

FLUOROSCOPY – TECH REVIEW SHEET

For each criteria item place a: Check Mark to indicate YES/ "X" to indicate No/ N/A to indicate Not Applicable

Facility Name/IHF No. _____

GENERAL INFORMATION	Meets	Meets with Rec's	Does not Meet	N/A	Comments
Does the radiographer:					
<ul style="list-style-type: none"> • Ensure patient examinations media contains patient name, ID#, type and date of examination? 					
<ul style="list-style-type: none"> • Supplement clinical history if not provided by the referring physician? 					
<ul style="list-style-type: none"> • Record exposure factors? <i>(for mobile x-ray only and only if non digital equipment)</i> 					
<ul style="list-style-type: none"> • Ensure their signature/initials are recorded? 					
<ul style="list-style-type: none"> • Ensure female patients are confirmed "Not Pregnant"? 					
<ul style="list-style-type: none"> • Ensure markers are present in radiation field and correctly placed? 					
<ul style="list-style-type: none"> • Ensure the correct anatomy is displayed on film/accuracy of positioning? 					
<ul style="list-style-type: none"> • Maintain patient privacy at all times? 					
<ul style="list-style-type: none"> • Ensure infection control policies are implemented? 					
<ul style="list-style-type: none"> • Ensure the film/image is correctly marked with correct date, name, ID# to match the requisition? 					
<ul style="list-style-type: none"> • Ensure adequate contrast and density on exposed imaging media? 					
<ul style="list-style-type: none"> • Ensure the door to the examination room is closed during radiation exposures? 					
<ul style="list-style-type: none"> • Ensure cassettes are not left in the examination room for subsequent radiation exposures? (if applicable) 					
<ul style="list-style-type: none"> • Perform quality control procedures as per facility policies? 					
<ul style="list-style-type: none"> • Implement the facility's policies and procedures? 					