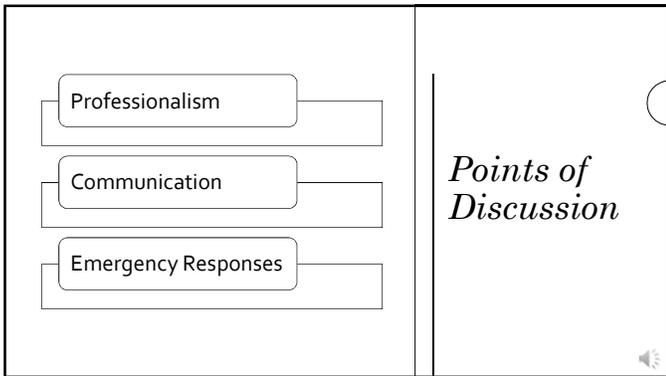
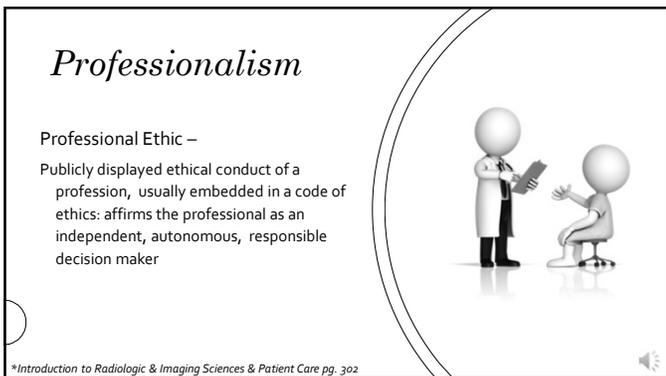




1



2



3



Professionalism

Requires familiarity with several concepts

- Codes of ethics
- Values
- Patient-professional interaction models
- Patient's rights

4

Code of Ethics

What is the purpose?

- Helps to ensure a high standard of practice
- Serves as regulatory function: specifying a certain conduct by which all members must abide by (ASRT/ARRT)
- Presents a framework for a systematic examination of beliefs



*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 303

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Code of Ethics

Codes of Ethics for Radiography

- ARRT – American Registry of Radiologic Technologists
 - Part A & Part B
 - Introduction to Radiologic Sciences and Patient Care: Appendix D, p. 339
- ASRT – American Society of Radiologic Technologists
 - Practice Standards for Medical Imaging and Radiation Therapy
 - Introduction to Radiologic Sciences and Patient Care: Appendix A, pp. 327-335

6

Values

Definition

- Ideals and customs of a society toward which the members of a group have an affective regard; a value may be a quality desirable as an end in itself

Value System:

- Collection or set of values that an individual or group has as each person's personal guide



*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 303

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Basic Groups of Values

Personal	Beliefs/Attitudes that provide a foundation for behavior and the way an individual experiences life
Cultural	Specific to a people or culture
Professional	General attributes prized by a professional group

8

Patient-Professional Interaction Models



- What are they?
 - An aid in ethical decision making
 - Describe interactions with patients
- Some models may work better than others or in combination with one another.

9

Patient-Professional Interaction Models

- **Engineering** - Defines the patient as a condition or procedure (not person)
- **Paternal/Priestly** - The caregiver acts in a paternalistic role and makes decisions *for* patients rather than *with* patients



10

Patient-Professional Interaction Models

- **Collegial** - More cooperative method of providing health care involving sharing, trust, and the pursuit of common goals
- **Contractual** - Defines health care as a business relationship between the provider and patient
- **Covenantal** - Agreement between the patient and health care provider
 - Patients best interests in mind
 - Patients ability to trust is often based on past experiences with health care providers



11

Health Communication

Concerned with how individuals in a society seek to maintain health and deal with health-related issues

- Key Elements of Communication
 - The speaker or sender
 - Language spoken or body language
 - Environment
 - Listening
 - Feedback from receivers



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Obstacles in Communication

- Interruptions/distractions
- Visually impaired, speech and/or hearing impaired
- Cultural factors and/or language barriers
- Seriously Ill/Traumatized
- Mentally impaired
- Substance abusers
- Relationship concerning roles

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Improving Communication

Constantly evaluate and improve communication skills

Active Listening

- Watching the patient's body language
- Observing the patient's physical presentation
- Asking open-ended questions
- Waiting for responses and feedback from the patient
- Speak in simple terms easily understood (non-medical jargon)
- Time
- Educate

14



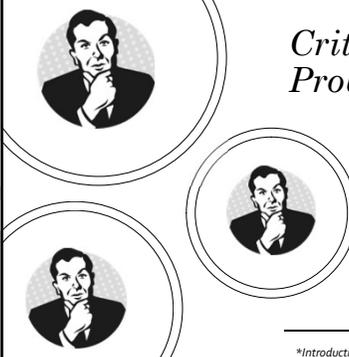
Patients Rights

The Patient Care Partnership

- Published by The American Hospital Association
- Helps patients understand their expectations, rights and responsibilities
- Outlines what patient's are to expect during their stay in the hospital:
 - High quality care
 - Clean and safe environment
 - Patient to be involved in their care
 - Protection of privacy
 - Preparing patient and their family to leave the hospital
 - Help with bill and insurance claims

*Introduction to Radiologic Sciences and Patient Care Appendix F, pp. 346-347

15



Critical Thinking & Problem Solving

Critical Thinking Definition:

- Creative thinking based on professional knowledge and experience involving sound judgment applied with high ethical standards and integrity.

