

Standards of Practice, 2018

College of Medical Radiation
Technologists of Ontario



College of
Medical Radiation
Technologists of
Ontario

Ordre des
technologues en
radiation médicale
de l'Ontario

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Introduction

The Standards of Practice have been developed by the College of Medical Radiation Technologists of Ontario (CMRTO or the “College”) to describe the expectations for professional practice of members of the College. The Standards of Practice describe what each member is accountable and responsible for in practice. They represent performance criteria for members and can be used to interpret the scope of practice to the public and other health care professionals.

In the Standards of Practice, “members” refers to all members of the CMRTO; that is, members in all of the five specialties: radiography, radiation therapy, nuclear medicine, magnetic resonance and diagnostic medical sonography.¹ In the Standards of Practice, “profession” refers to the profession of medical radiation technology, which includes all of the five specialties: radiography, radiation therapy, nuclear medicine, magnetic resonance and diagnostic medical sonography.

The Standards of Practice reflect the knowledge, skills and judgement that members need in order to perform the services and procedures that fall within the scope of practice of the profession.

The *Regulated Health Professions Act* and the companion health profession Acts govern the practice of regulated health professions in Ontario. For this profession, the companion Act is the *Medical Radiation Technology Act* (MRT Act). The *Medical Radiation Technology Act* sets out the scope of practice statement for the profession, as follows:

“The practice of medical radiation technology is the use of ionizing radiation, electromagnetism and other prescribed forms of energy for the purposes of diagnostic and therapeutic procedures, the evaluation of images and data relating to the procedures and the assessment of an individual before, during and after the procedures.”

By regulation made under the *Medical Radiation Technology Act*, soundwaves for diagnostic ultrasound have been prescribed as a form of energy. This means that the practice of medical radiation technology includes the use of soundwaves for diagnostic ultrasound for the purpose of diagnostic procedures, the evaluation of images and data relating to the procedures and the assessment of an individual before, during and after the procedure.

The *Medical Radiation Technology Act* also sets out which of the controlled acts as set out in the *Regulated Health Professions Act*, members are authorized to perform. These are known as authorized acts. The *Medical Radiation Technology Act* states:

¹As of January 1, 2018, the profession of medical radiation technology includes, as a fifth specialty, diagnostic medical sonography

“In the course of engaging in the practice of medical radiation technology, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to perform the following:

- 1. Administering substances by injection or inhalation.**
- 2. Tracheal suctioning of a tracheostomy.**
- 3. Administering contrast media, or putting an instrument, hand or finger,**
 - Beyond the opening of the urethra,**
 - Beyond the labia majora,**
 - Beyond the anal verge, or**
 - Into an artificial opening of the body.**
- 4. Performing a procedure on tissue below the dermis.**
- 5. Applying a prescribed form of energy.”**

The Standards of Practice are intended to be generic. The indicators that follow each Practice Standard indicate the application of the Practice Standard in a specific dimension of practice. Most indicators refer to tasks that are common to all members. Indicators that refer to tasks generally performed only by members in one of the specialties are listed under separate headings. The methods for implementing each task may be determined by departmental policies and procedures.

In the event that the Standards of Practice set a standard that is higher than departmental policy or procedure, the member must comply with the standard set by the Standards of Practice. In the Standards of Practice, the term “legislation” refers to both statutes and regulations.

Under the College’s Standards of Practice, members of the College are expected to be:

Competent: meaning to have the necessary knowledge, skills and judgement to perform safely, effectively and ethically and to apply that knowledge, skill and judgement to ensure safe, effective and ethical outcomes for the patient. This means that members must maintain competence in their current area of practice, must refrain from acting if not competent, and must take appropriate action to address the situation.

Accountable: meaning to take responsibility for decisions and actions, including those undertaken independently and those undertaken as a member of a team. This means that members must accept the consequences of their decisions and actions and act on the basis of what they, in their clinical judgement, believe is in the best interests of the patient. Members must take appropriate action if they feel these interests are being unnecessarily and unacceptably compromised. This includes not implementing ordered procedures or treatment plans that, from their perspective, appear to be contraindicated, and in this event, taking appropriate action to address the situation.

