SUBJECT/TITLE:  IV Contrast Administration For Patients With Limited English Proficiency

PURPOSE:  To insure effective communication with patient with limited English proficiency.

DEFINITIONS:  Limited English Proficiency: A person who may be denied the opportunity to participate effectively in decision-making concerning his or her health care because of difficulty speaking, reading, writing, or understanding the English language. These persons may include speakers of a foreign language, deaf persons whose main mode of communication is one of various signed languages, or persons who are both deaf and blind.

POLICY:

All patients who are to receive an injection of contrast media via intravenous injection are provided with, and asked to read an information sheet regarding the procedure, and the potential side-effects that they may experience.

PROCEDURE:

1. Confirm if the patient is consentable or speaks English.
2. If the patient doesn’t speak English, call the office of translator at 356-1967 until 5pm to establish if a translator is available for exams requiring IV contrast injections. Staff can also contact the translator office 24/7 by paging 131-4225.
3. Determine if the diagnosis can be made without administration of contrast.
4. If no interpreter is available and IV contrast is deemed necessary: CT staff will utilize the cyracom phone or other approved device to inform the patient of potential side effects of contrast. The ordering provider will be required to document, necessity and urgency of the contrast administration. A LIP will be required to be present in the CT room when IV contrast is administered.
5. If no interpreter, family member or confidant is available for MRI: IV contrast will not be administered.
6. If no interpreter, family member or confidant is available for MRI and the exam is deemed an emergency: The ordering provider will be required to document, necessity and urgency of the IV contrast administration. A LIP required will be required to be present in the MRI room when IV contrast is administered.
7. Staff experiencing questions or concerns from provider and or residents concerning the policy, should contact the Radiology staff physician assigned to the serviced for the day or the on call staff during off hours.

CORRESPONDING POLICIES:

Source:
Date Approved: 4/10/17
Date Effective: 4/11/17
Date Revised: 7/14/17
Date Reviewed: 7/14/17