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## ***ULTRASOUND Safety and Quality Manual NCSS***

**NCSS Practice Policies and Procedures for Use of Diagnostic Ultrasound: Version 4 June 2020**

### **SAFETY AND QUALITY MANUAL**

(developed by Dr R A Simon FRACS and Mrs A McLennan-Simon Practice Manager BApp Sci (physio) M App Sci (Sports Physio).

#### **GOVERNANCE:**

Northern Coast Surgical Suite is a service company providing medical practice services to surgeons and other medical specialists.

The business is owned by R and A Simon Pty Ltd

ABN: 46 137 887 168

ACN: 137 887 168

Registered office and principal place of business:

Suite 14, Level 4

20 Dalley St

Lismore, 2480, NSW

- Key Contact: Mrs Ann McLennan-Simon, Practice Manager.

**REGISTRATION AND LICENCING OF PERSONNEL:** Use of the Ultrasound Machine at NCSS is restricted to registered Medical practitioners with at least FRACS qualification and attendance at 'Ultrasound for Surgeons' course or similar. Any surgeon requesting to use the practice ultrasound must also read and sign off all associated policies and procedures in the "[Self-Determined Ultrasound](#)" section of the NCSS Practice Hub Procedure Manual, including this document. Assistance with supporting procedures (patient positioning, entering data, infection control procedures etc) may also be provided by the practice registered nurse or the practice enrolled nurse, both of whom are required to be registered with the Nursing and Midwifery Board and have been given adequate on the job training. Nursing staff do not perform the ultrasound.

Evidence must be provided annually of above qualifications and a register is kept in Practice Hub of relevant [expiry dates and registration numbers](#).

#### **EQUIPMENT and SERVICING**

NCSS is not a diagnostic imaging practice, it is a surgical practice which provides the opportunity for ultrasound examination where deemed appropriate by the surgeon. The integration of ultrasound into the surgeon's practice provides improved patient service and is a valuable addition to the surgeon/clinician's diagnostic and follow-up armamentarium. As such our only equipment is one Sonosite ultrasound machine. Details of the [current machine](#) and its [maintenance schedule](#) are stored in Practice Hub.

All equipment in the practice is to be serviced and maintained according to the manufacturer's specifications.

In the specific case of the current machine, there is no recommended maintenance schedule as documented in the letter from [Sonosite](#)

## RADIATION SAFETY AND RADIOGRAPHIC TECHNIQUE CHARTS

As NCSS is not a Diagnostic Imaging Practice and we do not have any equipment which produces radiation we do not require a radiation management plan.

**INFECTION CONTROL:** NCSS is committed to maintaining the highest levels of safety for our staff and patients by complying with recognised infection control standards and precautions. As such NCSS has a whole practice [Healthcare Acquired Infection control policy](#) however, with particular relevance to use of the ultrasound, which is only performed externally, the following principles must always be applied:

-patients are to be examined on examination couch which is covered by clean paper designed for the purpose.

-after each patient-ultrasound event the transducer is to be cleaned thoroughly according to the [Practice policy, which is based on ASUM guidelines](#)

## PROVISION of DIAGNOSTIC IMAGING SERVICES and REPORTING and RECORDING IMAGE FINDINGS

Diagnostic imaging procedures are only undertaken at NCSS where there is an identified clinical need and where the practitioner interpreting the image is permitted to self-determine the service for which a Medicare benefit is payable under the Act. As previously stated, any practitioner who requests to use the ultrasound will be required to read and document agreement and understanding of all Self-determined Ultrasound and Diagnostic Imaging policies in the NCSS Practice Hub Manual.

**PATIENT SELECTION and CONSENT:** a decision to offer 'in rooms' diagnostic ultrasound to patients may be made by the treating surgeon when it is felt that the information obtained will benefit the overall management of the patient.

A full history must be taken prior to the decision to offer ultrasound examination.

Patients who are offered diagnostic ultrasound will be required to give verbal consent after being provided with [information on ultrasound imaging](#) by the treating doctor. This consent is then documented.

**DOCUMENTATION:** Ultrasound images must be documented and recorded according to the following guidelines.

Record - **patient details**

- **site-** including: side examined ( if applicable); and for breasts , 'clock face' position and distance from nipple
- **plane scan**
- size of lesion**
- all appropriate images**

Images are to be captured and stored in the patient's electronic medical record. These are stored and backed up daily by the practice server. An additional copy is to be made and stored on USB.

## CONSUMER INFORMATION ON PRACTICE SERVICES

As NCSS is not a diagnostic imaging practice we do not advertise the availability of ultrasound at the practice. It is up to the treating surgeon to determine the need for ultrasound examination. Once this need is determined the surgeon explains why it is needed and the patient is provided with the [practice Ultrasound Information and Consent form](#) to read.

## PATIENT IDENTIFICATION and PROCEDURE MATCHING

NCSS is committed to ensuring that all patients are correctly identified when attending our practice.

Any ultrasound images that are produced must show:

- patient's full name
- date of birth
- sex
- specific location of the examination

All mismatching events are considered serious and must immediately be reported to the practice manager. The practice manager will investigate where the break down occurred and is responsible for designing and implementing corrective actions, recording the mismatching event and the actions taken.

## **MEDICATION MANAGEMENT**

NCSS does not administer medications for any ultrasound procedures performed at the practice.

## **DIAGNOSTIC IMAGING PROTOCOLS**

As NCSS is not a diagnostic imaging practice our protocols relate solely to the use of the Sonosite ultrasound machine listed in Practice Hub. All ultrasounds performed within the practice are self-determined. The reason for and the findings of the examination are to be included in a report and sent to the referring practitioner.

## **CONSUMER FEEDBACK AND COMPLAINTS**

NCSS is committed to ensuring that management of feedback and complaints is consistent with the principles of open disclosure and fairness, accessibility, responsiveness, efficiency and integration.

### **Feed back**

NCSS has a whole of Practice [Feedback Policy](#) and welcomes feedback both positive and negative. There is a prominently displayed feedback submission box and feedback forms located in the reception area of the practice. This is a lockable box which is checked regularly by the Practice Manager or delegate. The Feedback forms may also be downloaded from the Practice [website](#) and the practice is working towards enabling the completed forms to be uploaded and returned via the website.

### **Complaints Procedure**

If a complaint is received by the practice either verbally or in written form, the complainant must be advised of this policy and procedure and expected resolution times. If the complaint is about a matter which can be resolved immediately without reference to others, then the staff member is expected to take the necessary action. Staff members are to seek clarification from the Practice Manager where required.

Corrective action will take place as soon as possible. The Practice Manager must ensure the complaint or feedback is recorded on the [Complaints Register](#) form in Practice hub.

## **SAFETY and QUALITY MANUAL REVIEW PROCESS**

The Practice Manager carries the ultimate responsibility for NCSS' Safety and Quality Manual and is responsible for reviewing this document, in consultation with the other co-authors, annually. Staff may submit improvement modification requests at any time, however only the practice manager can make changes to these policies.

The Practice Manager ensures all staff are informed and educated regarding any changes to this document.