Collaborative: meaning to work with other members of the health care team to achieve the best possible outcomes for the patient. This means members are responsible for communicating and coordinating care provision with other members of the health care team, and taking appropriate action to address gaps and differences in judgement about care provision.

Schedule 6 of Bill 160, *Medical Radiation and Imaging Technology Act, 2017* (MRIT Act), if and when it is proclaimed in force, will change, among other things, the name of the College, the definition of the profession and the scope of practice statement for the profession. The name of the College will become the College of Medical Radiation and Imaging Technologists of Ontario. The profession will be defined as the medical radiation and imaging technology profession.

The scope of practice statement for the profession will be as follows:

“The practice of medical radiation and imaging technology is the use of ionizing radiation, electromagnetism, soundwaves and other prescribed forms of energy for the purposes of diagnostic or therapeutic procedures, the evaluation of images and data relating to the procedures and the assessment of an individual before, during and after the procedures.”

There are other amendments that will be made by the MRIT Act if and when it comes into force. The College will update or replace the Standards of Practice at that time.

1. Legislation, Standards and Ethics

In order to be registered as a member of the College of Medical Radiation Technologists of Ontario, members must meet the professional education and other registration requirements set by the College. They must continue to educate themselves about practical, legal, ethical and other matters pertaining to the profession. Members must be competent, accountable and collaborative in their practice.

Practice Standard: Members must understand, and adhere to, the legislation governing the practice of the profession, the Standards of Practice set by the College, the Code of Ethics and the by-laws of the College.

Indicators

Members must:

- a. have the knowledge, skills and judgement to perform procedures undertaken in the course of the practice of the profession
- b. take responsibility for decisions and actions, including those undertaken independently and those undertaken as a member of the team
- c. work with other members of the health care team to achieve the best possible outcomes for the patient

- d. adhere to all relevant provincial and federal legislation and guidelines governing the practice of the profession
- e. adhere to the Standards of Practice set by the College
- f. adhere to the Code of Ethics and the by-laws of the College
- g. adhere to all regulations made under the *Medical Radiation Technology Act* including:
 - i. Quality Assurance
 - ii. Registration
 - iii. Professional Misconduct
 - iv. Advertising

2. Equipment and Materials

The practice of members entails the use of a wide range of equipment and materials. Members must know and understand the functions, capabilities, specifications and hazards of the equipment and materials they use in the course of their practice.

Practice Standard: Members must have the knowledge, skills and judgement to select the appropriate equipment and materials for procedures ordered by a physician or other authorized health professional, to make determinations as to the quality, serviceability and operability of the equipment and materials, and to take any corrective actions required to meet standards set by legislation, facility policies and manufacturers' guidelines. Members must be skilled in making safe, efficient and effective use of resources to produce the desired examination information or deliver safe, effective treatment.

Indicators

Members must:

- a. ensure the room is prepared for the procedure specified in the order
- b. select and set up the equipment and materials needed for the procedure specified in the order
- c. select the correct substances to be administered orally, by injection or inhalation, or into the body through an orifice
- d. prepare diagnostic or therapeutic substances as required
- e. conduct the required quality control tests, or ensure that the required quality control tests have been conducted, on each piece of equipment and any materials used in the ordered procedure, according to the applicable legislation and the facility policies and manufacturers' guidelines

- f. ensure that the results of quality control tests are acceptable
- g. if quality control tests are not within acceptable limits, take corrective action to ensure that the standards set by legislation, facility policies and manufacturers' guidelines are met
- h. determine the quality, serviceability, and operability of the equipment and materials to be used in the procedure in accordance with the standards set by legislation, facility policies and manufacturers' guidelines, and if the standards are not met, take corrective action
- i. determine, set and verify the technique and protocol to be used in the procedure
- j. verify all required immobilization and/or beam modification devices
- k. make use of appropriate shielding devices

In addition, members in the specialty of radiation therapy must:

- l. prepare or construct immobilization or personalized devices and/or beam modification devices as required

In addition, members in the specialty of magnetic resonance must:

- m. administer and follow the necessary safety precautions for entry to the magnet room

In addition, members in the specialty of nuclear medicine and radiation therapy must:

