

North Bristol 
NHS Trust

University Hospitals Bristol 
NHS Foundation Trust

Weston Area Health 
NHS Trust

Protocol For Advanced Practitioners (FRSH Accredited) Employed By GP Practices Within The BNSSG Area To Request Ultrasound Examinations

Protocol For Advanced Practitioners Employed By GP Practices Within The BNSSG Area To Request Ultrasound Examination (FRSH Accredited)		
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1. INTRODUCTION

In response to requests by Nurses employed in GP practices to be able to refer patients for ultrasound, the three acute trusts who are the providers of x-ray services across the Bristol, North Somerset and South Gloucestershire (BNSSG) have agreed to devise a joint protocol to provide clarity, and consistency of approach to all GP Practices

Registered Healthcare Professionals may be in positions where their expanding scope of clinical practice requires them to provide a comprehensive service for patients and will require access to imaging to meet this need. It is often appropriate that a suitably competent, professionally registered person other than a doctor refers for radiological examinations, this may be to provide an efficient service or because the person responsible for initial patient management is not a GP but another health professional.

2. SCOPE

This policy covers Registered Healthcare Professionals employed by GP practices within the BNSSG area

Non-medical professionals, registered with the Nursing and Midwifery Council or Health & Care Professions Council, are included within the scope of this policy.

3. PRINCIPLES & PURPOSE

To:

- provide a mechanism for appropriately registered non-medical practitioners to refer patients for radiological examinations
- ensure only staff properly trained in clinical examination request ultrasound
- avoid patients having repeated clinical examinations
- provide supporting guidance related to the scope of the role and the consequential education and training requirements.

4. DEFINITIONS

To explain any specific terminology or acronyms used in the document

- ICE is the electronic investigation ordering system
- NMC stands for Nursing and Midwifery Council
- HCPC stands for Health & Care Professions Council
- ANP stands for Advanced Nurse Practitioner

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5. ROLES AND RESPONSIBILITIES

5.1 GP Practices

To ensure that each registered healthcare professional they are signing as competent to undertake the role of non-medical referrer is:

- Is suitably registered with the NMC/HCPC
- Has at least 3 years post-registration experience
- Has undertaken a recognised post registration course which includes physical examination and diagnostic reasoning and achieved Faculty of Reproductive and Sexual Health Accreditation.

They will also

- Maintain the central list of authorised referrers and regularly update as appropriate.
- To ensure that all additions to the list of clinical referrers are agreed by the Imaging Department of the Trust receiving the referrals prior to referrals commencing, adhering to the agreed status of a “referrer”.

The lead clinician at each GP practice will accept responsibility for imaging examinations requested under this protocol

5.2 Imaging Departments

To hold a list of referrers

5.3 Non-medical Referrer

- To ensure that initial and continuing education and training is undertaken to ensure on-going competence in their role
- To undertake annual audit of their practice
- To work within the scope of practice of this protocol

6 CONSULTATION

Via the committees of the three acute trusts
Avon Local Medical Committee

7 REFERRAL PROCESS

7.1 General Principles

It is the responsibility of the referrer to examine the patient and then provide sufficient clinical information to enable justification and to clarify the expectations of the examination. Examinations must be justified. The Imaging Department (Radiographer or Radiologist) will decline to accept any referrals that are considered unjustified.

All referrals must indicate clearly the name and role of the referrer e.g. Advanced Nurse Practitioner Referrals should clearly indicate the region for examination and appropriate clinical information. The Sonographer will perform the scan in accordance with the Imaging Department protocols.

If any referrer is in doubt as to whether an investigation is required, or which examination is best, they should discuss the case with an appropriate medical practitioner or with a sonographer prior to

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referral and the rationale for and the outcome of this discussion be documented in the patients records. Notice should be taken of previous relevant examinations.

Non Medical Referrers will be experienced senior nurses who have undertaken further extensive training in clinical assessment/history taking including gaining Faculty of Reproductive and Sexual Health Accreditation.

The referring of patients for clinical imaging must be covered within their job description and supported by the GP Partners at the GP practice

The Non Medical Referrer must have made a clinical assessment of the patient and will only request ultrasound if clinically justified.

They will also be currently registered with the Nursing & Midwifery Council (NMC):

An appropriate level of training/education to achieve competence in

- Faculty of Reproductive and Sexual Health Accreditation
- History taking
- Physical examination
- Advanced communication
- Clinical reasoning & decision making
- Undertake continuing professional development
- Have been assessed and agreed to be competent to request radiological examinations by their GP mentor
- Competence will be assessment through tutorials/peer review and ongoing audit

7.2 Inclusion Criteria

Following clinical examination of the patient the following x-ray examinations may be requested for adults and children 16 years of age and over

Ultrasound Investigation	Criteria
US Pelvis	Lost coil
US TVS	Lost coil

7.3 Exclusions

- All other types of Ultrasound
CT, Nuclear Medicine, Fluoroscopy, MRI and X-Ray examination are also excluded.

8 RESPONSIBILITY

The overall responsibility for the correct requesting procedure as outlined above rests with employers of the non-medical referrer. If it is subsequently shown that an examination requested is unnecessary in the given set of clinical circumstances the responsibility for that is with the GP practice and not with the Imaging Departments.

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9 TRAINING

- The Acute Trusts require non-medical referrers to have reached a required level of competence and experience in assessing patients before requesting x-ray examinations as described in section 7.
- Non-medical referrers must sign to state they have read and understood the BMUS Safety Guidelines and Statement on Safe Use of Ultrasound.
- Non-medical Referrers operating under this protocol will be acting as 'referrers' which places upon them a legal responsibility to provide sufficient medical data to enable the 'Practitioner' to decide on the appropriateness of the examination.
- Non-medical referrers must ensure they are familiar with the correct procedure for completing all sections of the request. This must include a clinical history of the problem as well as the clinical question the examination will answer.
- Holds the Faculty of Reproductive and Sexual Health Accreditation

10 POST INVESTIGATION FOLLOW UP

Reports will be generated by the Radiology department and sent to the patient's GP either electronically or hardcopy (dependent on local agreement).

The Non Medical Referrer will not interpret scan results. They will discuss any report with a GP if there are any incidental findings or abnormality for which they do not feel confident in arranging appropriate follow up, treatment, or advice.

Any unexpected / urgent findings highlighted by radiology will be directed to the GP.

Even though the examination may be evaluated by another appropriately trained member of staff, the referrer has the responsibility for ensuring that a clinical evaluation of the examination is made and recorded.

11 Audit

This process will be audited annually by the GP practice and requests will be sampled and examined to ensure appropriate requesting of procedures/examinations by the non-medical referrers within the practice

