RADIATION SAFETY : Improving radiation safety compliance among radiology residents during fluoroscopy procedures by facilitating dosimeter access and implementing a novel pre-procedural safety time-out

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## INTRODUCTION

- Exposure to ionizing radiation is a significant occupational risk, particularly in interventional radiology.
- Limited data to demonstrate effective protocol development to improve dosimeter compliance
- Proper use of dosimeter badges is vital for protecting healthcare providers from excessive radiation exposure



## INTRODUCTION



- Initially, only 1 in 4 radiology residents wore dosimeter badges during procedures with known ionizing radiation
- Our objective: Improve dosimeter use by 50% within one year
- The approach included streamlining dosimeter access and incorporating safety protocols into pre-procedure checklists

#### WARRIOR STRONG



### **METHODS**

Site

02

• Radiology Department of a large urban tertiary care academic medical center

Target population

• All radiology resident physicians

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- Improved accessibility to dosimetry badges via placement in a more centralized location
- Dosimeter checklist in IR pre-procedure timeouts

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### **METHODS**

#### intervention 03 Dosimeter check in pre-procedure timeout Continued implementation and improvement of interventions Implementation of Intervention Improved dosimeter badge accessibility and survey to assess for obstacles to 02 01 compliance **Evaluation** Posted signage on appropriate placement of dosimeter badges Evaluation of results using Statistical Process Control Chart

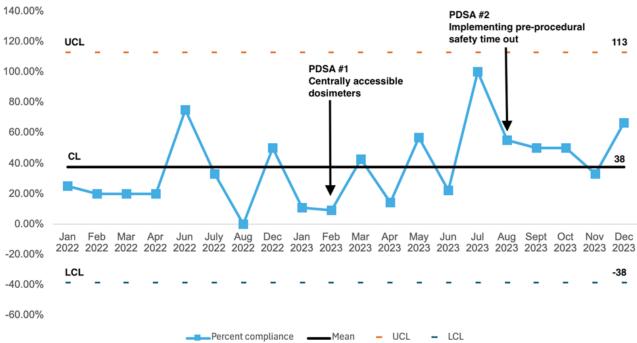
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Implementation of



### RESULTS





Dosimetry Badge Compliance n=40 residents, 365 days

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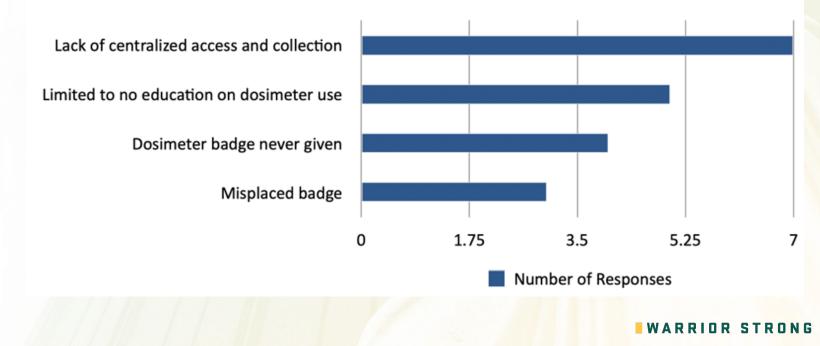
# RESULTS

- Overall, there was an approximate 50% increase in average compliance compared to pre-intervention
- Decreased variation following the second PDSA cycle indicates that compliance was optimized with active preprocedure checks of residents in the procedure room
- There was some contribution to improvement from greater central access from the first PDSA cycle, possibly due to increased visibility



## **RESIDENT FEEDBACK**

Perceived barriers to dosimeter compliance (n= 28)





# DISCUSSION

- Key Findings:
  - Dosimeter compliance improved by 50% after interventions.
  - Centralized dosimeter access nominally increased usage.
  - Pre-procedure time-out checks had the greatest impact on consistent compliance.
- Interpretation:
  - Accessibility and active reminders are critical for improving radiation safety behavior.
  - Findings align with limited literature supporting structured protocols for safety compliance.
- Implications:
  - Centralized access and procedural reminders can enhance safety practices in radiology departments.
  - Broader application could improve safety and awareness across medical procedures involving radiation exposure.
  - Badge data from improved compliance may inform future directions for improvements in procedural technique.
- Limitations:
  - Delay in return of dosimeter readouts and inconsistent time-out execution.
  - Asynchronous resident schedules and badge timelines may may result in data inconsistencies.
  - Future research could explore real-time tracking and streamlined time-outs.





# CONCLUSION

- The interventions significantly improved radiation dosimeter compliance among radiology residents, boosting compliance by 50%.
- Accessibility (centralized dosimeter placement) and pre-procedural checks during safety time-outs were key to improving compliance and reducing system variation.
- Further process improvements and consistent protocol application are necessary to sustain and optimize radiation safety in the department.