



## **Specific Accreditation Guidance**

# **Standards of Practice for Clinical Radiology Gap analysis**

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# Standards of Practice for Clinical Radiology Gap analysis

## Purpose and background information

This document serves as an informative guide correlating the clauses in Standards of Practice for Clinical Radiology version 2019 to the previous 2017 version of the standard (Standard of Practice for Diagnostic and Interventional Radiology) .

The Royal Australian and New Zealand College of Radiologists (RANZCR) is a not-for profit association of members who deliver skills, knowledge, insight, time and commitments to promote the science and practice of the medical specialties of clinical radiology (diagnostic and interventional) and radiation oncology in Australia and New Zealand. The Faculty of Clinical Radiology, RANZCR, is the peak bi-national body for setting, promoting and continuously improving the standards of training and practice in diagnostic and interventional radiology, for the betterment of the people of Australia and New Zealand.

This current version of the Standards of Practice for Clinical Radiology has undergone a significant review and revision from version 10.2.

In addition to minor amendments, such as application of consistent terminology and updating of content to reflect current practice, the following substantive changes have been made:

- Version 11 now includes the Teleradiology Standards (Standard 8), which had previously been published as a stand-alone set of standards. The development and inclusion of standards for the practice of teleradiology acknowledges the importance of teleradiology in modern healthcare, and reinforces the standard of care that patients resident in Australia and New Zealand expect.
- By including the teleradiology standard as a new Standard 8, what were Standards 8–15 in Version 10 have now become Standards 9–16 in Version 11.
- Specific monitor requirements for the various imaging modalities are now provided as a comparative table in the new Appendix D.
- The Computed Tomography (CT) Standards (Standard 10) have been modified to reflect and be consistent with the Quality Framework for Diagnostic Imaging (<https://www.ranzcr.com/college/document-library/quality-framework-for-diagnostic-imaging>).
- The Interventional Radiology Standards (Standard 12) have undergone a bridging update. A more thorough, detailed update of standards relating to interventional radiology is planned for 2020.
- The Nuclear Medicine Standards were reviewed by a joint AANMS/RANZCR working group and ratified by the AANMS Board on the 27th February 2019.

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
	<b>1</b>		<b>Practice Management Requirements</b>	
1.2	1.2	Editorial	Quality Manual	The words are replaced <i>it includes</i> replaced <i>quality manual includes</i>
1.3	1.3	Editorial	Quality Manager	Minor word changes
1.4	1.4	Editorial	Documentation	Rewording
1.5 Indicator 2	1.5 Indicator ii	Minor	Patient Records	Removal of requirement to keep original data for a minimum of 3yrs - <i>Now stated at indicator v</i>
	1.6 Indicator ii	New Indicator	Corrective and Preventative Action	Requirement to have documented evidence of policies and procedures outlining the appropriate corrective and preventive actions.
1.6 Indicator 2	1.6 Indicator iii	Editorial	Renumbered	
1.6 Indicator 3	1.6 Indicator iv	Minor	Additional wording	Now includes requirements to ensure relevant staff understand the incident reporting process
1.7 indicator 1	1.7 indicator i	Minor	Continuous Quality Improvement	Now includes suggested processes for QI initiatives.
1.7 indicator 2	1.7 indicator ii	Minor		Additional information
1.7 indicator 3	1.7 Indicator iii	Minor	Additional information	Independent auditors should be guided by ISO standard 19011

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
1.7 indicator 6	1.7 indicator vi	Minor	Additional information	Practice identifies key areas of its operations for quality improvement, including through the use of patient experience <i>as outlined in references 4-6,</i>
1.8 Indicator 2	1.8 Indicator ii	Minor	Feedback and Complaints	Additional information
	1.8 Indicator iii	new		Practice procedures should be transparent, fair, efficient and timely.
1.8 Indicator 3	1.8 Indicator iv	Editorial		Re-numbered
	1.9 Indicator ii	New	Management Review	For Practice groups that have a board of directors, senior management should report a summary of this review process regularly to the board
	1.9 Indicator iii	New		The Practice maintains a risk register that reflects the actions and mitigations taken inresponse to various risks
1.10 Indicator 5	1.10 Indicator v	Major	Supplies	No longer requires IHE Integration Statement.Contracts with such suppliers specify exactly how the supplier and the Practice will cooperate in the case of an incident; for example, faulty product, breach of service level agreement or breach of data
	<b>2</b>		<b>Facilities</b>	
	2.1 Indicator v	New	Facilities	Practice provides appropriate staff amenities
	<b>3</b>		<b>Equipment</b>	