- n. dispose of expired, unused or contaminated eluate, radioactive materials and all administrative devices in accordance with legislation and established safety protocols
- o. store radiopharmaceuticals and radioactive materials according to manufacturers' specifications

In addition, members in the specialty of diagnostic medical sonography must:

- p. clean and/or reprocess transducers, or ensure that transducers are cleaned and/or reprocessed, after each patient use in accordance with the manufacturers' guidelines, other applicable guidelines and the facility policies
- q. use, store and dispose of ultrasound gel and gel containers in accordance with applicable guidelines and the facility policies

3. Diagnostic and Therapeutic Procedures

Members employ ionizing radiation, radiopharmaceuticals, electromagnetism and soundwaves to create images and data that are part of diagnostic imaging examinations or that are used for defining and recording treatment parameters. These images may be dynamic, on film, digital displays, three-dimensional models or templates. Members in the specialties of radiation therapy and nuclear medicine administer ionizing radiation to treat cancer and other diseases.

Members who apply ionizing radiation do so under the authority of and in accordance with the *Healing Arts Radiation Protection Act* and, where applicable, the *Nuclear Safety and Control Act* and their respective regulations. Members are permitted to apply electromagnetism for magnetic resonance imaging under an exemption set out in the Controlled Acts regulation made under the *Regulated Health Professions Act*. Members are also permitted to apply soundwaves for diagnostic ultrasound under an exemption set out in the Controlled Acts regulation made under the *Regulated Health Professions Act*.

Members perform five controlled acts, which they are authorized to perform under the *Medical Radiation Technology Act*. These are:

- a. administering substances by injection or inhalation;
- b. tracheal suctioning of a tracheostomy;
- c. administering contrast media or putting an instrument, hand or finger,
 - i. beyond the opening of the urethra,
 - ii. beyond the labia majora,
 - iii. beyond the anal verge, or
 - iv. into an artificial opening of the body;
- d. performing a procedure on tissue below the dermis; and
- e. applying a prescribed form of energy.

Practice Standard: Members must be able to create images and data that are sufficiently accurate and clear for the diagnostic or therapeutic procedures that are ordered by a physician or other authorized health professional. In the case of procedures that use ionizing radiation, members use only the minimum amount of radiation necessary during the course of the procedure. Members performing procedures using soundwaves for diagnostic ultrasound use the minimum acoustic power output and minimum exposure time. Members must be proficient in evaluating the images, data and tests relating to the procedures to ensure that the images, data and tests are satisfactory.

Members must be able to administer ionizing radiation, radiopharmaceuticals, electromagnetism for magnetic resonance imaging and soundwaves for diagnostic ultrasound accurately and in accordance with the order of the physician or other authorized health professional for the diagnostic or therapeutic procedure and the applicable legislation. Members must not apply or administer ionizing radiation or radiopharmaceuticals unless the conditions under the applicable legislation (including without limitation, the *Healing Arts Radiation Protection Act* and its regulations and the *Nuclear Safety and Control Act*, its regulations and licences issued thereunder) have been met.

Under the *Medical Radiation Technology Act*, members are authorized to perform five controlled acts (“authorized acts”) as required in the course of engaging in the practice of the profession. They must not perform the authorized acts or any exempted controlled act unless the conditions under the *Regulated Health Professions Act*, the *Medical Radiation Technology Act* and their respective regulations, and the Standards of Practice have been met.

Indicators

Members must:

- a. perform procedures involving the application or administration of ionizing radiation only when the conditions under the applicable legislation have been met (This includes, without limitation, the *Healing Arts Radiation Protection Act* and its regulations and the *Nuclear Safety and Control Act*, its regulations and licences issued thereunder)
- b. perform only those controlled acts that have been authorized or exempted or excepted under the legislation or delegated in accordance with the legislation and the Standards of Practice²
- c. perform authorized acts or delegated or exempted controlled acts only when the conditions under the legislation and the Standards of Practice have been met
- d. ensure that the appropriate order authorizing the performance of the procedure is in place:
 - i. for application of ionizing radiation: the order must be from a physician or other authorized health professional listed in the *Healing Arts Radiation Protection Act* or regulations
 - ii. for nuclear medicine procedures: the order must be from a person authorized under the regulations made under the *Public Hospitals Act* or in accordance with the generally accepted professional standards established under the *Independent Health Facilities Act*

²Members may accept delegation of other procedures that are controlled acts under the *Regulated Health Professions Act* and not authorized to members under the *Medical Radiation Technology Act* provided they comply with the *Regulated Health Professions Act* and the Standards of Practice as set out in Practice Standard 6, Professional Relationships.