What does that mean?

Identify, Investigate, Formulate Solution, Select the Solution***

*Introduction to Radiologic & Imaging Sciences & Patient Care pgs. 30-37

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Critical Thinking & Problem Solving

Learning extended beyond memorization

Steps in Critical Thinking:

- Identify the Problem
- Investigate the Problem
- Formulate a Solution
- Select the Solution

*Introduction to Radiologic & Imaging Sciences & Patient Care pgs. 30-37

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TABLE 4.1 Steps in Critical Thinking and Problem Solving	
Steps in Order	Potential Questions
Identify the problem	<ul style="list-style-type: none"> • Does a problem exist? • What is the problem? • What is the cause of the problem? • Is the problem in whose responsibility?
Investigate the problem	<ul style="list-style-type: none"> • What is known about the problem? • Which aspects of the problem, and how will these factors influence the outcome? • What are the key elements of the problem? • What are the key elements of the problem? • What are the safety, risk, and liability implications? • What are the technical considerations? • Will more than one solution or type of solution be needed?
Formulate viable solutions to the problem	<ul style="list-style-type: none"> • Are your decisions regarding the problem objective and based on professional knowledge, ethics, and standards? • How will these professional standards be applied and modified to fit the unique situation presented by the problem? • What additional viable information or expertise is needed? • Do any similar problems exist that have been successfully solved that can guide you to possible solutions? • Will a creative solution be needed for this unique problem? • Which solution will allow for the best care of the patient and is within professional ethical standards?
Select the best solution	<ul style="list-style-type: none"> • Does this solution correspond with the procedures and protocol for your institution? • How quickly must the solution be made? • How does your solution affect the patient's outcome?



CRITICAL THINKING & PROBLEM SOLVING

Identify, Investigate, Formulate Solution, Select the Solution****

*Introduction to Radiologic & Imaging Sciences & Patient Care pg 30

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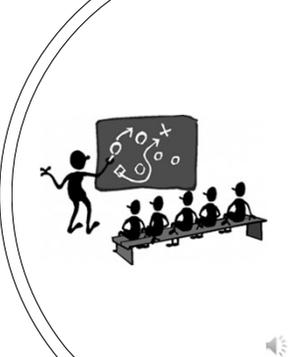
How can this be useful now?

Classroom/Skills Lab

- Freedoms without endangering the health of a patient

Clinical Setting

- Allows knowledge of problem solving to be used in a *real-world* environment (being reinforced by a supervising technologist)



*Introduction to Radiologic & Imaging Sciences & Patient Care pgs. 30-37

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Joint Commission on Accreditation of Healthcare Organizations --1951

- **Mission:** To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.



- **Vision Statement:** All people always experience the safest, highest quality, best-value health care across all settings.
 - Consistency

20

Joint Commission on Accreditation of Healthcare Organizations --1951

- Accredits and certifies more than 20,000 health care organizations and programs in the United States.
 - Recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.
- Standards have been introduced in 2016 that are more specific to Radiology
 - MRI, CT, etc.
 - Could be more in the future with Fluoroscopy



21

2021 Hospital National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

Identify patient correctly
 NPSG.01.01.01 Use at least two ways to verify patients. For residents, use the patient's name and room or unit. This is done to make sure that each patient gets the correct medicine and treatment.

Improve staff communication
 NPSG.02.01.01 Use important test results to the right staff person on time.

Use medication safely
 NPSG.03.01.01 Before a procedure, check medicines that are not checked. For example, medicines in syringes, bags and bottles. Do this for the one whose medicine will be given to the patient.
 NPSG.03.02.01 Take orders and staff orders with your medicine to the right time.
 NPSG.03.03.01 Report and prevent drug errors. Check drug orders before giving. Check drug orders and patient information. Check drug orders and patient information. Check drug orders and patient information. Check drug orders and patient information.

Use alarms safely
 NPSG.04.01.01 Make arrangements to ensure that alarms or medical equipment are heard and responded to on time.

Prevent infection
 NPSG.07.01.01 Use the best cleaning guidelines from the Centers for Disease Control and Prevention on the best cleaning guidelines. Use good cleaning guidelines from the Centers for Disease Control and Prevention on the best cleaning guidelines.

Identify patient safety risks
 NPSG.10.01.01 Reduce the risk for falls.

Prevent mistakes in surgery
 LP.01.01.01 Make sure that the correct surgery is done on the correct patient and at the correct place or in the correct body.
 LP.01.02.01 Mark the correct place on the patient's body where the surgery is to be done.
 LP.01.03.01 Place where the surgery is done and that is responsible for doing so.