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
	3.1 Indicator vii	New	Equipment	Equipment should only be operated by appropriately certified and licensed, where required, staff.
	3.1 Indicator viii	New		When purchasing or upgrading equipment and software required and used for all procedural activities, the Practice obtains an IHE Integration Statement for the current model or version being purchased or upgraded from the manufacturer, and consults with the vendor regarding the proposed upgrade and retains this advice in writing.
3.2	3.2	Additional		New Note added Equipment registered with the Department of Human Services and have an LSPN
3.2 Indicator 1 &2	3.2 Indicator i	Editorial		Combined
	3.2 Indicator iii	New		The Practice has a register of all its data, including, but not limited to:• <ul style="list-style-type: none"> <li>• Software programs</li> <li>• Data flow diagrams</li> <li>• Systems the Practice interfaces with</li> <li>• Where patient and clinical data reside</li> <li>• Where backups reside.</li> </ul>
3.3 Indicator 2		Editorial		Removed
3.3 Indicator 3	3.3 Indicator ii	Editorial		renamed
3.3 Indicator 4	3.3 Indicator iii	Editorial		Renamed

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
3.6.1	3.6.1	Editorial/New	Computers and Automated Equipment	The Practice has service logs of computer and automated equipment, and records of software updates.  The Practice can demonstrate the use of additional security to protect patient information when using shared health information databases
3.6.2	3.6.2	Editorial		Rewording of clause and indicators
3.6.3 Indicator 2	3.6.2.2 –Indicator ii,vi	Editorial		Separation of indicator 2 into different indicators  Requirements of Monitors now outlined in Appendix D
	3.6.2.2 Indicator iii	New		Consideration to implementing anti-reflective coating to monitors
	3.6.2.2 Indicator iv	New		Requirements for primary monitors used for low resolution modalities
3.6.3 Indicator 3	3.6.2.2 Indicator v	Editorial		Requirements for secondary monitors
3.7.1	3.7.1	Minor	Digital Imaging Data	Rewording and additional indicators Evidence and demonstration of storage capacity, retention schedule and capacity to store radiation dose
	3.7.2	New		Indicators related to privacy of patient information, security of software and polices.
3.7.2.1	3.7.3.1	Editorial		renumbered
3.7.2.2	3.7.3.2	Editorial		renumbered
3.7.2.3	3.7.3.3	Editorial		Reworded

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
3.7.2.4	3.7.3.4	Editorial		Reworded
3.7.2.5	3.7.3.5	Editorial/New		Different report formats suggested ( HL7 v2 & HL7 CDA) Storage changed from 36 months to statutory requirements for the jurisdiction New indicator
	3.10	New	Online Portals	No indicators
3.10	3.11	Additional	Reporting Environment	Additional Information about reporting environment e.g. adequate control of temperature, humidity, ventilation and acoustic noise.
3.11	3.12	Editorial/new		Renumbered Indicator i – must have written procedures for QC <i>Input from medical physicist</i>
3.11.2	3.12.2	Editorial/New	Quality Control	Indicator I - must have written procedures for QC of diagnostic workstations and teleradiology equipment
	<b>4</b>		<b>Personnel</b>	
-	4.1.5	New	Ergonomics	Documented policy required
4.2.1	4.2.1	Editorial	Qualifications	Additional of New Zealand medical Registration (Clinical Radiologist)



Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
4.2.1 Indicator 4	4.2.1 indicator iv	Minor		The Practice ensures that each clinical radiologist has completed CPR training according to the Australian Resuscitation Council or New Zealand Resuscitation Council's guidelines on Basic Life Support. Removal of three years
4.2.1 Indicator 6	4.2.1 Indicator vi	Minor		It is the personal responsibility of the radiologist to ensure regular assessment of visual function be undertaken at the beginning of their career, and at regular intervals; increasing in frequency with age due to visual function deterioration.
4.2.2 Indicator 1	4.2.2 indicator i	Minor		Additional Medical Radiation Practitioner registration records: AHPRA, MRPBA or MRTB
-	4.2.2. indicator iii	New		The Practice should ensure that radiographers have completed CPR training
-	4.2.3	New	Qualifications – Sonographer	New Clause - sonographers scope of practice
4.2.4	4.2.3	Editorial	Qualifications- Medical Physicist	Duplicate clause number ( same number as Sonographer)
4.2.3	4.2.4	Editorial	Qualifications – Nurse	Renumbered
-	4.2.4 indicator ii	New		Practice ensures nurse have completed CPR training
-	4.2.7 ( written as 4.2.5)	New	Qualifications Radiation Safety Officer	Requirements for Radiation Safety Officer listed