- iii. for application of electromagnetism for magnetic resonance imaging procedures: the order must be from a physician or another authorized health professional listed in the Controlled Acts regulation made under the *Regulated Health Professions Act*, and in accordance with that regulation
 - iv. for application of soundwaves for diagnostic ultrasound procedures: the order must be from a physician or another authorized health professional listed in the Controlled Acts regulation made under the *Regulated Health Professions Act*, and in accordance with that regulation
 - v. for authorized acts (other than the application of electromagnetism for magnetic resonance imaging procedures or the application of soundwaves for diagnostic ultrasound procedures): the order must be from a physician
- e. perform procedures, including authorized acts, only in the course of engaging in the practice of the profession
 - f. not perform procedures contrary to any terms, conditions or limitations placed upon the member's certificate of registration
 - g. have and apply the necessary knowledge, skills and judgement to perform and manage the outcomes of performing the procedure safely, effectively and ethically
 - h. ensure that patient consent has been obtained
 - i. be responsible and accountable for performing the procedure and managing the outcomes having considered:
 - i. the known risks to the patient in performing the procedure
 - ii. the predictability of the outcomes in performing the procedure
 - iii. whether the management of the possible outcomes is within the member's knowledge, skill and judgement given the situation
 - iv. any other factors specific to the situation to ensure the procedure is implemented safely, effectively and ethically
 - j. not perform any procedure or provide any advice which may result in serious bodily harm unless that procedure or advice is within the scope of practice of the profession or the member is authorized or permitted to do so by legislation
 - k. position the patient as required for the diagnostic or therapeutic procedure
 - l. ensure the area to be diagnosed or treated will be displayed on the resultant image or captured electronically
 - m. use radiation protection devices and other patient protection devices as required
 - n. instruct the patient on breathing and movement procedures

- o. ensure that the orientation of the body and other pertinent parameters are marked correctly on the images and data
- p. ensure the exposure provides optimum image quality while using minimal radiation
- q. ensure examination results (images and data) provide all the information requested in the order
- r. carry out the procedures ordered
- s. assess the patient's condition before, during and after the procedure or course of treatment
- t. respond to any change in the patient's condition during or after the procedure or course of treatment
- u. complete the procedure, advise the patient of any post-procedural care, and transfer the care of, or release, the patient

In addition, members in the specialty of radiography, nuclear medicine, magnetic resonance and diagnostic medical sonography must:

- v. determine if the images and/or data are of sufficient diagnostic quality or if additional or repeat images are necessary

In addition, members in the specialty of magnetic resonance must:

- w. perform procedures involving the application of electromagnetism for magnetic resonance imaging only when the conditions under the *Regulated Health Professions Act*, the *Medical Radiation Technology Act* and their respective regulations have been met

In addition, members in the specialty of diagnostic medical sonography must:

- x. perform procedures involving the application of soundwaves for diagnostic ultrasound only when the conditions under the *Regulated Health Professions Act*, the *Medical Radiation Technology Act* and their respective regulations have been met
- y. use the minimum acoustic power output and minimum exposure time to obtain the optimum image quality and the necessary clinical information

In addition, members in the specialty of radiation therapy must:

- z. develop and/or interpret a treatment plan for each patient
- aa. calculate treatment doses and duration of administration
- bb. ensure use of record and verification systems

- cc. identify the treatment field and treatment volumes
- dd. determine if the image verifies treatment parameters or if a repeat image is necessary
- ee. assess and match the treatment verification image with the reference image and make required adjustments to patient position
- ff. select and/or verify treatment parameters
- gg. administer treatment

4. Safe Practice

Members operate equipment, apply ionizing radiation, electromagnetism for magnetic resonance imaging and soundwaves for diagnostic ultrasound, and administer radiopharmaceuticals. All of these could be dangerous if used incorrectly. Members endeavour, at all times and in every aspect of their practice, to reduce the risk of harm to their patients, to themselves, to their colleagues and to any other individuals who may be present in the practice environment.

