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| NursingALD.com - A Free Online Resource for Nurses  **Ultrasound Department**  **Call Policy**  **and**  **Hours of Operation** | Prepared by:  Danielle Atterberry, MHSA, Imaging Services Director | Revised by: |
| Approved by: **PENDING**  Dr. Andrew Getzoff, MD  Dr. Rafael Marroquin, MD  Dr. Terry Elwing, MD  Dr. Hector Orlando Heredia, MD  Dr. Matthew Borgmeyer, MD | Review/Revise dates:  08/31/2022 |
| Effective date:  **DRAFT** | Page 1of 6 |

1. **Policy:**

General Ultrasound Department After-Hours/Weekend/Holiday and Stat Ordering

1. **Purpose:**

To establish policy and procedure for after-hours (overnight, weekend, holiday) and stat ordering of general ultrasound studies. It is the policy of the Boone Hospital Center Ultrasound Department to operate during normal business hours, **Monday through Friday from 07:00-17:00**, except for the following holidays: Memorial Day, Fourth of July, Labor Day, Thanksgiving and Black Friday, Christmas Eve and Christmas Day, New Year’s Eve and New Year’s Day, and potentially observed holidays.

This policy is to provide a continuum of quality care for the patients and employees of BHC.

Boone Hospital Center Ultrasound Department is a full-service clinical service department offering comprehensive diagnostic abdomen, OB/GYN, breast, and small parts ultrasounds as well as invasive ultrasound-guided procedures. Our goal is to provide accurate and necessary examinations in a timely manner, while also considering sonographer well-being and retention.

1. **Procedure:**
   1. All inpatient (IP) studies ordered are considered routine unless otherwise indicated by the **ordering physician**. All IP orders placed within normal business hours will be completed within 24 hours. All inpatient orders are completed based on priority; NICU, ICU, Stepdown and COVID + orders are considered more urgent, followed by the oldest to newest orders.
   2. In the event of a surplus of inpatient orders at the end of the business day that cannot be completed within 24 hours of the order date, staff is responsible for calling the ordering/attending physician to receive verbal consent that a study may wait to be completed until the following business day. Otherwise, the sonographer on call will be responsible for completing studies that must be completed same day. If an ordering physician cannot be reached, the study in question will be pushed to the next business day.
   3. Any routine IP studies left over from Friday are to be performed by the on-call sonographer over the weekend. IP studies ordered on weekends/holidays will be considered routine unless otherwise indicated and will be performed on the following Monday (or first open business day).
   4. Pending discharge IP studies requested outside of normal business hours should be referred to the scheduling department (815-8150) to be completed on an outpatient basis.
   5. All outpatient (OP) studies requested during normal business hours will be referred to the scheduling department (815-8150) to be scheduled in a timely manner, unless the study is considered emergent. Urgent and emergent indications for an OP ultrasound include possible torsion identified in an office/clinic setting. Staffing and OP openings will determine if an emergent OP study can be performed. All emergent OP studies needed outside of normal business hours should be referred to the Emergency Department (ED).
   6. Any **Overnight/Weekend/Holiday “STAT”** IP or ED ultrasound orders must meet the “Emergency After Hours Ultrasound Guidelines” in **Appendix A** before the sonographer should be called or paged. **All other ultrasounds should be scheduled as an outpatient exam or held for next morning ultrasound.** For consideration of extenuating circumstances, page the department manager or director via switchboard (815-8000).
   7. ED Requests that do not meet “Emergency After Hours Ultrasound Guidelines”: Next-morning outpatient appointment slots will be reserved for patients who need timely examinations that clinically do not meet the guidelines in Appendix A. Slots will be reserved 7 days per week, excluding holidays.
      1. Provider should complete the “ED Outpatient Worksheet for Next-Day Follow-Up” in **Appendix B** to utilize one of these appointment slots.
      2. Fax a copy to US department at **Ext. 3750**
      3. Leave a voicemail notification at **Ext. 3709**
      4. Instruct the patient to take the paper copy with them to registration the next AM.
   8. IP Requests that do not meet “Emergency After Hours Ultrasound Guidelines”: Non-emergent inpatient orders will not be performed overnight between the hours of 5pm-7am. Non-emergent weekend studies that are not appropriate to hold until Monday will be performed during the daytime hours on the weekend. The floor staff should page the US tech during dayshift on Sat/Sun if an inpatient study needs to be performed during the weekend.
   9. If a holiday falls prior to an adjoining weekend, the first day of the holiday will be the only day any leftover routine inpatient studies from the day/night before will need to be completed by the on-call sonographers. Each subsequent day, the sonographer will only be responsible for STAT orders. If a holiday is a two-day holiday, leftover studies can be done on either day, as long as they are completed before the following call shift (if adjoining weekend) or next business day.
2. **Documentation:**

It is important that all studies, especially emergent studies, carry an appropriate symptom or diagnosis. This enables the sonographer and interpreting physician to provide the most comprehensive exam possible.

