

GEORGIA DEPARTMENT OF CORRECTIONS



Standard Operating Procedures

Policy Name: Radiology Services

Policy Number: 507.04.80

Effective Date: 1/27/2022

Page Number: 1 of 8

Authority:
Commissioner

Originating Division:
Health Services Division
(Physical Health)

Access Listing:
Level I: All Access

I. Introduction and Summary:

Radiographic services will be made available for the evaluation and treatment of offenders in the Georgia Department of Corrections (GDC) to ensure the provision of adequate health care either within a GDC facility or at an outside facility. This procedure is applicable to all facilities that house state offenders to include county and private prisons.

II. Authority:

A. O.C.G.A. § 31-33-2(a)(1)(A);

B. Ga. Comp. R. & Regs. R.: 125-4-4-.04;

C. GDC Standard Operating Procedures (SOPs): 507.04.21 Health Assessment and Medical Diagnostics, 507.05.05 Dental Radiographic Services, 507.02.01 Health Record Management, Format and Contents, and 507.04.86 Right to Refuse Treatment;

D. NCCHC Adult Standard 2018: P-D-04; and

E. ACA 2020 Standard: 5-ACI-6A-05.

III. Definitions:

Clinical Associate - Health care provider licensed or authorized under state law to order or authorize imaging procedures.

IV. Statement of Policy and Applicable Procedures:

A. Availability of Services:

1. Radiology services will be made available for all GDC offenders as appropriate. The contract vendor may coordinate contract or on-site radiology services.

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2. Invasive radiological in-house procedures will only be provided at those institutions expressly approved for these services by the Assistant Commissioner of Health Services and the Statewide Medical Director in collaboration with the contract vendor.
3. Whenever possible, radiology services will be provided within a GDC facility. If not available in the facility, then necessary services will be provided at the closest appropriate community facility.
4. Emergency radiology services will be provided by the closest appropriate community facility.

B. Reading of Radiographic Films:

1. All films and procedures performed within GDC facilities or at an outside facility, whether under contract or independent, will be read by Board Eligible/Board Certified (BE/BC) Radiologists.
2. Films must be read, and a typed report received within 72 hours from the time the x-ray is taken. In emergency situations, the appropriate physician at the hospital where the emergency services are being provided will read the films.
3. Consultation reports resulting from in-house readings will be typed using a completed consultation request form. The original of the report will be filed in the offender's health record and a copy placed with the film(s).

C. Orders for Radiographic Procedures:

1. Radiographic procedures will be performed within the guidelines of the American Radiological Association and will not generally be conducted as a screening measure for suspected contraband. If, however, there is a perceived need for such screening, medical staff may contact the GDC Statewide Medical Director or contract vendor Statewide Medical Director for guidance.

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2. The X-ray Request/Report form will be used to process the order for x-ray procedures and will be signed by the responsible Clinical Associate.
3. Any Clinical Associate providing services to GDC offenders may order radiographic procedures. Radiological requests are subject to review by Utilization Management (UM).

D. Employee Safety:

1. Prior to installing and operating a radiographic unit, the Georgia Department of Human Resources (DHR) Diagnostic Services/X-ray Unit will be notified of the intent, and a request will be made for an inspection and approval to operate the unit.
2. Requests for subsequent inspections will be made to DHR at a frequency that is in compliance with the Rules and Regulations of the Diagnostic Services/X-ray Unit.
3. Any facility with on-site radiographic equipment will comply with the rules and regulations of the Diagnostic Services/X-ray Unit of DHR.
4. A copy of the Rules and Regulations of the Diagnostic Services/X-ray Unit of DHR regarding radiographic safety will be available in the facility and followed closely.
5. Only those employees with appropriate certification will provide radiology services.
6. Notices regarding appropriate safety precautions will be placed within the radiographic unit to inform other facility employees of potential hazards.
7. Only those individuals required for the radiographic procedure will be present during the exposure.

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8. All employees who provide radiographic services as well as any employee in the immediate area who is subject to exposure during working hours likely to receive 10% of annual allowable occupational dose of 5000 millirems, will wear radiographic badges as recommended. Such badges will be changed within the manufacturer's recommended time frame (a minimum of once per month). Badges will be obtained from a reputable firm whose reliability is assured.
9. All radiology equipment will be maintained as recommended by the manufacturer. Maintenance will be performed by personnel as defined by the State Rules and Regulations of the Diagnostic Services/X-ray Unit, DHR, or the manufacturer, if no such state rules exist. Written documentation of each maintenance activity will be retained.
10. All hazardous or potentially hazardous materials (e.g., diagnostic media, darkroom chemicals) will be kept in a secure locked area in accordance with institutional guidelines. In addition, the x-ray room and all equipment will be kept secure.
11. All GDC radiology sites will be responsible for silver collection and recovery. Procedures will be in accordance with the contract for such services negotiated by the health services vendor.