Practice Standard: Members must have and maintain the knowledge, skills and judgement to practise safely by adhering to all relevant provincial and federal legislation and guidelines, departmental protocols and policies and manufacturers' directions pertaining to health and safety. In the event of any unexpected problems or emergencies, members must be competent and prepared to handle or to assist in the management of the situation.

Indicators

Members must:

- a. observe all departmental and facility policies and relevant provincial and federal legislation and guidelines pertaining to health and safety, such as:
 - i. *Regulated Health Professions Act* and its regulations
 - ii. *Medical Radiation Technology Act* and its regulations
 - iii. *Public Hospitals Act* and its regulations
 - iv. *Independent Health Facilities Act* and its regulations
 - v. *Healing Arts Radiation Protection Act* and its regulations
 - vi. *Occupational Health and Safety Act* and its regulations
 - vii. *Nuclear Safety and Control Act* and its regulations and licences issued thereunder
 - viii. *Radiation Emitting Devices Act* and its regulations
 - ix. *Transportation of Dangerous Goods Act* and its regulations
 - x. *Health Protection and Promotion Act* and its regulations
 - xi. Health Canada's Technical Reports and Publications, including:
 - Safety Code 20A – X-Ray Equipment in Medical Diagnosis Part A: Recommended Procedures for Installation and Use, 1980

- Safety Code 26 – Guidelines on exposure to Electromagnetic Fields from Magnetic Resonance Clinical Systems, 1987
 - Safety Code 30 – Radiation Protection in Dentistry, 1999
 - Safety Code 36 – Radiation Protection in Mammography: Recommended Safety Procedures for the Use of Mammographic X-Ray Equipment, 2013
 - Safety Code 35 – Safety Procedures for the Installation, Use and Control of X- Ray Equipment in Large Medical Radiological Facilities, 2008
- xii. As Low As Reasonably Achievable (ALARA) principle
- b. conduct the appropriate quality control tests, or ensure that the appropriate quality control tests have been conducted, for all equipment and substances to be used in the diagnostic or therapeutic procedure
 - c. take corrective action if quality control tests are not within acceptable limits
 - d. use substances only before their expiry time or date
 - e. verify the patient's identity for all diagnostic or therapeutic procedures
 - f. prior to performing the procedure, ascertain whether there are any contraindications to the procedure, including pregnancy for procedures involving ionizing radiation, and notify the patient's physician, authorized health professional, radiologist, nuclear medicine physician, cardiologist or radiation oncologist of any contraindications and obtain direction to proceed, modify or halt the procedure
 - g. prior to administering a substance orally, by injection or inhalation, or into the body through an orifice, ascertain whether there are any contraindications to administering the substance to the patient and make necessary explanations, or referrals or implement necessary restrictions
 - h. assess the patient's physical and emotional limitations and ensure that the patient will not be expected to perform any task or movement that would cause physical harm
 - i. take all reasonable precautions to ensure that no equipment can injure a patient
 - j. use the ALARA principle to minimize patient exposure to radiation and soundwaves for the procedure
 - k. use shielding/protective devices where indicated
 - l. initiate emergency response procedures, notify a physician (if possible) and assist in, or carry out, emergency treatment as required if a patient suffers any adverse reaction to treatment or to administered substances
 - m. use appropriate aseptic techniques and infection control procedures in the course of the diagnostic or therapeutic procedure

- n. protect themselves, their colleagues, other members of the health care team, any other individuals who may be present as well as any patient from any unnecessary exposure to radiation
- o. ensure all positioning aids and immobilization devices maintain the patient's position appropriate to the diagnostic or therapeutic procedure according to departmental or facility policy
- p. assess the patient's condition before, during and after the course of treatment or procedure
- q. where appropriate, remove markers and accessory equipment/devices before the patient is released

In addition, members in the specialty of magnetic resonance must:

- r. ensure that there are no contraindications present that could harm the patient or would exclude the patient from having the examination
- s. ensure that all equipment and devices, both patient-specific and accessory, are MR compatible before being brought into the MR area
- t. administer and follow the necessary safety precautions for entry to the magnet room to protect themselves, the patient, their colleagues, other members of the health care team and any other individuals who may be present

In addition, members in the specialty of nuclear medicine must:

- u. conduct personal and area contamination monitoring
- v. decontaminate where necessary in accordance with any licence(s) issued under the *Nuclear Safety and Control Act*
- w. use appropriate personal protection equipment when handling radioactive materials in accordance with any licence(s) issued under the *Nuclear Safety and Control Act*

In addition, members in the specialty of radiation therapy must:

- x. label and orient all patient-specific ancillary equipment

5. Relationship with Patients

Members have patient care as their main concern.

