

*MI123:  
CLINICAL  
SEMINAR I*

*Lecture #3*



Professionalism

Communication

Emergency Responses

*Points of Discussion*

# *Professionalism*

## Professional Ethic –

Publicly displayed ethical conduct of a profession, usually embedded in a code of ethics: affirms the professional as an independent, autonomous, responsible decision maker



*\*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 302*





## *Professionalism*

Requires familiarity with several concepts

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



## *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*



## Code of Ethics

The Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

<ol style="list-style-type: none"> <li>1 The radiologic technologist acts in a professional manner, responds to patient needs, and supports, collaborates and maintains an ongoing quality of patient care.</li> <li>2 The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.</li> <li>3 The radiologic technologist delivers patient care and services oriented to the concerns of personal attributes in the nature of the disease or injury and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, with regard to public assistance, marital status, disability, sexual orientation, gender identity, senior status, age, or any other legally prohibited basis.</li> <li>4 The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.</li> <li>5 The radiologic technologist assesses situations, exercises care, discretion and judgment, assumes responsibility for professional decisions and acts in the best interest of the patient.</li> <li>6 The radiologic technologist acts as an agent through clear action and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.</li> </ol>	<ol style="list-style-type: none"> <li>7 The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.</li> <li>8 The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to health radiologic technology care.</li> <li>9 The radiologic technologist respects confidentiality accumulated in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.</li> <li>10 The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.</li> <li>11 The radiologic technologist refrains from the use of legal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.</li> </ol>
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THE AMERICAN REGISTRY  
OF RADIOLOGIC  
TECHNOLOGISTS

# 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*

# 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*



# *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



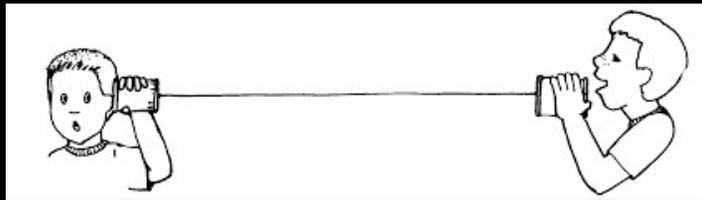
Professional

General attributes prized by a professional group



## *Patient- Professional Interaction Models*

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- 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.



## *Patient-Professional Interaction Models*

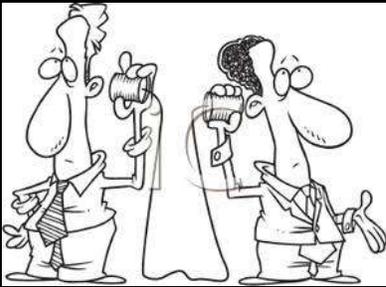
- *Engineering* - Defines the patient as a condition or procedure (not person)
- *Paternal/Priestly* - The caregiver acts in a paternalistic role and makes decisions *for* patients rather than *with* patients



## *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





## *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





## *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





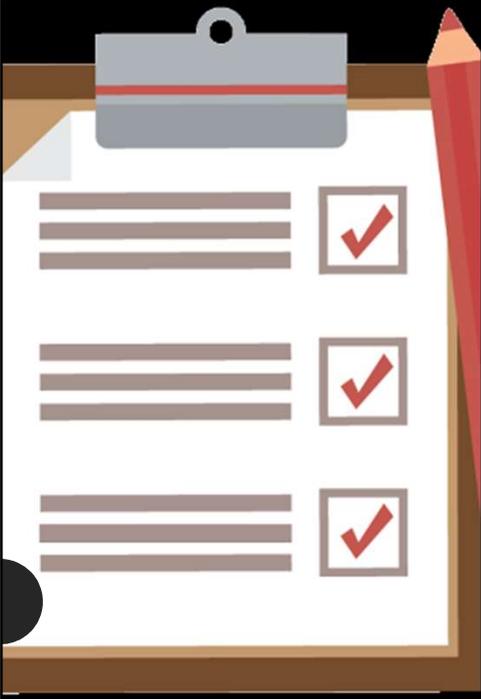
## *Improving Communication*

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





*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



## *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\*\*\*

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



## *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

**TABLE 4.1 Steps in Critical Thinking and Problem Solving**

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



***CRITICAL THINKING & PROBLEM SOLVING***  
*Identify, Investigate, Formulate Solution, Select the Solution\*\*\**

*\*Introduction to Radiologic & Imaging Sciences & Patient Care pg. 32*

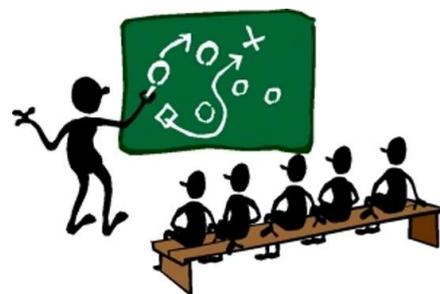
## *How can this be useful now?*

### 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*



## *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



## *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



## 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 patients correctly

NPSG.01.01.01 Use at least two ways to identify patients. For example, use the patient's name and date of birth. This is done to make sure that each patient gets the correct medicine and treatment.

