

STANDARD OPERATING PROCEDURE MANUALS
UPDATED: AUGUST 2010

POLICY

Procedure Manuals: Protocols for patient services (therapeutic and diagnostic) and Nuclear Medicine Section administrative procedures have been written and are filed in manuals located:

1. Master (filed by the Section Admin Assistant)
2. Radiopharmacy, E1/378

Protocol Content: Clinical Protocols include any/all of the following:

- Institution/Division Name
- Month and Year of Review
- Name of Procedure
- CPT Code
- Indications
- Patient Prep
- Scheduling
- Radiopharmaceutical and Dose. Procedures will have a prescribed dose range of $\pm 20\%$. This statement will be included (as appropriate): All doses will be adjusted for patient weight based on the Mayo Body Surface Area formula. Adult doses will range from 0.5 to 1.5 times the prescribed dose. Pediatric doses (per kg) will range from 0.1 to 1.0 times the prescribed dose.
- Imaging Device (all possible)
- Imaging Procedure
- Comment: A Nuclear Medicine staff or resident physician should be consulted to determine if additional views are indicated.
- Data Acquisition (Camera Settings)
 - Include generic description
 - Include imaging device specific parameters for each imaging device listed
 - Include data transfer instructions, as needed
 - Include file naming, as needed
- Data Analysis
 - Include processing programs used by name
 - Include click by click, as necessary
 - Include file naming, as needed
- Display / PACS
 - Include what screen shots are needed and how they need to be formatted
 - Include what annotation is needed
 - Include what raw data and screen shots are sent to PACS
 - Include any other sending destinations and what is sent there
- Interpretation
- Bibliography / References
- Signature of Division Chief, Manager, and Nuclear Pharmacist
 - For Cardiac procedures, include Nuclear Cardiology Section Chief signature
- Once the technical component is written, write the scheduling guidelines to be used by the schedulers and determine what needs to be loaded into HealthLink. Supply the updates through the Scheduling Supervisor and the Radiology HealthLink team.

Non-Clinical Protocols/Policies include any/all of the following:

- Institution/Division Name
- Month and Year of Review

- Name of Procedure/Policy
- Content, as needed
- Signature of Division Chief and Manager
 - Nuclear Pharmacist (if required by content)
 - Nuclear Cardiology Section Chief (if required by content)

Reviews:

- **Frequency** - Standard Operating Procedures should be reviewed upon initial writing and every three years. Standard Operating Procedures may be reviewed more frequently, as needed.
- **Reviewers** - The will consist of the following:
 - Protocol owner
 - Is assigned by the Department Manager
 - Initiates routine reviews
 - At least one Senior Nuclear Medicine Technologist
 - Senior Nuclear Pharmacist
 - Nuclear Medicine Medical Director
 - Nuclear Cardiology Medical Director (for Nuclear Cardiology SOP's)
 - Nuclear Medicine Manager
 - Optional reviewers could include:
 - Any Nuclear Medicine technologist
 - Any Nuclear Medicine physician
 - Any Nuclear Cardiologist
- **Review** - Review and update, as necessary, the technical Standard Operating Procedure. Insure all points above are included, if they do not already exist. Also, review and update, as necessary, the format, typographical, and grammatical errors.

Implementation:

- Present the new or reviewed/updated Standard Operating Procedures after being signed, at the next Nuclear Medicine Staff meeting. Implementation follows presentation.
- Urgently reviewed/updated Standard Operating Procedures will be implemented upon signing. The protocol will be posted on the Nuclear Medicine control room bulletin board in the communication section as well as emailed to all technologists, Nuclear Medicine faculty, and residents. The printed copy will have the watermark URGENT UPDATE. It will remain posted until presented at the next Nuclear Medicine Staff meeting.

Use of Manuals:

- These manuals are available to all personnel working in or rotating through Nuclear Medicine. The typed protocols need to be followed as written. Manuals are updated at least annually. Any suggestions for change should be brought to the attention of the Section Chief.
- When there is question of how to follow the established protocol, guidance should be sought from the Section Chief or his designee. The procedure should be discontinued until guidance is sought and understood.

Reference:

USNRC Regulatory Guide 8.33: Quality Management Program

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