HULL UNIVERSITY HOSPITALS NHS TRUST

Referral Criteria for Medical CT Radiation Exposures Vascular Referrals excluding Neuro & Cardiac

The Ionising Radiation (Medical Exposure) Regulations 2017

Document Control						
Reference No:	2.1		First published:	February 2016		
Version:	4		Current Version Published:	August 2023		
Lead IRMER Practitioner:	Dr N	Maliakal	Review Date:	August 2026		
Document Managed Name:	Mr S	Stephens	Ratification Committe	ee: CT Management Team		
Document Managed Title:	I by Man Rad	Speciality lager lation Protection ervisor	Date EIA Completed:	August 2023		
Consultation Process						
Advice, Guidance an	d agreemer	nt sought from:				
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Key words (to aid intranet searching)						
Target Audience Clinical Staff						
Managers			sing Staff	Medical Staff		
Version Control						
	Version			ision description		
01/05/2018 2		Andrew Stephens Review and general update.		l update.		
14/07/2020 3		Andrew Stephens	Review and general update.			
21/08/2023 4		Andrew Stephens	Review and general update.			

INTRODUCTION

This document is written to ensure that departmental process conforms with the Ionising Radiation (Medical Exposure) Regulations 2017 (IRMER 2017).

PURPOSE

Referral Criteria:. This document ensures the CT department is compliant with regulation 6(5a) of the Ionising Radiation (Medical Exposure) Regulations 2017.

It provides advice for referrers of patients for x-ray examinations to the CT department at Hull University Teaching hospitals NHS Trust.

Valid clinical indications are listed but are not exhaustive.

Referrers are also advised to access I refer through e learning for health.

(http://www.e-lfh.org.uk/home)

Or discuss with a Consultant Radiologist

PROCEDURES

History	Scan Request	Question needing to be answered
TIAs / Stroke / Neck Pain	Carotid Angio / Neck	Consider Duplex First and D/w Radiologist ? Carotid artery stenosis / dissection ? Intramural Haematoma
Neck swelling, engorging neck vessels	Chest	? SVC Obstruction
Chest pain / Unequal BP in arms/ dilated Aorta on CXR / ECG changes	Chest / Thoracic Aorta	? Thoracic Aorta Aneurysm / Dissection / Rupture / Penetrating ulcer
Abdominal Pain, low BP, pulsatile mass, abdominal swelling	Abdomen / Abdominal Aorta	? Abdominal Aorta Aneurysm / Dissection / Rupture
Young or upper limb only hypertension. Suggestive plain CT or CXR. Possible recurrence post repair.	Thoracic Aorta	? Coarctation
Dilated Aortic Root	Thoracic Aorta	? Suitable for repair
Enlarging AAA on U/S;	Abdomen / Abdominal Aorta	? Abdominal Aortic Aneurysm suitable for EVAR / surgical repair
Known Aortic Aneurysm / Dissection	Thoracic Aorta	Surveillance ? Intervention required
Known Aortic Aneurysm / Dissection	Abdomen / Abdominal Aorta	Surveillance ? Intervention required
Patient for living renal donation	Renal Donor Assessment	Assessment of vascularity and integrity of potential donor kidney.
For DIEA breast reconstruction surgery. MRI contraindicated	Abdomen	Assessment of abdominal perforator vessels
	Abdomen / Abdominal Aorta	? GI Bleed
Abdo Pain, PR Bleed, Anaemia, Low Hb		

CT IRMER Procedures

History	Scan Request	Question needing to be answered
EVAR Procedure to Thoracic Aorta	Chest / Thoracic Aorta	? Position of stent / ? Leaking stent
EVAR Procedure to Abdominal Aorta	Abdomen / Abdominal Aorta	? Position of stent / ? Leaking stent
EVAR Procedure to Thoracic Aorta. Pyrexial, Raised WCC, Pain	Chest / Thoracic Aorta	? Infected stent
EVAR Procedure to Abdominal Aorta. Pyrexial, Raised WCC, Pain	Abdomen / Abdominal Aorta	? Infected stent
Prostate Ca	Pelvic Angiogram	? Suitable for vascular embolisation
Mandibular Ca, for reconstruction	Lower limb angiogram	Vascular anatomy pre Trumatch surgery.
Peripheral Artery Disease; Ischemic lower limb; Claudication	Lower limb angiogram	? Occluded / stenosed lower limb artery

PROCESS FOR MONITORING COMPLIANCE

Regular audit shall take place to ensure referrers are providing radiology with sufficient clinical history to justify CT examination. Results shall be presented to CTMT / RPA

REFERENCES

Royal College of Radiologists (2012) iRefer 7th Ed. Royal College of Radiologists Online available from http://portal.e-lfh.org.uk/myElearning/Index?HierarchyId=0_28429 accessed 18/01/2016 London.