1. **Appendices:** 
   1. Emergency After Hours Ultrasound Guidelines
   2. ED Outpatient Worksheet for Next-Day Follow-Up Ultrasound
2. **Approvals:**

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Imaging Services Director, Danielle Atterberry Date

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Chief of Radiology, Rafael Marroquin MD Date

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RCI Group President, Andrew Getzoff MD Date

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RCI Partner Radiologist, Terry Elwing MD Date

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ED Director, Hector Orlando Heredia MD Date

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WHA President, Matthew Borgmeyer MD Date

**DRAFT Appendix A: EMERGENCY AFTER HOURS ULTRASOUND GUIDELINES**

**EMERGENCY OBSTETRICAL ULTRASOUNDS**

**A. ECTOPIC PREGNANCY**

**MEDITECH Order Name:** US OB <14 WKS W TRANSVAG

**MEDITECH Order Mnemonic:** OB<14WKSTR

**Patient Preparation:** None

**Exam Prerequisites:** + Serum HCG

1. High index suspicion of ectopic pregnancy with + HCG and **acute pain** and/or patient has bleeding or clinical signs of blood loss:

* + Call ultrasound technologist

2. Viable intrauterine pregnancy (IUP) identified by previous scans or by fetal heart tones with mild symptoms and low index of suspicion for ectopic

* Have patient call next day to schedule OP ultrasound or schedule follow up with PCP or OBGYN

**B. THREATENED ABORTION UNDER 20 WEEKS**

**MEDITECH Order Name:** US OB <14 WKS W TRANSVAG

**MEDITECH Order Mnemonic:** OB<14WKSTR

**Patient Preparation:** None

**Exam Prerequisites:** + Serum HCG

1. With heavy bleeding; ED Attending has attempted to perform POC Ultrasound

* + Call ultrasound technologist

2. With spotting/minimal bleeding or no symptoms

* + Have patient call next day to schedule OP ultrasound or schedule follow up appointment with OBGYN

**C. EMERGENCY OBSTETRICAL >20 WEEKS**

**Exam Prerequisites:** Physical Exam by OB attending provider on duty

Urgent OB ultrasounds may be ordered if delaying the scan to the next business day would potentially increase the morbidity or mortality of the mother or fetus or would increase the risk of preterm delivery.

The OB Attending on duty, or OB Triage under the direction of the attending, may order an urgent US if it is to:

1. Urgently confirm reassuring fetal status. Delaying the ultrasound until the next business day would potentially increase morbidity or mortality of the mother or fetus.

2. Evaluate suspected fetal demise beyond 20 weeks.

3. Evaluate maternal hemorrhage (heaving bleeding) during pregnancy.

4. Evaluate suspected preterm labor. Delaying the transvaginal cervical evaluation by ultrasound until the next business day would increase risk of preterm delivery or morbidity to the pregnancy.

**EMERGENCY Pelvic ULTRASOUND**

**D. SUSPICION OF OVARIAN TORSION**

**MEDITECH Order Name:** US TRANSVAGINAL + US PELVIC DOPPLER LIMITED

**MEDITECH Order Mnemonic:** TRANVAG + PELTRNSVAG

**Patient Preparation:** None

**Exam Prerequisites:** (-) Serum HCG *and* a resulted CT

1. With peritoneal signs, **severe pelvic pain**, and a CT that is:

- Abnormal, suggestive of torsion (enlarged ovary measures >5cm)

* Call ultrasound technologist

- Abnormal, indicating clear source of pain (e.g., appendicitis)

* Do not call ultrasound technologist; Treat patient for identified source

- Normal, negative for all other reasonable causes of pain and:

* Patient is of childbearing age 🡪 Call ultrasound technologist
* Patient is not of childbearing age and/or the impact to long-term hormonal status is unknown 🡪 Phone consult with in-house OB/GYN to determine whether ultrasound is indicated

2. Without peritoneal signs, and a CT that is:

- Normal, negative for all other reasonable causes of pain

* Have patient call next day to schedule OP ultrasound or schedule follow up appointment with PCP

**EMERGENCY TESTICULAR ULTRASOUND**

**E. SUSPICION OF TESTICULAR TORSION**

**MEDITECH Order Name:** US SCROTUM DOPPLER

**MEDITECH Order Mnemonic:** SCROTDOP

**Patient Preparation:** None

**Exam Prerequisites:** None

1. Acute testicular pain or recent testicular trauma (within 48 hours).

* Call ultrasound technologist

**(NON-EMERGENT) ABDOMINAL ULTRASOUNDS**

**F. ACUTE CHOLECYSTITIS**

**MEDITECH Order Name:** US ABDOMEN LIMITED

**MEDITECH Order Mnemonic:** ABDLM

**Patient Preparation:** NPO 6 hours prior to ultrasound

**Exam Prerequisites:** Abnormal CT suggestive of Acute Cholecystitis

1. Stable abdominal pain or normal CT

* Have patient call next day to schedule OP ultrasound or schedule follow up appointment with PCP.

2. Severe abdominal pain and abnormal CT suggestive of acute cholecystitis

* Option 1: Admit patient and perform early AM
* Option 2: Perform as OP in AM

**DRAFT Appendix B:**