Practice Standard: Members must maintain clear and professional boundaries in relationships with patients and treat all patients with dignity and respect. Members must have the knowledge, skills and judgement to avoid placing patients at unnecessary risk of harm, pain or distress. Members must be able to provide appropriate responses to patient inquiries about procedures and related issues, and accept the patient's autonomy and the right of the patient or the patient's substitute decision maker to consent to or refuse service. Members must understand how and act to protect the confidentiality of all professionally acquired information about patients and the privacy of patients with respect to that information, while facilitating the effective delivery of health care.

Indicators

Members must:

- a. provide clear and understandable information to the patient or patient's substitute decision maker prior to, during and after the diagnostic or therapeutic procedure, using an interpreter if necessary
- b. give the patient or patient's substitute decision maker an opportunity to ask questions
- c. provide the patient or patient's substitute decision maker with answers to their questions within the scope of the profession's responsibility
- d. refer questions of the patient or patient's substitute decision maker that are outside the scope of the profession's responsibility to an appropriate health professional for answers
- e. carry out diagnostic or therapeutic procedures only with the informed consent of the patient or the patient's substitute decision maker
- f. treat the patient with dignity and respect and in accordance with the Code of Ethics of the College
- g. make modifications to procedures based on the patient's physical, medical and/or emotional status and needs, based on the member's assessment of the patient's physical, medical and/or emotional status and needs
- h. instruct the patient to remove only the clothing and items that will interfere with the diagnostic or therapeutic procedures
- i. provide the patient with a gown or sheet to cover areas where clothing was removed
- j. explain to the patient when and where the member might touch them and why

- k. touch the patient in only those areas needed to facilitate carrying out the procedure
- l. keep all patient information confidential except when necessary to facilitate diagnosis or treatment of the patient, or when legally obliged or allowed to disclose such information
- m. comply with any applicable privacy legislation such as the *Personal Health Information Protection Act* and its regulations
- n. comply with all relevant legislation such as the *Health Care Consent Act*
- o. comply with the *Regulated Health Professions Act* pertaining to the prevention of sexual abuse and the College's sexual abuse prevention program

6. Professional Relationships

Professional relationships in health care settings are based on mutual trust and respect, and result in improved patient care.

Practice Standard: Members must be able to practise effectively within interprofessional care teams to achieve the best possible outcomes for the patient. Members are responsible for communicating about and coordinating care provision with other members of the team, and must be able to take the appropriate action to address gaps and differences in judgement about care provision.

Members may accept the delegation of controlled acts under the *Regulated Health Professions Act* not authorized to members under the *Medical Radiation Technology Act*, provided they comply with the *Regulated Health Professions Act* and the Standards of Practice. Members cannot delegate to other individuals controlled acts authorized to members under the *Medical Radiation Technology Act*.

Indicators

Members must:

- a. use a wide range of communication and interpersonal skills to effectively establish and maintain professional relationships
- b. demonstrate an understanding of and respect for the roles, knowledge, expertise and unique contribution by other members of the health care team for the provision of quality care
- c. share knowledge with other members of the health care team to promote the best possible outcomes for patients

