

*EU JUST CT* 

Individual justification of CT  
practices in Estonia

# Legal Framework

- Principle of individual justification is stated in the Radiation Act.
- Minister of Health and Labor specifies in the Regulation nr 71:
  - Referrer shall ensure that referral is justified;
  - Referral shall be made under consideration of the patient's health data, previous procedures and radiation safety requirements;
  - Process of justification requires consideration of the patient's previous radiological procedures (National PACS is a part of Estonian national HIS (2014));
  - Special attention shall be paid while planning a procedure for a child < 15 y, pregnant or breastfeeding woman;
  - Woman of childbearing age shall be asked about potential pregnancy.
  - Criterias for the contents of the referral.

# Individual justification

- Minister of Health and Labor specifies in the Regulation nr 71 (cont'd):
  - The person who performs exposure (*practitioner*) has the right to amend or decline an unjustified procedure.
  - Radiation technologist always has a possibility to consult a radiologist.

# Clinical audit

- Radiation Act sets up a requirement to ensure proper performance of the clinical audit of medical radiological procedure.
- Minister of Health and Labor specifies in the Regulation nr 71:
  - Licensee shall audit the most commonly used radiological procedure.
  - Internal audit once in year and external audit in every 5 years.
  - The licensee should follow the EC RP 159, when planning and carrying out the audit.
  - The outcome of the audit must be in the form of a report and report finished in the 3 month.
  - Reports must be included in the Quality Manual.



# Patient's data protection

- Processing of patient data is specified in Health Services Organization Act:
  - Health care providers have the right to process personal data required for the provision of health care service without permission of the data subject.
  - Medical radiation technologist isn't recognized as a health professional.
- The permission from ethics committee was required before starting the data collection. Preparation of documents and their assessment by the committee took more than 3 months.



## Others

- All data collection was done manually. There was no possibility of extracting the necessary information from the digital referral system.
- There were challenges to do a properly translating data from English to Estonian language and vice versa.
- Lack of national referral guidelines. Local guidelines exist but these should be integrated into the HIS and referring workflow..



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Thank you!