**Introduction:** The following outlines the standard operating procedures of the NC State University Veterinary Health Complex (VHC) Radiology Department:

**Procedures:**

A. **General Information**

1. **MAIN LOCATION**
   a. Room 2353

2. **TELEPHONE**
   a. Main 3-6590
   b. Reading room 3-6790
   c. Rounds room 3-6594
   d. X-ray room # 2  3-6595
   e. Cath Lab 3-6051
   f. Large animal 3-6026
   g. Large animal X-ray assistant office  3-6024
   h. Health & Wellness Reading room 3-6059
   i. Supervisor 3-6779
   j. Ultrasound 3-6596
   k. Nuclear med 3-6309
   l. CT 64 Slice(TC) 3-6599
   m. CT 16 Slice (H&W) 3-6027
   n. Radiation Therapy 3-6597
   o. Linac Vault 3-6874
   p. Radiation Therapy rounds 3-6164

3. **HOURS**
   a. 8:00am - 9:00pm Mon - Fri (technologists available)
   b. Radiology Resident On call hours M-Thurs 5:00 pm -8:00am and Weekend hours Friday after 5:00 pm until Monday 8:00 am
   c. 8:00am – 11:00am Sat – Sun Student available to help Small Animal ER Imaging Technologist
4. **SCHEDULING**: Patient priority scheduling:
   a. Emergency
   b. Anesthetized
   c. Outpatient (owner waiting)
   d. Day patient (owner returning later)
   e. Inpatient
   f. Special contrast studies (non-anesthetized) are done when time and personnel allow with-in above categorization. All Special procedures require clinician to speak with radiologist or resident on duty.
   g. Imaging requests must be in RIS by 3:00pm for services to be done that day.
   h. All procedures will be scheduled by the staff supervisor.
   i. Clients are not allowed in Diagnostic Imaging.
   j. If requesting radiograph prior to digital imaging please give supervisor written request so that images can be retrieved back from storage a fee maybe incurred for project imaging retrieval please provide an account number to be charged. Clinician will be notified either by page or email once old radiography is in the Imaging department. Clinician will then follow check – out procedures that are self-service. Cases are placed in red folder. Original manila folders and reports are not to leave the Imaging department. Films should be returned within 24 hours unless extended uses are necessary.

**RADIOLOGY INFORMATION SYSTEM (RIS)**

5. Access through Novell or Internet Explorer
   a. Registering patients
      1. Search to see if patient already registered by entering data and clicking Search (do not hit Enter).
      2. If already registered, select patient and choose Order exam.
      3. If not registered, enter patient # (important - make sure # is correct – it cannot be corrected once entered)
      4. Complete all fields in upper case.
      5. Call 3-6590 if cannot find breed – do not add one that’s not listed.
      6. When finished, hit Register patient button which will save the information.
      7. An Error indicates patient may already be entered, patient # is incorrect, a field is incorrectly filled out, etc. Call 3-6590 if errors persist.
      8. Choose Order exam.
   b. Ordering the Exam
      1. Complete ALL boxes.
      2. In clinician box select requesting clinician from the list – do not type name (it will not transfer to radiology and will be considered Incomplete).
      3. A history is required – be accurate and only use standard abbreviations.
      4. Press “Save Visit Info”.
      5. Choose modality.
      6. Choose the exam from the list (do not type anything here). To clarify what’s needed either add to History or call 3-6590 immediately after placing order.
      7. Date defaults to today but can choose a future date. Choose if another radiology procedure will be performed today as well.
      8. Fill in times patient will be available for radiology. Let them know if patient scheduled for other diagnostics that will prevent patient from being available.
9. Drug orders are to be written on the Clinician Order Form or PICO.

c. Ordering additional exams
   1. Press Additional exams. This retains all previously entered info.
   2. Hit “Next patient” to order for another patient.

d. Other RIS features
   1. Can view reports for all patients from 8/8/01.
   2. Can view CT, Ultrasound and some radiographic images.
   3. Under Today can view status of exam (scheduled time, active, complete, preliminary report)