National Patient Safety Goals

- Established 2002 : Accredited organizations address specific areas of concern in regards to patient safety
- The first set of NPSGs was effective January 1, 2003

22



Code BLUE

Code used at this institution in paging individuals to participate in resuscitation of a patient who has had a cardiopulmonary arrest / failure or who is experiencing a potential life-threatening event.

- A pediatric Code Blue will be announced for all children 17 years and under.

❖ Who can a Code Blue be called for?

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Code BLUE

How is Code Blue called?

- In Hospital--Dial x6363
 - Tell the operator to page "Code Blue"
 - Tell operator your location
 - Example: "Charlie 1, Radiology, Room 3"
- In Outpatient centers call 911 only

24



**Our Role:
Code BLUE**

- Call for help
- Assess vital signs
- Get emergency equipment to room
- Get chart to the room (unless electronic)
- Provide appropriate care while waiting for help to arrive
- Begin CPR if applicable - ABCs (CAB)
- Be prepared to provide history of events

25

**RRT:
Rapid Response
Team**



A team of clinicians who bring critical care expertise to inpatient bedside.

- Available in-house at all times
- Assesses and assists in the management of the patient

❖ **When would a RRT be called?**

If an inpatient has a status change, call **RRT**

- Dial x6363
- MUST **BE SPECIFIC** if it is a pediatric patient

26

**RRT:
Our Role**



Assure notification of the Attending physician by the appropriate person (Resident physician for Teaching Service patients)



Provide the Team with:

- A brief history of the situation, patient background and his/her assessment of the patient
- Patient's current and recent medications, laboratory results and recent interventions

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Medical Emergency Team

A team who responds to a status change of:

- Outpatient
- Visitor
- Staff
- Student
- Contractor

Status change could be feeling faint, low blood sugar, fall, chest pain, panic attack, etc...

Team consists of
Emergency Department Staff, COACH nurse and Security

- Clinical, Observation and Critical Help

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Medical Emergency: Our Role

- In Hospital-- Dial x6363
 - Tell the operator to page "Medical Emergency"
 - Tell operator your location
 - Example: "Charlie 1, Radiology, Room 2"
 - Specify if the patient is pediatric
- In Outpatient centers call 911 only

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Emergency Notification Plain Language Descriptions

Situation	Notification Language
General Emergency	Medical Emergency
Code Blue	Code Blue - Unresponsive Adult
Code Orange	Code Orange - Fire
Code Red	Code Red - Fire
Code Yellow	Code Yellow - Unresponsive Pediatric
Code Green	Code Green - Unresponsive Pediatric
Code Purple	Code Purple - Unresponsive Pediatric
Code Grey	Code Grey - Unresponsive Pediatric
Code Black	Code Black - Unresponsive Pediatric
Code Brown	Code Brown - Unresponsive Pediatric
Code Blue (Pediatric)	Code Blue - Unresponsive Pediatric
Code Orange (Pediatric)	Code Orange - Fire
Code Red (Pediatric)	Code Red - Fire
Code Yellow (Pediatric)	Code Yellow - Unresponsive Pediatric
Code Green (Pediatric)	Code Green - Unresponsive Pediatric
Code Purple (Pediatric)	Code Purple - Unresponsive Pediatric
Code Grey (Pediatric)	Code Grey - Unresponsive Pediatric
Code Black (Pediatric)	Code Black - Unresponsive Pediatric
Code Brown (Pediatric)	Code Brown - Unresponsive Pediatric

NOTIFICATION LANGUAGE

SITUATION	NOTIFICATION LANGUAGE
General Emergency	Medical Emergency
Code Blue	Code Blue - Unresponsive Adult
Code Orange	Code Orange - Fire
Code Red	Code Red - Fire
Code Yellow	Code Yellow - Unresponsive Pediatric
Code Green	Code Green - Unresponsive Pediatric
Code Purple	Code Purple - Unresponsive Pediatric
Code Grey	Code Grey - Unresponsive Pediatric
Code Black	Code Black - Unresponsive Pediatric
Code Brown	Code Brown - Unresponsive Pediatric
Code Blue (Pediatric)	Code Blue - Unresponsive Pediatric
Code Orange (Pediatric)	Code Orange - Fire
Code Red (Pediatric)	Code Red - Fire
Code Yellow (Pediatric)	Code Yellow - Unresponsive Pediatric
Code Green (Pediatric)	Code Green - Unresponsive Pediatric
Code Purple (Pediatric)	Code Purple - Unresponsive Pediatric
Code Grey (Pediatric)	Code Grey - Unresponsive Pediatric
Code Black (Pediatric)	Code Black - Unresponsive Pediatric
Code Brown (Pediatric)	Code Brown - Unresponsive Pediatric

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Emergency Numbers

- Code Blue/RR Team/ Medical Emergency:
 - X6363
- Non-Medical Emergency:
 - X8222
- Code Help:
 - X5555
- Customer Service:
 - X8888
