



Radiology Department Administrative Policy and Procedure

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| Title: TRANSITION OF CARE/HANDOFF/SIGNOFF POLICY | Policy Number: RAD110 |
| Regulation Reference: | Title ACGME Effective Date: 04/04/2018 |

Policy Statement To establish a protocol and procedure standards within the Paul L Foster School of Medicine at Texas Tech University Health Sciences Center Department of Radiology residency and fellowship programs to ensure the quality and safety of patient care when transfer of responsibility occurs during duty hours shift changes.

Procedure

Definition and Scope:

A transition of care/handoff/signoff procedure is defined as the communication of information to support the transfer of care and responsibility for a patient(s) imaging studies or image-guided interventions. The transition/handoff/signoff process is an interactive communication process of passing specific, relevant, essential patient information from one caregiver to another. Transition of care occurs regularly under the following conditions:

Policy

The transition /handoff/signoff process must involve face-to-face or with both verbal/written/electronic communication. The transition process should include, at a minimum, the following information in a standardized format that is universal across the institution:

1. Identification of patient, including name, medical record number or date of birth.
2. Identification of requesting physician or physician that will need report back.
3. Diagnosis.
4. Recent imaging studies or interventions, drug interactions that may affect study, relevant lab tests, allergic reaction to contrast material, anticipated studies, procedures or interventions and actions to be taken.
5. Each handoff process must be conducted discretely and free of interruptions.

The scheduling and transition/handoff/signoff procedures ensure that:

1. Residents do not exceed the 80-hour per week duty limit averaged over 4 weeks.
2. Faculty is scheduled and available for appropriate supervision levels according to the requirements for the scheduled Residents.
3. All parties involved in a particular program and/or transition process have access to one other's schedules and contact information. All call schedules are available via QGenda to subscribers and nonsubscribers and to hospital operators.
4. Patient care is not endangered in any way by frequent transitions in their care.
5. All parties directly involved in the patient care before, during, and after the transition has occurred have the opportunity for communication, consultation, and clarification of information.
6. Safeguards exist for coverage when unexpected changes in patient care may occur due to circumstances such as resident illness, fatigue, or emergency.

In addition, it is the policy of the Department of Radiology that Residents contact Faculty immediately when a significant finding is noted and appropriate documented communication is conveyed to patient care team.

Approval authority:

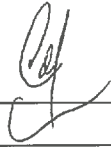
This policy is approved by the Chairman of the Department of Radiology



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Responsibility and Revisions:

The Chairman of the Department of Radiology and the Radiology Residency Program Director will review and initiate revision on this policy when necessary.

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| Policy Number: RAD110 | Original Approval Date: 04/04/2018 |
| Version Number: 01 | |
| Signatory approval on file by: | Jesus E. Calleros-Macias, M.D. Acting Chair of Radiology Texas Tech University Health Sciences Center El Paso <div style="text-align: right; margin-top: 10px;">  </div> |