Alberta Health Services

PROCEDURE

TITLE	**Use of Fluoroscopy, C-Arm and Mini C-Arm**	POLICY #	**CZ-VII-10**
MANUAL SECTION	CV – VII General Imaging	EFFECTIVE DATE	01-June-1997
APPROVED BY	Diagnostic Imaging Provincial Executive Team	REVISION DATE	14-Dec-2015
PROCEDURE SPONSOR	Diagnostic Imaging Services	NEXT REVIEW	14-Dec-2016

OBJECTIVES

To facilitate safe operation of fluoroscopy equipment in the Central Zone.

APPLICABILITY

Central Zone, Diagnostic Imaging

PROCEDURE

1. **Department Fluoroscopy –** as per CPSA guidelines
2. **Conventional C-Arm Mobile Fluoroscopy – RDRHC and Lacombe HCC**

2.1. The mobile fluoroscopic equipment will be technically adjusted and mechanically positioned by a Medical Radiation Technologist. Students will be supervised by Medical Radiation Technologists during their clinical experience in the operating room.

2.2. The use of the mobile intensifier will be under the direct control of the technologist assigned to the operating room, including the actual use of fluoroscopy.

2.3. It will be the responsibility of the technologist assigned to the operating room to keylock the x-ray control on this unit. The key will remain in the control of the Diagnostic Imaging staff.

2.4. When not in use, this equipment will be stored in the area designated by the operating room supervisor.

3. **Mini C-Arm Mobile Fluoroscopy**

3.1. The Mini C-Arm is a fluoroscopy device designated to be used intraoperatively by a surgeon who is a **"Qualified Operator" of the Mini C-Arm**, without the assistance of a medical radiation technologist. The use of this device will assist the physician, the operating room team and Diagnostic Imaging in providing effective fluoroscopy services to patients in the operating room and/or ambulatory care, in a manner consistent with safe radiation practices.

This device is limited to use for fluoroscopy of extremities (with or without cast) particularly:

-fingers	-toes
-hands	-foot
-wrist	-ankle
-forearm	-tibia & fibula
-elbow	-knee
-humerus	-shoulder

NOTE: This device may not penetrate thick plaster casts.

3.2. The Mini C-Arm, while providing many advantages to patient care, remains a **fluoroscopic** device that requires specialized knowledge and skill **to assure patient and staff safety**.

3.3. A surgeon in the Divison of Plastic Surgery and Orthopedics may become a **Qualified Operator of the Mini C-Arm** by successfully completing a course in "Radiation Protection and Principles of Fluoroscopy" approved by the AHS Radiation Safety Officer.

3.4. A physician, who is a **Qualified Operator of the Mini C-Arm**, may use this device in the operating room and/or outpatient department (OPD).

3.5. A Qualified Operator can use the Mini C-Arm without a Medical Radiation Technologist.

3.6. All physicians and other personnel caring for the patient undergoing fluoroscopy using the Mini C-Arm **must** wear protective radiation (lead) aprons. **Failure to wear protective aprons or to ensure that lead aprons are worn by all staff involved in Mini C-Arm fluoroscopy procedures will result in suspension of use of the Mini C-Arm.**

3.7. The Circulating / Attending Nurse will be responsible to log all cases utilizing the Mini C-Arm in the Mini C-Arm logbook attached to the unit. The log sheets will be maintained by surgical department as the permanent fluoroscopy record. The following information must be logged:

- Date of procedure
- Qualified Operator Name
- Patient ULI
- DOB
- Procedure / examination
- Location (in facility) of procedure
- Fluoroscopy exposure time
- Signature of recorder

3.8. DI may assist the surgical programs with equipment if requested, but the areas that use them and the certified operator are responsible to maintain and utilize appropriately.

DEFINITIONS
n/a

CROSS REFERENCES
n/a

REVISIONS