day.

If after reviewing the scans an urgent radiology report is required out of hours the referring Clinician must request a report from the Medica Radiologist via the number above.

If a report is required the Referrer will need to ask the CT Radiographer to send the images to Medica as this will not occur automatically.

**GENERAL PROCEDURE:**

OUT OF HOURS A DOCTOR SHOULD ALWAYS BE PRESENT WHEN INTRAVENOUS CONTRAST IS ADMINISTERED.

THERE MUST ALWAYS BE A NURSE ESCORT WITH A PATIENT.
Guide for CT Radiographers

All urgent scans completed before 7.45pm Monday to Friday and before 4.45pm Saturday and Sunday will be reported by an ASPH Radiologist.

Scans not requiring an urgent report – Medica do not need to be contacted. (CT Carotids/Peripheral Angiography and CT KUB’s)

Scans requiring an urgent report:

On completing the CT scan ensure all images are sent to the Medica Gateway from the CT console. This can be accessed at both SPH and AH. If this should fail, images can be accessed via PACS.

Contact Medica on 0845 6522579 to be put through to a switchboard operative. You can ask the operative to inform the Radiologist that images have been sent through. You will need to state the Hospital, who the Referrer is and contact number. Alternatively if you need to speak to the Radiologist for advice you can be put through.

In the event that the images do not come through correctly, or if there is any other problem, the Medica Radiologist or support team will call you directly.

The Radiologist will complete the report directly onto CRIS within 1 hour and significant findings will be communicated to the Referrer via telephone.

Connection difficulties with Medica:

If there are connection difficulties contact Medica on the same number and ask for IT support. Inform the ASPH Superintendent on call that there are difficulties.

There is no longer a Radiologist on call at night but there will be a ASPH Interventional On Call Radiologist. If there are ongoing connection difficulties that cannot be resolved and an urgent report is required then the Referring Clinician should ask a Consultant to contact the Interventional Radiologist. Images can be viewed at home and the images will be reported upon.

In the event of PACS downtime or issues with the CRIS/PACS interface the CT Radiographer must ask the reporting Medica Radiologist to communicate the report directly as the result will not be accessible to the referring clinician.

Images that need to be sent to Medica:

MPR’s (All three planes).
Reconstruction slice thickness as used locally (e.g. 4mm or 5mm).
Paediatric brains – 0.5mm slices.
For spinal/joint imaging, 2mm slices should be provided.

The Radiologists do not require: Thin slice raw data.