

# NHS GREATER GLASGOW & CLYDE

## DIAGNOSTIC IMAGING, CLINICAL PHYSICS & NUCLEAR MEDICINE

### SINGLE SITE CT SCANNER BREAKDOWN

#### CLYDE SECTOR

This policy gives the general principles of the protocol to be used in the event of a single site CT scanner failure. Within the Clyde sector, there are 4 CT Scanners two at RAH, one at IRH and one at VOL

**IRH** and **VOL** are both single scanner sites.

**RAH** – denotes alternative site where Emergency IP or OP CT scans will be carried out.

#### **1A. IRH Scanner Breakdown**

The CT Radiographer in charge should immediately contact the Canon Service Dept. Telephone no. 0808 13 12 10 10 quoting system number 1KB1912163

The Radiologist supervising the CT list or the Radiology Hub (if failure occurs out of hours) will be informed.

The Lead Consultant Radiologist and Sector Superintendent will also be informed with an anticipated repair time. If it is thought likely that the breakdown may last for a significant period of time, then the following protocol be initiated.

- i. Consultant Radiologist/CT Radiographer communicates with the Lead Consultant at IRH (or in their absence, the consultant/s on for CT).
- ii. Using Appendix 1, the CT Radiographer and Radiologist will communicate the scanner breakdown to:
  - o Radiology Staff at all Clyde sites
  - o Key Wards and Departments including IRH Accident and Emergency Consultant in charge as listed in Appendix 1.
  - o ICU Consultant in charge
  - o The Receiving Medical & Surgical Consultants
  - o The A&E Consultant at the RAH
  - o The Site Controller (if OOH'S)

The On Call radiographer will contact only on site staff should the breakdown be discovered after 10pm. It will then be the responsibility of the A&E staff to communicate with RAH.

#### **1B. VOL Scanner Breakdown**

The CT Radiographer in charge should immediately contact the Canon Service Dept. Telephone no. **????** quoting system number **????**

The Radiologist supervising the CT list or the Radiology Hub (if failure occurs out of hours) will be informed.

The Lead Consultant Radiologist and Sector Superintendent will also be informed with an anticipated repair time. If it is thought likely that the breakdown may last for a significant period of time, then the following protocol be initiated.

- iii. Consultant Radiologist/CT Radiographer communicates with the Lead Consultant at VOL (or in their absence, the consultant/s on for CT).
- iv. Using Appendix 1, the CT Radiographer and Radiologist will communicate the scanner breakdown to:
  - o Radiology Staff at all Clyde sites
  - o Key Wards and Departments as listed in Appendix 2.
  - o **The Receiving Medical & Surgical Consultants**
  - o The A&E Consultant at the RAH
  - o The Site Controller (if OOH'S)

The On Call radiographer will contact only on site staff should the breakdown be discovered after 10pm. **It will then be the responsibility of referrer to communicate any urgent in-patient scans with RAH**

## **2. Process**

- All existing in-patients appointments are cancelled and rescheduled once the timescale of downtime is known.
- Depending on the time of the breakdown, Admin staff will endeavour to contact by telephone booked appointments to rearrange their appointment
- The radiographer in charge contacts other sites informing them of the situation as they may be required to help.
- A pro forma will be completed for all booked patients detailing their new appointments.

## **3. Contingency Instructions to Referrer**

**Neurosurgical emergencies:** Only if there is a definite neurosurgical issue, would the patient be transferred directly to neurosurgical care for scanning at the INS (after clinical discussion with the on call Neurosurgeon).

**Emergency Brain CT:** All other emergency brain CT scans will be performed at the RAH (following transfer of clinical care to the A&E Department at the RAH)

- o **General Surgical Emergencies** : If a body CT scan is absolutely required for the immediate surgical management of a patient then the patient would have to be transferred into the care of an RAH named consultant and the patient referred for the scan through the RAH radiology department as arranged above.
- o Where the clinical concern is of aortic aneurysm rupture, the case should be discussed directly between clinical staff and the receiving Glasgow Vascular Surgical Team.
- o **Other in-patients:** Await scanner being fixed or manage on clinical basis.

- **Urgent out-patients:** Await scanner being fixed or consider diverting appointments to other Clyde or Glasgow sites.
- **Routine out-patients:** Should not be affected but if necessary to reschedule appointments, a pro forma should be completed.

#### **4. Reporting a Scan**

Scans performed at RAH, IRH and VOL will be the responsibility of the CT list attending radiologist, or Radiology Hub, if out of hours.

#### **5. Transfer of Patient Following Scan**

Transfer will depend upon the outcome of the scan. Some patients will remain for treatment in **RAH**, the remainder returned to **IRH/VOL**.

It is the responsibility of the **named** clinical Consultant at **RAH** to provide appropriate clinical cover and where necessary, clinical decision making in the light of the scan findings, with due consultation with **IRH/VOL** clinical colleagues.

