

Questions for Stakeholder Engagement
Radiological Service and Interventional Radiology
To be Held September 10, 2019

1. What are the pros and cons of separating the radiological service regulations into diagnostic medical imaging (a basic service) and interventional radiology (a supplemental service)?
2. California Code of Regulations, Title 22, section 70251. Radiological Service Definition reads in part, “Radiological service means the use of X-ray, other external ionizing radiation, and/or thermography, and/or ultrasound in the detection, diagnosis and treatment of human illnesses and injuries...” What forms of imaging and/or treatment should be included in the updated version of this regulation? Please state whether the item should be required or optional, and why.
3. How can the current regulations be adjusted to take into account evolving technologies that are not yet widely available in hospitals?
4. California law currently requires all hospital building standards to be located in Title 24. Given the Office of Statewide Health Planning and Development’s (OSHPD’s) jurisdiction over building standards, what functional space requirements should CDPH address in the new radiological service regulations?
5. What features should a modern CT suite have?
6. What special safety considerations apply to CT that do not apply to other forms of external beam radiation?
7. When an off-site radiologist performs a reading of an image, what should the process be for verifying the reading?
8. California Code of Regulations, Title 22, section 70255(c) reads, “There shall be at least one person on duty or on call at all times capable of operating radiological equipment.” How should this requirement be adjusted for modern imaging technologies, if at all?
9. What safety concerns are unique to the MRI suite?
10. What are the primary responsibilities of the magnetic resonance safety officer (MRSO)?
11. How are resuscitation procedures modified for patients who go into cardiopulmonary arrest while in the bore of the MRI machine?

12. What is the difference between safety requirements for staff who work in zones III and IV (including support staff such as housekeeping) of the MRI suite and staff who work only in zones I and II? (For the purposes of this question, please use the definitions of safety zones found in the handout, "American College of Radiology Magnetic Resonance Imaging Safety Zones.")
13. National guidelines divide rooms used for IR into three categories: diagnostic imaging rooms, procedure rooms and operating rooms. What factors do hospitals use to decide which kind of procedures are appropriate for which type of room?
14. When the cardiac catheterization lab is used for interventional radiology procedures, does each specialty provide its own nursing and technical staff or are staff cross-trained to work in both specialties?
15. How does the hospital ensure that someone can operate the imaging equipment if the technician becomes incapacitated during an IR procedure?
16. What challenges do small and rural hospitals face when meeting radiological service requirements?
17. Do you have any additional suggestions or comments related to regulations for diagnostic medical imaging services or interventional radiology services provided in a hospital?