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IAEA activities on justification of medical exposure

Jenia Vassileva, Ola Holmberg; Radiation Protection of Patients Unit, Radiation Safety & Monitoring Section, Division of Radiation, Transport and Waste Safety, Department of Nuclear Safety and Security, International Atomic Energy Agency, Vienna, Austria, Contact: J.Vassileva@iaea.org

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Requirement 37: Justification of medical exposures. Relevant parties shall ensure that medical exposures are justified.

IAEA meetings on justification

- 2007: Consultancy meeting on justification of patient exposure in medical imaging concluded: “There is a need for considerable further work, including research, on practical implementation and audit of justification in diagnostic imaging as well as in special situations involving screening and self-referral” [2]
- 2008: Consultancy meeting reviewed practical and achievable actions that might lead to more effective justification, and summarised that justification would be facilitated by the “3 A’s”: awareness, appropriateness and audit [1]
- 2009: International Workshop on Justification of Medical Exposure in Diagnostic Imaging in cooperation with the European Commission, held in Brussels, 2-4 September 2009 addressed the following important topics: Referral guidelines; Communication and risk; Audit and justification; Special problems. [4]
- 2010: Technical meeting on justification of medical imaging further discussed practical approaches
- 2012: Technical meeting on radiation protection of patients through the development of appropriateness criteria in diagnostic imaging [5]
- 2013: Technical meeting on justification of medical exposure and the use of appropriateness criteria

2014 Technical Meeting on Justification of Medical Exposure and the Use of Appropriateness Criteria, 11-13 March 2014, IAEA Headquarters in Vienna

Organised in cooperation with the World Health Organization.

Attended by 65 health professionals and regulators from 49 Member States and international organisations.

Objectives:

- Review and decide on optimal processes for adapting existing clinical imaging guidelines – or appropriateness criteria – to national and regional clinical requirements as well as to the equipment that is available locally for diagnostic imaging;
- Discuss how wider acceptance of the use of imaging guidelines among health professionals, authorities and patients might be achieved.

Summary and conclusions:

- There are only a few professional organisations in medical radiology worldwide that have the capacity to develop and maintain clinical imaging guidelines (CIG).
- The meeting focused specifically on the processes of adopting and adapting the existing CIG in the different diagnostic imaging environments around the world.
- A limited subset of guidelines for the most frequent clinical situations faced in a country or region may be the best way forward if there are currently no guidelines in use.
- Professionals prefer a range of different formats, from pdf files and booklets to apps and web-based applications.
- The participants of the meeting recommended that international organisations should advise and facilitate the process of countries adopting and adapting CIG.

References