B. WORKING PROCEDURES
   1. Lead aprons, gloves, thyroid shields and glasses - to be worn during exposure and to be hung up when not in use. Do not fold.
   2. Tables - wipe with disinfectant after each patient.
   3. Clean thoroughly at end of day.
   4. Clean thoroughly following infectious patient.
   5. Holding cages - disinfect between patients and repaper.
   6. At end of day, cages and doors to be cleaned with disinfectant solution.
   7. Patients - not to be left unattended on x-ray tables.

C. TRANQUILIZATION
   1. Tranquilizing painful or excitable animals prior to radiographic procedures will improve efficiency and reduce personnel radiation exposure. Tranquilization may be insisted upon for some procedures. Drug orders are to be written on the Clinician Order Form or PICO when the imaging request is submitted.

D. Equine Radiology
   1. Equine Service Responsibilities:
      a. Accurately request radiographic services on patients admitted in RIS, including notes on to go home times and other time constraints to facilitate scheduling by diagnostic imaging.
      b. Attempt to spread out appointments as much as possible on receiving days, starting at 8am.
      c. Provide pertinent information, including a history, and the major clinical rule outs to facilitate the study. More detailed histories will greatly facilitate the studies.
      d. Identify which stall the horse will be located in.
      e. Identify the responsible clinician for the patient. This clinician may be called upon if there are any problems with the horse, or if there are questions about the radiographic study, and must be able to respond to requests of this nature rapidly. Diagnostic Imaging will document clinician calls to assure clinicians that contact was attempted.
      f. Make sure the horse is in the stall prepared for imaging (remove shoes, bandages, etc. in advance). With digital radiography, this should include brushing of the legs and cleaning of the feet with water to reduce artifact.
      g. Provide consultation on sedation of horses if requested by diagnostic imaging. This will in some cases necessitate going to imaging immediately to administer sedatives.
      h. Be available to answer questions the radiologist may have regarding the patient and the radiographic study.
      i. Any anesthetic protocols require the presence of an equine clinician.
      j. Horses in restriction or isolation are to be brought up to diagnostic imaging by equine personnel.
      k. Foals with Dam at side will require equine personnel to assist with radiographic exam. (Restraint of the Dam)
      l. When calling in the radiology resident, please ask them to read the study and get them involved as much as possible in the case.
2. Diagnostic Imaging Responsibilities:
   a. Schedule all cases received via the RIS system, trying to optimize triage based on the history and scheduling conflicts noted in the order.
   b. Emergency > outpatients > inpatients w/ scheduling conflicts > inpatients without scheduling conflicts.
   c. Follow up with clinicians when the history is considered inadequate. If an adequate history is not provided after this prompt, patient is scheduled last on that day.
   d. Retrieve the horse when ready to perform the requested study.
   e. Sedate horse based on standing routine sedation orders.
   f. Call the responsible clinician if routine sedation is insufficient or not possible to administer without the help of an equine clinician.
   g. Perform the requested radiographic study. Additional views will be made routinely when imaged pathology or clinical question warrants such.
   h. When the study has been approved by radiology resident or radiologist the clinician will be contacted and notified that the study is available for review – horse to remain in radiology. If clinician or designee does not respond in 5 minutes the horse is returned to the same stall in the barn.
   i. Additional images may be acquired to augment the study if requested by the clinician. These will be done at that time if the horse is still in radiology. If the horse has left radiology the horse will return to radiology at a later time and re-sedated as necessary.
   j. Complete all requests same business day if order logged in RIS by 3.30pm. While every effort should be made to process requests between 3.30pm and 5pm, these cases will only be done same day if resources allow. Late order patients not done will be triaged next business day. Same day orders after 5pm will incur an after hours surcharge and will be done on an as needed basis.
   k. For after-hours cases, diagnostic imaging will provide an on call resident to take all radiographic images of horses.