
Diagnostic Services – Department of Radiology – Nursing Division

SUBJECT/TITLE: On-Call Policy for Interventional Radiology Nursing Staff

PURPOSE: To assure professional nursing staff is available 24 hours a day including nights, holidays and weekends.

DEFINITION:

BACKGROUND:

POLICY:

PROCEDURE:

1. On-Call time provides nursing coverage 24 hours per day
 - a. All full-time and part-time nursing staff will rotate through on-call coverage with the exception of the weekend option nurse.
 - b. All nursing staff nurses will share on-call equally on weekends and holidays.
2. On-Call time will be in addition to regularly scheduled time.
 - a. On-Call pay commences with the beginning of the scheduled on-call period and terminates with the staff members completion of the scheduled on-call period.
 - b. Employees who are required to be in standby/on-call status shall be compensated per SEIU contract.
3. Staff members who are on-call are required to restrict activities in order to be available immediately for return to the hospital and be ready to work within 30 minutes.
4. The resident or physician on-call will be responsible for contacting the RN on-call.
5. Staff on-call will record their hours worked via clocking at the time clock or entry into ELMS.

6. If a staff member is ill when on-call, he/she should attempt to arrange coverage. Communication of the sign off, coverage if arranged, should be made to the NM.
7. Pagers will be available for use by the on-call staff.
8. In case of an emergency (i.e., phone out of order, beeper not working, etc.) a call may be made to other IR staff until someone is found who is able to work.
9. When trading on-call hours, the staff must be sure to notify the Nurse Manager so adjustments to the physician's call contacts and Smart Web can be made and the schedule/ time sheets are adjusted accordingly.
10. On-call is specifically for Interventional Radiology. If an Interventional case (performed by IR physicians) occurs in the CT modality, the call nurse may provide nursing support. An attempt should be made to communicate this plan to the IR service to avoid a scenario where a call nurse is needed in CT (for peripheral IR service) and for the IR service at the same time. If this need does arise, nursing staff, including the NM may be called to provide coverage support. The Radiology Call Nurse should not be called in for the MRI, or General Diagnostic areas.
11. Policy in regards to ICU RN's accompanying and staying with patients throughout procedures remains as stated in hospital formulary.
12. Critical ER patients must be accompanied by an appropriate RN. Refer to Trauma Protocol.

Written: 10/90

Revised: 8/92, 7/95, 9/98, 12/00, 8/03,
7/07, 3/16