Should the patient require onward transfer then their care and transfer out of **RAH** is the responsibility of the named clinical team at **RAH**.

#### **6. Out of Hours Breakdown**

If the scanner has broken down during normal daytime either the CT radiographer or the Lead Consultant Radiologist must communicate with the Consultant on call for that night or the weekend that the scanner is not in service, and noted on Appendix 1/2 when they have been contacted. They should be advised of the protocol to be adopted with regard to communication with **IRH**.

#### **7. Return to service**

Using Appendix 1/2, all staff, wards and departments must be contacted to advise service has resumed.

#### **8. Cancelled Outpatients**

Patients who have been cancelled because of the scanner breakdown must be categorised in order of clinical priority. If the breakdown period is short, then best practice would be to fit them in existing **Clyde** lists as soon as possible.

Other options include: evening sessions; utilisation of available slots at other sites and/or GJNH.

This would require liaison with the Management Team, and co-ordinated by Office Manager, CT Radiographer and Site Lead Consultant.



## Appendix 1

### INVERCLYDE ROYAL HOSPITAL CT SCANNER BREAKDOWN COMMUNICATIONS CHECKLIST

THE FOLLOWING STAFF MUST BE CONTACTED AND ADVISED OF SCANNER  
BREAKDOWN & SCANNER SERVICE RESUMED

**BREAKDOWN DATE:**

STAFF TO BE CONTACTED	CONTACT BY EXT or PAGE NO.	PERSON RESPONSIBLE FOR CONTACTING RELEVANT STAFF	SIGNATURE OF PERSON CONTACTING RELEVANT STAFF	SERVICE RESUMED STAFF CONTACTED BY WHOM /WHEN
CONSULTANT RADIOLOGIST COVERING CT LIST.	CONTACT VIA SWITCHBOARD IF OOH'S	CT RADIOGRAPHER IN CHARGE		
CT RADIOGRAPHERS AT ALL SITES	<b>RAH CT:</b> 46391 <b>IRH CT:</b> 64844 or 64132 <b>VOL CT:</b> 27326	CT RADIOGRAPHER IN CHARGE		
<b>RECEIVING IRH</b> MEDICAL SURGICAL CONSULTANTS	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
IRH ICU CONSULTANT IN CHARGE	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
IRH A/E CONSULTANT	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
SITE SUPERINTENDENT DURING DAY	IRH 64915	CT RADIOGRAPHER IN CHARGE		
OUT OF HOURS RADIOLOGIST	CONTACT VIA SWITCHBOARD	CT RADIOGRAPHER		
OUT OF HOURS RADIOGRAPHER	Phone Numbers in Department	CT RADIOGRAPHER		
SITE CONTROLLER IF OUT OF HOURS	CONTACT VIA SWITCHBOARD	CT RADIOGRAPHER		

## Appendix 2

### VALE OF LEVEN HOSPITAL CT SCANNER BREAKDOWN COMMUNICATIONS CHECKLIST

THE FOLLOWING STAFF MUST BE CONTACTED AND ADVISED OF SCANNER  
BREAKDOWN & SCANNER SERVICE RESUMED

**BREAKDOWN DATE:**

STAFF TO BE CONTACTED	CONTACT BY EXT or PAGE NO.	PERSON RESPONSIBLE FOR CONTACTING RELEVANT STAFF	SIGNATURE OF PERSON CONTACTING RELEVANT STAFF	SERVICE RESUMED STAFF CONTACTED BY WHOM /WHEN
CONSULTANT RADIOLOGIST COVERING CT LIST.	CONTACT VIA SWITCHBOARD IF OOH'S	CT RADIOGRAPHER IN CHARGE		
CT RADIOGRAPHERS AT ALL SITES	<b>RAH CT:</b> 46391 <b>IRH CT:</b> 64844 or 64132 <b>VOL CT:</b> 27326	CT RADIOGRAPHER IN CHARGE		
<b>RECEIVING IRH</b> MEDICAL SURGICAL CONSULTANTS	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
IRH ICU CONSULTANT IN CHARGE	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
IRH A/E CONSULTANT	EXTENSION NUMBERS VIA SWITCHBOARD	RADIOLOGIST SUPERVISING LIST OR Radiology Hub		
SITE SUPERINTENDENT DURING DAY	IRH 64915	CT RADIOGRAPHER IN CHARGE		
OUT OF HOURS RADIOLOGIST	CONTACT VIA SWITCHBOARD	CT RADIOGRAPHER		
OUT OF HOURS RADIOGRAPHER	Phone Numbers in Department	CT RADIOGRAPHER		
SITE CONTROLLER IF OUT OF HOURS	CONTACT VIA SWITCHBOARD	CT RADIOGRAPHER		

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Agreed By:

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