SUBJECT/TITLE: INFORMED CONSENT, TIME OUT & SITE MARKING

PURPOSE: To identify procedures performed in the Department of Radiology – Diagnostic Division that require informed consent, time out and site marking.

DEFINITION: None

POLICY:

1. All invasive radiologic procedures listed below require informed consent, which is obtained according to UIHC Protocol for Documentation of Informed Consent, RI-PR-05.07.
   - All Biopsy/Drainage Procedures
   - All Cyst Aspirations
   - All Stereotaxic localizations
   - Arthrography
   - Discography
   - Epidural Injection
   - Facet Injection
   - Fluoroscopic reduction of intussusception
   - Galactography
   - I-131 therapy for thyroid disease
   - Lumbar punctures
   - Lymphangiogram
   - Myelogram
   - Neurointerventional Radiology procedures
   - Paracentesis
   - Pediatric Esophageal Dilatation (first time only)
   - Percutaneous Nephrostomy
   - Peripheral Interventional Radiology procedures
   - Radioimmunotherapy (with Zevalin or Bexxar)
   - Sr-99 or Sm-153 palliative therapy
   - Thoracentesis

2. The obligation to complete the consent form following a thorough explanation of the procedure to the patient, and especially of the possible adverse consequences of such a procedure, rests with the LIP who is performing the examination.

3. Time out and site marking will be performed on all procedures listed in accordance with UIHC Policy for Universal Protocol Policy – Pre-Procedure Verification, Site Marking.
and Time Out (for any procedures occurring outside Main Operation Room and Ambulatory Surgery Center), **PC-PCI-05.41**.

4. Under no circumstances, shall an imaging technologist perform an examination on a patient who refuses to have the examination done. A radiologist (MD) must be contacted to resolve the patient’s apprehension, or consult with the referring physician.