- d. collaborate with other members of the health care team for the provision of quality care
- e. participate effectively in interprofessional team meetings
- f. resolve concerns about an order or treatment plan by:
 - i. discussing the concern directly with the responsible health professional
 - ii. providing a rationale and best practice evidence in support of the concern
 - iii. identifying outcomes desired for resolution
 - iv. documenting the concern and steps taken to resolve it in the appropriate record
- g. perform controlled acts not authorized to members under the *Medical Radiation Technology Act*, based on delegation, only when the following conditions have been met:
 - i. the health professional who is delegating the controlled act (the delegator) is a member of a regulated health profession authorized by their health profession Act to perform the controlled act
 - ii. the delegator is acting in accordance with any applicable legislation and any guidelines and policies of their regulatory body governing delegation, and has not been restricted or prohibited from delegating the controlled act
 - iii. the delegator has the knowledge, skills and judgement to perform and delegate the controlled act
 - iv. the member has the knowledge, skills and judgement to perform the controlled act delegated to them safely, effectively and ethically given the circumstances of the situation
 - v. a written record of the transfer of authority (delegation) and certification of the member's competence is maintained
 - vi. the member complies with any conditions established by the delegator in order for the member to maintain the authority to perform the controlled act
 - vii. patient consent has been obtained
 - viii. the appropriate order authorizing the performance of the controlled act delegated to the member is in place

7. Records and Reporting

Creating and maintaining records and reports are essential components of the professional practice of members. Members' records and reports provide information to other health care professionals about relevant aspects of patient care, treatment and assessment.

Practice Standard: Members must be proficient in creating records, charts, incident and other reports that attest to the diagnostic, treatment, quality assurance, workplace and patient safety procedures that have been carried out. Members must have the knowledge, skills and judgement to record information that will adequately identify the subjects of all the images and data they create and treatments they administer. Members must produce records and reports that are accurate, complete, legible and timely.

Indicators

Members must:

- a. record results of quality control tests
- b. record and report any equipment faults or problems
- c. record and notify the patient's physician, authorized health professional, radiologist, nuclear medicine physician, cardiologist or radiation oncologist of any allergies, abnormal test results, pregnancy or other contraindications to the ordered procedure
- d. mark all images and data with the patient's identity
- e. ensure all images and data are archived according to principles and guidelines established by the employment facility
- f. record the patient's reactions to the treatment or procedure or any administered substances
- g. record all pertinent aspects of patient care and all procedures performed, including emergency treatments and descriptions of, and reasons for, any deviations from standard procedures on order forms, treatment prescriptions, patient health records or other relevant documentation
- h. forward patients' records, images and pertinent data to appropriate recipients
- i. record and inform the patient and/or members of the health care team of any follow-up care required

In addition, members in the specialty of nuclear medicine and radiation therapy must:

- j. record results of radiopharmaceutical assays, quality control and other tests, radioactive preparations and disposal methods of radioactive materials

In addition, members in the specialty of nuclear medicine must:

- k. record receipt and disposal of radiopharmaceuticals, generators and radioactive materials
- l. label radiopharmaceutical preparations
- m. maintain radiopharmaceutical and pharmaceutical dispensing records

In addition, members in the specialty of radiation therapy must:

- n. record and communicate any concerns regarding the treatment or treatment prescription to the appropriate radiation oncology personnel

In addition, members in the specialty of diagnostic medical sonography must:

- o. record and communicate their observations and technical impressions regarding the diagnostic ultrasound procedure to the reporting health professional

8. Continuing Competence

Members must maintain competence in their current area of practice and continually improve their competence in order to respond to changes in practice environments, advances in technology and the changing health care environment.

Practice Standard: Members must have, maintain and apply the necessary knowledge, skills and judgement to ensure safe, effective and ethical outcomes for the patient. Members must maintain competence in their current area of practice and must refrain from acting if not competent. Members must obtain and maintain the necessary knowledge, skills and judgement to respond to changes in practice environments, advances in technology and other emerging issues. Members must participate in the College's Quality Assurance Program as part of maintaining and improving their competence.

Indicators

Members must:

- a. maintain competence and refrain from performing activities that the member is not competent to perform
- b. maintain and apply current and relevant scientific and professional knowledge and skills in their practice
- c. obtain and maintain the necessary knowledge, skills and judgement to respond to changes in practice environments, advances in technology and other emerging issues
- d. assume responsibility for professional development and for sharing knowledge with others
- e. invest time, effort and other resources to maintain and improve their knowledge, skills and judgement
- f. engage in a learning process to enhance practice
- g. participate in the College's Quality Assurance Program
- h. collaborate with other members of the health care team to create quality practice settings



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