### Improve staff communication

NPSG.02.03.01 Get important test results to the right staff person on time.

### Use medicines safely

NPSG.03.04.01 Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.

NPSG.03.05.01 Take extra care with patients who take medicines to thin their blood.

NPSG.03.06.01 Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about the medicines they need to take. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.

### Use alarms safely

NPSG.06.01.01 Make improvements to ensure that alarms on medical equipment are heard and responded to on time.

### Prevent infection

NPSG.07.01.01 Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.

### Identify patient safety risks

NPSG.15.01.01 Reduce the risk for suicide.

### Prevent mistakes in surgery

UP.01.01.01 Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.

UP.01.02.01 Mark the correct place on the patient's body where the surgery is to be done.

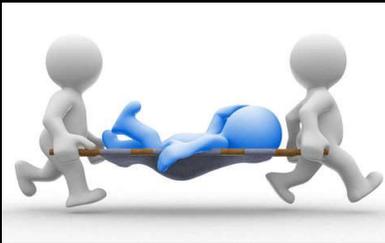
UP.01.03.01

Pause before the surgery to make sure that a mistake is not being made.

# 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





## *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?**





## *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



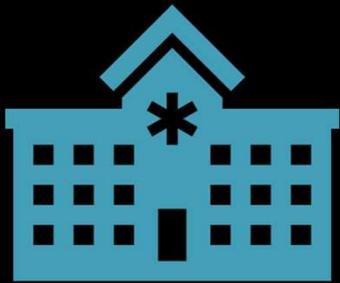


## *Our Role: Code BLUE*

- 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



## *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



# *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



# *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



# *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



### Emergency Notification Plain Language Descriptions

Situation

Notification Language

Summon Facility Leadership and Establish Incident Command

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**Fire**

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**Code Team Activation (Cardiac Arrest and Respiratory Arrest)**

Medical Emergency (Non-Cardiac Arrest Emergency)

Deteriorating Patient Condition

Stroke Team Activation

Trauma En-Route

STEMI

Neonatal Crisis

OB Emergency

Mass Casualty Incident

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**Person Brandishing a Weapon**

Out of Control Person

Facility Lockdown

Emergency Department Lockdown

SITUATION

NOTIFICATION LANGUAGE

BERT

Suspicious Package

Bomb Threat

Patient Elopement

Infant Abduction

Pediatric Patient Abduction

Missing Child (Non-Patient)

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**Loss of Utility - Power, Water, Phone, Gas, HVAC**

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**Tornado, Hurricane, Severe Thunderstorm or Winter Weather**

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**Disaster**

Decontamination Alert

Internal Spill

Evacuation

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**Exercise Notification**

Incident Command Activation

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Code Red - Fire Alarm + Location  
All Clear - Resume normal duties

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Code Blue - Location + ADULT (18 years +)  
Code Blue - Location + PEDS (17 and younger)

Medical Emergency - ERT + Location

Rapid Response Team + Location

Stroke + Location  
Brain Attack + Location

Trauma + ETA  
- Response  
- Alert

Patient STEMI + Location

Neonatal Emergency + Location

OB Rapid Response Team + Location

Mass Casualty Incident - Internal or External

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Security Emergency - Active Shooter + Location  
Security Emergency - Active Threat + Location

Security Emergency - Behavioral Response + Location

Security Emergency - Campus Lockdown

Security Emergency - ED Lockdown

Security Alert - Behavioral Emergency Response Team

Security Alert - Suspicious Package

Security Alert - Bomb Threat

Security Alert - Elopement + Location + Description

Security Alert - Infant Abduction + Location + Description

Security Alert - Pediatric Abduction + Location + Description

Security Alert - Missing Child + Location

\* All Clear - to be used after Emergency or Alert

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Utility Alert - Type (Power, Water, Phone, Med-gas, HVAC)

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Severe Weather Alert - Type

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Internal Event + Location  
External Event  
All Clear

Patient Decontamination + Location

Hazmat Chemical Spill + Location

Evacuation + Type (partial or full facility) + Location

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Internal or External Drill  
All Clear - Resume normal duties

Bolded notifications are to be announced over hospital intercom system  
ADMINISTRATIVE APPROVAL 10-06-19

12-2-19



## *Emergency Numbers*

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

