Justification: General aspects

- Process of justification should be explicitly covered in the QA system, but regular updates/reviewing are/is necessary
- Beware of the examinations that aren’t justified or where there is no referrer

TO DO: Expand the inspections to the referrers as well since it is a shared responsibility
Ask: how do you do the referral
Consequences of not referring correctly?

Inspector Training

- Reality: on the job training
- Good idea: checklist with criteria (hospitals know the requirements but not the criteria)
- Course on referral guidelines: not necessary, but they do need to know the type of information needed for a correct referral!

Justification: Level 3

- Referrers should give all the information needed to evaluate the justifications, should be written down in procedures!
- Appropriateness of referrals evaluable?
  → appropriateness is subjective! Should be part of clinical audit
- Feedback on the referral physician: TO DO!
- Referral guidelines are available
  → Most countries: national
  → Some countries: use these from other organisations, or use international ones (I-referral)
  → CDS systems are useful, but we still need to check if the proposal is the most appropriate one

Justification: General aspects

- Inspection and clinical audit both have an important role: use the conclusions of the audit during the inspections!
- Impact of Health Care Systems: No extra reimbursement if they take a radiograph?
- If referral is altered, document why (why is CT more suitable than MRI) → assessment by radiologist

CHALLENGE: Justification process is influenced by economic, social and political issues
Justification: Level 2

- Is level 2 justification inspected? Part of autorisation process
  - There is a national justification procedure, but there should be a mention at a local level that new methods can’t be used before doing a justification study!
  - Idea: database for ‘justified’ procedures

- Is justification of screening programs inspected?
  - Approval by Health Authority!
  - During inspection: see if the rules are followed (such as proper age/type of invitation)
  - Is criteria for the screening program defined by the health authority followed?

Justification: Responsibilities

- Justification is a shared responsibility
- There should be written and signed agreements on delegation
- Who has the responsibility of justification (in practice)? Radiographer (responsibility without authority)

Justification: Patient issues

- Is the patient informed on the radiological risks and benefits of the exposure and gives his/her consent?
  - They should be informed but often not the case
  - Ireland: written consent for CT and MRI but not for the radiological risks!
  - During inspection: is personnel able to explain the risks and tell the dose of each type of examination

- Is pregnancy identified before each exposure?