Name of Policy:	**Radiopharmaceutical Administration, Oral Directives and Revisions to Written Directives**
Policy Number:	3364-135-091
Department:	Radiology
Approving Officer:	Director, Radiology - UTMC
Responsible Agent:	Assistant Professor & Deputy Clinical Service Chief
Scope:	Radiology

UTOLEDO HEALTH

Effective Date:

Initial Effective Date: 1/26/1992

_____ New policy proposal
_____ Major revision of existing policy
__X__ Minor/technical revision of existing policy
_____ Reaffirmation of existing policy

(A) Policy Statement

Under certain conditions, an oral directive for the administration of a radiopharmaceutical or an oral or written revision to an existing written directive may be acceptable, as described in OAC 3701:1-58-15.

(B) Purpose of Policy

To provide expedient patient services in cases where a delay would jeopardize the patient's health.

(C) Procedure

1. A written directive is required for therapeutic procedures involving radiopharmaceuticals detailed in policy 3364-135-090. Authorized Users (AU) approved by the University of Toledo Radiation Safety and Radioisotope Committee (RSC) may prescribe or revise a radiopharmaceutical dose requiring a written directive if the radiopharmaceutical use is listed on their Certificate of Use (COU). Any questions regarding the medical use of radioactive materials (RAM) or AU status should be addressed with the Radiation Safety office.

~~1. A written directive is required for therapeutic procedures involving radiopharmaceuticals detailed in policy 3364-135-090.~~

2. If, because of the emergent nature of the patient's medical condition, a delay ~~in order~~ to provide a written directive would jeopardize the patient's health, an oral directive is acceptable. The information contained in the oral directive must be documented as soon as possible in the patient's medical record. A written directive must be prepared within forty-eight hours of the oral directive.
3. A written revision to an existing written directive may be made for any diagnostic or therapeutic procedure, if the revision is dated and signed by an Authorized User (AU) prior to the administration of the radiopharmaceutical.
4. If, because of the emergent nature of the patient's medical condition, a delay in order to provide a written revision to an existing written directive would jeopardize the patient's health, an oral revision to an existing written directive is acceptable. The oral revision must be documented as soon as possible in the patient's medical record and a revised written directive must be signed and dated by the AU within forty-eight hours after the oral revision.
5. Written directives and records of oral/written revisions to written directives must be retained for three years, per OAC 3701:1-58-75.

Approved by:	**Review/Revision Date:**
Nathan Egbert, MD Assistant Professor & Deputy Clinical Service Chief — Date Ryan Landis, BSRT (R)(CT) Director, Radiology — Date *Review/Revision Completed By:* *Ryan Landis,* BSRT (R)(CT)	7/1/1993 10/1/1996 8/20/1999 9/5/2005 5/28/2008 5/20/2011 6/3/2014 6/1/2017 6/1/2020 12/1/2021 **Next Review Date:**
Policies Superseded by This Policy: R-002C	