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
-	4.3.1 Indicator ii	New		The Practice maintains a register of CPD training attended by its staff or alternatively is able to access this when required.
	4.3.4	New	CPD Sonographers	The Practice ensures that each of its sonographers is registered with an appropriate body. The Practice ensures that each of its sonographers actively participates in CPD to maintain clinical currency and registration.
	4.3.4	Editorial	CPD Medical Physicists Duplicate clause number ( same number as Sonographer)	The Practice ensures that each of its medical physicists provides it with evidence of ongoing CPD participation that complies with the ACPSEM CPD requirement, or the CPD Audit.
4.3.4	4.3.5	Editorial	CPD Nurses	Renumbered and additional information about NZ registration
	<b>5</b>		<b>Professional Supervision</b>	
5.2.2	5.2.2	Editorial	Professional Supervision	Removal of the term PDY
	5.2.3	New	Trainee Sonographers	Exemptions for remote and rural sonographer trainees removed
5.2.3	5.2.4	Editorial	Trainee Medical Physicist	Renumbered
	5.2.5	New	Trainee Medical Imaging Nurse	Requirements listed

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
5.5.1 Indicator 5	5.5.1 Indicator v	Minor	Interpretation and Reporting	Additional requirements for the amended Report  The Practice ensures that where an amendment or addendum to a report is made, this must be identified on the report, and clearly distinguished from the original report. Authorship, time and date of the addendum should be clearly stated
	5.5.1 Indicator vii	New		Sonographers initial and surname is included in the record of examination
5.5.1 Indicator 7	5.5.1 Indicator viii	Editorial		Renumbered
5.5.1 Indicator 8	5.5.1 Indicator ix	Editorial		Renumbered
5.5.2		Removed	Remote Reporting	Covered under new section on Teleradiology
5.5.3	5.5.2	Editorial	Communication of Imaging Findings and Reports	Renumbered
5.5.3 Indicator 1	5.5.2 indicator ii	Minor		The document policy for communication of urgent results expanded to include <ul style="list-style-type: none"> <li>• General findings that should be communicated</li> <li>• How the communication should be documented</li> <li>• A record of the person communicated to</li> <li>• A record of what was communicated</li> </ul>
5.5.4	5.5.3	Editorial		Renumbered
	<b>6</b>		<b>Safety</b>	
6.3.1	6.3.1	Minor	ALARA Principles	PRLs (Practice Dose Reference Level) now called FRLs ( Facility Reference Levels)

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
-	6.5 Indicator v d	New	Use of Contrast	The plan of management ( of adverse reactions) should be tested by the appropriate staff on an annual basis.
6.6.3 Indicator 6	6.6.3 Indicator vi	Minor	Use of Medications	The Practice has a documented process of auditing expiry dates of unused medication and disposal of expired stock.
	<b>7</b>		<b>Patient Management</b>	
7.2 Indicator 1	7.2 Indicator i	Editorial	Patient Identification and records	Patient identification System – three approved patient identifiers
7.2 Indicator 3	7.2 Indicator iii	Editorial		Removal of requirement to keep digital or film image are retained for 6 months. Now retained for the applicable statutory period.
	7.3	New	Cultural Competency	Requirements listed
7.3	7.4	Editorial	Correct Patient, Site and Procedure	Renumbered
7.4	7.5	Editorial	Discharge Procedure	Renumbered
7.4 Indicator 2	7.5 Indicator ii	Editorial		Expansion on instructions given at discharge
7.5	7.6	Editorial	Patient Consent	Renumbered
7.6	7.7	Editorial	Privacy Policy	Renumbered
	7.7.1 Indicator iii	New		The Practice should have processes in place for a mandatory data breach notification plan
7.6.2 Indicator 3	-		Removed	
7.7	7.8	Minor	Open Disclosure	Additional information to include in open disclosure program.

