**Invasive Radiology Procedure Patient Safety Checklist [QSI Ref: IR-801]**

**Descriptor:**

Auditing compliance with safety checksfor invasive radiological procedures.

**Background:**

Data published in the New England Journal of Medicine in 2009 suggested that the implementation of a surgical safety checklist significantly reduced patient morbidity and mortality [1]. The Royal College of Radiologists (RCR) and the National Patient Safety Agency (NPSA) produced a modified WHO checklist for use in interventional radiology in 2010 [2].This document proposed use of a checklist in all intervention procedures ‘dependent on penetration of the skin’. This was formalised in the ‘National Safety Standards for invasive procedures (NatSSIPs) published in 2015 [3] which requires documented local safety processes including peri-procedural safety checks around any invasive procedure including ‘biopsies and other invasive tissue sampling’. These checks may be locally modified to be appropriate for different modalities and procedures. This audit relates to peri-procedural safety checks rather than LocSSIPs.

## The Cycle

**The standard:**

• There are locally agreed checklists for all invasive procedures in the radiology department.

• All invasive procedures undertaken in Radiology should be compliant with a relevant safety checklist for that radiological intervention.

• A peri-procedural checklist should be completed for every patient who has undergone an invasive procedure.

• A record of the completed checks should be digitally stored in the patient record in RIS or PACS and be available for audit.

**Target:**

100% compliance

## Assess local practice

**Indicators:**

• Compile list of invasive procedures in the intervention suite and other areas of radiology including ultrasound, CT, fluoroscopy and breast imagingand confirm there is an associated safety checks document associated with all procedures.

• Confirm there is a locally agreed check process appropriate to all procedures. In the intervention suite this will be or be modelled on the WHO radiology intervention checklist.In other interventions such as biopsy, suggested checks are listed under data items to be collected in next section.

**Data items to be collected:**

• Whether a checklist has been completed for all patients

• Whether the checks are all completed for each procedure

Suggested checks include:

   - Correct patient

   - Has patient read information sheet and had opportunity to ask questions?

   - Correct site and side

   - Allergy information

   - clotting and platelets checked

   - Relevant imaging reviewed

   - verbal/written consent

   - sample labelling checked

   - complications recorded

**Suggested number:**

100 patient notes/entries on radiology information system

**Suggestions for change if target not met:**

• Present the audit at departmental meeting where those involved with completing the checklist will be present e.g. radiologists, radiographers, nurses and health care assistants & radiology department assistants

• Establish roles as to whose responsibility it is to lead on different checks and complete individual parts of the form. Collaborative working withradiogrpahers / nurses / assistants is pivotal in this process.

• Reaudit

**Resources:**

- Patient list complied form RIS and review of electronic records of safety checks.

- Data collection (8 hours)

- Data analysis and report construction (4 hours)

**References:**

1. Haynes AB, Weiser TG, Berry WR et al. A surgical safety checklist to reduce morbidity and mortality in a global population. New Engl J Med 2009; 360: 491- 99. <http://www.nejm.org/doi/full/10.1056/NEJMsa0810119#t=article>
2. National Patient Safety Agency, The Royal College of Radiologists. WHO Surgical Safety Checklist: for radiological interventions only. <https://www.rcr.ac.uk/publication/standards-npsa-and-rcr-safety-checklist-radiological-interventions>
3. NHS England Patient Safety Domain. National Safety Standards for Invasive Procedures (NatSSIPs) 2015.

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