E. Offender Safety:

1. Offenders will be exposed only to the minimum amount of radiation deemed necessary for performing a diagnostic radiograph. Guidelines include, but not limited to:
 - a. Collimation of the field including only the part to be examined.
 - b. Gonadal protection from the direct beam except where shielding obscures the area to be x-rayed.

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2. If pregnancy of the offender is suspected and the procedure can be deferred with no harm to the mother or fetus, such x-rays will be deferred.

F. Documentation of Statistics:

1. Daily service logs will be maintained to provide the following:
 - a. Offender's name;
 - b. GDC ID number;
 - c. Date of procedure;
 - d. Number of procedures and films for those procedures;
 - e. Date written reports are received;
 - f. Invasive or non-invasive procedure; and
 - g. Whether procedures were provided in-house or outside the resident facility.
2. Logs will be maintained for three (3) years.

G. Operational Procedures within the Facility:

1. Each facility will prepare operational procedures for radiographics performed within the facility.
2. Such procedures will include identification of emergency responses, priorities for service, job roles, filing of films, safety, maintenance, and security of equipment as well as handling and security of supplies.

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H. Operational Procedures outside the Facility:

1. Outside services provided by GDC or non-GDC providers will be addressed in a Local Operating Procedure (LOP) of every GDC facility and will include:
 - a. The process for obtaining services for the offender;
 - b. Identification of which providers to use in the event of an emergency; and
 - c. The process for obtaining a reading of the film.
2. Procedures will be developed to address the filing of any films returned to the facility.
3. All such procedures will agree with these Standard Operating Procedures.

I. Offender Movement and Radiographic Films:

1. Radiographic films and/or discs relating to the health problem necessitating consultation and treatment must accompany every offender upon transfer to a GDC facility or outside appointment for the purpose of the consultation and treatment. Failure to send such films may result in cancellation of the appointment with the consultant.
2. Scheduling of radiographic procedures at another GDC facility will be made as far in advance as possible, recognizing of course, that it must be medically acceptable for the offender to wait for that period of time. The offender will not be informed of the exact date for the procedure.
3. When appropriate, offenders will be returned to their resident facility with written documentation of the reading of the films and actual discs. The original films may follow at a later date if requested. Films taken at ASMP will remain on file at ASMP for future consultations. If necessary, films can be loaned out to another medical care facility and returned within thirty (30) days.

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4. Original films and/or discs of radiographic procedures performed, as a part of the diagnostic process, will accompany every offender when the offender is transferred to another facility.

J. Retention and Storage:

1. All radiographic films will be stored at the offender's resident facility while the offender is in residence or for ten (10) years if the sentence or residency exceeds ten (10) years.
2. Radiographs performed on offenders who test positive for TB will be archived in accordance with the Georgia TB Program. Once the offender is inactive (TB inactive) the record will be maintained for fifteen (15) years after the end of that calendar year and then destroyed.
3. Each facility will have a filing system for radiographic film.
4. Radiographic films for offenders who have been discharged, paroled, or are deceased will be forwarded to the Arnall Building in the Central Region for retention. This does not apply to dental x-rays. Films will be sent to the Arnall Building within 30 days of the offender's parole or discharge. Films taken at ASMP will remain at ASMP with the exception of TB cases, which will be forwarded to the Arnall Building for retention. All films sent to the Arnall Building for retention will be clearly marked with the following:
 - a. GDC ID Number;
 - b. Offender's Name;
 - c. EF Number;
 - d. Date of Release;
 - e. Race/Sex/Date of Birth;

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- f. Facility;
- g. Date of Procedures;
- h. Latest Year X-Rayed (along left edge of folder); and
- i. GDC ID Number (along the left edge of folder, last four numbers of the assigned number).

Note: The terminal digit filing system approved by the Office of Health Services will be used.

K. Film Destruction: After the storage time frame has elapsed, radiographic films may be turned in under an established silver recovery program.

V. **Attachments:** None.

VI. **Record Retention of Forms Relevant to this Policy:** As outlined within the policy.