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
	<b>8</b>		<b>Teleradiology</b>	
	8 Teleradiology	Major		New Section now included
	<b>9</b>		<b>Bone Mineral Densitometry(BMD)</b>	
8 BMD	9 BMD	Editorial		Renumbered
	<b>10</b>		<b>Computed Tomography (CT)</b>	
9 CT	10 CT	Editorial		Renumbered
9.2.1 Indicator 1				Removed
	10.3.1 Indicator v	New	Review of Appropriateness of Request	The Practice maintains records of on-site attendance by the clinical radiologist/s.
9.3.2 indicator 2	10.3.2 Indicator iii			
9.3.2 indicator 3	10.3.2 Indicator iv	Editorial		Renumbered
9.3.2 indicator 4	10.3.2 Indicator v	Editorial		Renumbered
9.3.2 indicator 5	10.3.2 Indicator vi	Editorial		Renumbered
9.3.2 indicator 6	10.3.2 Indicator vii	Editorial		Renumbered
-	10.3.2 Indicator ii	New	Supervision by clinical radiologists	Protocols ensure that a clinical radiologist supervises all components of the imaging examination and has ongoing in-person interaction with members of the imaging team.
	<b>11</b>		<b>General X-Ray</b>	
10 General X-Ray	11.3.2 General X-Ray	Editorial		Renumbered. Removal of statement "working towards" in relation to dose output record and image review.

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
10.3.2.3 Indicator 1	11.3.2.3 Indicator i	Minor		The Practice's review of its fluoroscopy services includes a six-monthly review of reference Air Kerma and DAP
	<b>12</b>		<b>Interventional Radiology</b>	
11.2.2		Minor	Neuro-Angiography	Removed
11.2.4	12.2.3	Editorial		Renumbered
11.2.5	12.2.4	Editorial		Renumbered
11.2.6	12.2.5	Minor		Indicators combined and additional information
11.2.7	12.2.6	Editorial		Renumbered
11.3	12.3	Editorial		Renumbered
11.3.1 Indicator 2, 3, 4,	12.3.1 Indicator ii	Minor		Indicators combined to a general statement about training of radiologists performing Tier B
11.3.1 Indicator 5	12.3.1 Indicator iii	Editorial		Renumbered
11.3.3.		Minor	CPD Interventional Neuroradiology	Removed
	<b>13</b>		<b>Magnetic Resonance Imaging (MRI)</b>	
12.1	13.1	Minor	Addition of NZ reference	The Practice shall ensure that its MRI system meets the requirements of the .... the Medicines Regulations 1984 in New Zealand.

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
12.1.2 Indicator 3	13.1.2 Indicator iii	Minor	Additional requirement	When paediatric patients are sedated, sedation and monitoring equipment of an appropriate size for paediatric patients is available in the procedure room before the start of the procedure,
12.1.3 Indicator 3	13.2.1 Indicator ii	Editorial		12.1.3 Indicator 3 now combined with 13.2.1.indicator ii
12.2.2	13.2.4	Editorial	Radiologist CPD	Clause moved
12.2.3	13.2.2	Editorial	Qualifications - MRI Radiographer	renamed
12.2.4	13.2.3	Editorial	Qualifications - Service Engineers	renamed
12.2.5	13.2.5	Editorial	CPD MRI Radiographer	renamed
12.3	13.3	Editorial	Professional Supervision	Renamed
12.3.2	13.3.2.	Minor	Review of Appropriateness of Request and patient preparation	A delegated appropriately qualified medical imaging technologist can review the request before the examination is undertaken
12.3.3		Minor	Screening of the Patient undergoing MRI Examination Clause removed	Procedures to screen patients under 13.4.1 Indicator iv b
12.3.4	13.3.3	Editorial	Performance of the Imaging Examination	Renamed
12.3.5	13.3.4	Editorial	MRI Procedures	Renamed
12.3.6	13.3.5	Editorial	Quality	Renamed
12.4	13.4	Editorial	Safety	Note includes references to standards and Guidelines about MRI safety
12.4 Indicator 2	13.4 Indicator ii	Minor	Removal of reference to ARPANSA document	

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
	<b>14</b>		<b>Mammography</b>	
13.2.1 Indicator 3 & 4	14.2.1 ii	Editorial	Diagnostic Mammography Equipment	Acquisition monitor requirements now in Appendix D
13.2.3 and 13.2.4	14.2.3	Editorial		Combined into one clause
13.3.1	14.3.2	Editorial		Renamed
13.3.2	14.3.3	Editorial		Renamed
13.3.3	14.3.1	Editorial		Renamed
13.4.2	14.4.3	Editorial		Renamed
13.4.3	14.4.2	Editorial		Renamed
13.4.4	14.4.4	Editorial		Renamed
13.6.1	14.5.1	Editorial	Mammography Radiation Dose	The Practice must not exceed the mammography radiation dose limit requirements of the ACPSEM Previous Dose limit requirement of MQAP
	<b>15</b>		<b>Nuclear Medicine</b>	
-	15.2	New	Nuclear Medicine facilities	Facility requirements
14.1.1 and 14.1.2	15.3	Minor	Equipment	Rewording & combined clauses
14.1.2 Indicator 1	15.4 Indicator iv	Editorial		Renamed (unsure why it is under Qualifications of Nuclear Medicine Specialist) - they can either be radiologists (RANZCR) or physicians (RACP)



Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
14.2	15.4	Editorial	Personnel	Renamed
14.2.1 Indicator 1	15.4.1 indicator i	Editorial		Changes to the definition (credentialing) of Nuclear medicine specialist
14.2.2	15.4.2	Editorial	Qualifications Nuclear Medicine Technologist	nuclear medicine technologists hold current registration with AHPRA (was AANMS)
14.3.1	15.5.1 iv & v	New	Responsibilities of the Nuclear Specialist	Two additional indicators related to specialists responsibilities
14.3.4 Indicator 3	15.5.4 Indicator iii	Minor		Service manual to be reviewed biennially rather than annually
14.3.6 Indicator 1	15.5.6 Indicator ii	Editorial		Renamed
14.3.7 indicator 1	15.5.6 Indicator iii	Editorial		Renamed
-	15.5.6 i, v, vi	New		New indicators regarding the reporting of results
	15.6.2 x	New		New indicator regarding administrated activity
14.4.4 Indicator 4 b	15.6.4 Indicator iv b	Minor	Blood Products	radioactivity, with any discrepancy of more than 50% from the prescribed activity for diagnostic procedures, shall be confirmed with the nuclear medicine specialist prior to administration.  Was 10 %
14.4.6	15.6.6	Editorial		Combined indicators
14.5	15.7.	Editorial	Patient management	Renamed
14.5.2 Indicator 1	15.5.6 Indicator iv	Editorial		Renamed

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
14.5.3 Indicator 1	15.6.7 Indicator i	Editorial	Risks	Renamed
14.5.3 Indicator 2	15.6.2 indicator viii	Editorial		Renamed
15.5.3. Indicator 3	15.6.2 indicator ix	Editorial		Renamed
	<b>16</b>		<b>Ultrasound</b>	
15.1.1 Indicator 3	16.1.1 Indicator iii,	Minor	Ultrasound Equipment	Additional equipment capability requirements
15.1.1 Indicator 4	16.1.1 ivi	Minor		Additional equipment capability requirements
15.1.1 Indicator 5	16.1.1 Indicator v	Minor		Additional equipment capability requirements
15.1.1 Indicator 7	16.1.1 Indicator vii	Minor		Additional equipment capability requirements
15.1.1 indicator 8	16.1.1 indicator ix	Editorial		Renamed
15.1.1 indicator 9	16.1.2 indicator i	Editorial		Renamed
	16.1.1 Indicator viii	New	Paediatric ultrasound services	Equipment capability for paediatrics
15.1.2 Indicator 1	16.1.2 Indicator ii	Editorial		Renamed
15.1.2 Indicator 2	16.1.2 Indicator iii	Editorial		Renamed
15.2.1 Indicator 1	16.2.1 Indicator i	Editorial		Qualifications for Australian Sonographers
	16.2.1 Indicator ii	New		Qualifications for NZ Sonographers
15.2.1 Indicator 2	16.2.1 Indicator iii	Editorial		Renamed
15.2.1 Indicator 3	16.2.1 Indicator iv	Editorial		Renamed

Version 10 2017 Clause No.	Version 11 2019 Clause No..	Emphasis of Change	Summary of text/extract from Version 11	Comments
	16.2.2 Indicator ii	New		Qualifications for NZ Student Sonographers
	16.3.2	Editorial		Indicators previously under review
	16.3.4 Indicator v	New		The Practice ensures that its clinical radiologist and sonographer have read, understood and adhere to Standard 8 when providing teleradiology services
	16.3.5 indicator ii	New		The Practice can demonstrate that the request form and the sonographer worksheet are appropriately stored in the patient's electronic medical records.
15.3.5 Indicator 2	16.3.5 indicator iii	Editorial		Renamed
15.3.6	-	Editorial	Quality Assurance	Removed
15.4.1 indicator 6	16.4.1 indicator iv			Renamed
	16.4.2 Indicator i, iii & iv	New	Ultrasound – Infection Control	Infection control requirements
15.4.1 indicator 5	16.4.2 indicator ii	Editorial		moved
15.5.5.1 indicator 1	16.3.4 indicator iv	Editorial		moved
<b>Appendix D</b>		New	- Monitor specification table	