

## Prosthetists and Orthotists: Radiology Requests



Allied healthcare (i.e. non-medical) professionals (AHPS) make an immense contribution to effective and efficient patient care pathways. Under the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2017<sup>(1, 2)</sup>, prosthetists and orthotists as registered healthcare professionals may be entitled to act as referrers.

For this to occur, there is an amount of extra work and oversight required for these departments to have in place robust processes to ensure compliance with IR(ME)R. While IR(ME)R does not specify a particular training requirement for non-medical referrers, the IR(ME)R regulators will expect to see a procedure in place for the entitlement of non-medical referrers which is likely to reflect registration standards and professional body guidance.

Entitlement is granted by the IR(ME)R employer to whom an individual is referring. The employer will need to be satisfied that the referrer is working within their scope of practice. They should also consider how this impacts service improvement measures. Although IR(ME)R does not distinguish between medical and non-medical referrers, in practice, each entitlement for non-medical referrers reflects a clearly defined (and usually limited) scope of practice. It is the employer's decision whether to entitle someone as a duty holder under IR(ME)R. This would usually occur at a Trust level within the NHS. For contracted services, extra lines of communication would need to be completed within the contract for the clinician to be registered within the specific Trust(s) or hospital(s) they are practising within.

It should be noted that if a non-medical referrer is expecting to make their own clinical evaluation of the images (rather than wait for the images to be read/interpreted and the resulting radiology report), they must first be trained and entitled as an IR(ME)R operator to do this. This training is detailed in schedule 3 of IR(ME)R<sup>(3)</sup> and would need to be evidenced relative to the individual's scope of practice. Making the referral and making the clinical evaluation are two different duties under IR(ME)R and require quite different training, education and practical experience.

This professional body guidance was written by the Society of Radiographers (SoR) and the Royal College of Nursing (RCN) and is applicable to all non-medical referrers<sup>(4)</sup>.

The joint professional body guidance IR(ME)R: Implications for clinical practice in diagnostic imaging, interventional radiology and diagnostic nuclear medicine<sup>(5)</sup> may also be of interest.

## References:

1. <https://www.legislation.gov.uk/ukxi/2017/1322/contents/made>
2. <https://www.gov.uk/government/publications/diagnostic-radiology-national-diagnostic-reference-levels-ndrls/ndrl>
3. [The Ionising Radiation \(Medical Exposure\) Regulations 2017 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
4. <https://www.rcn.org.uk/professional-development/publications/rcn-clinical-imaging-requests-uk-pub-009-108>
5. [IR\(ME\)R: Implications for clinical practice in diagnostic imaging, interventional radiology and diagnostic nuclear medicine | The Royal College of Radiologists \(rcr.ac.uk\)](https://www.rcr.ac.uk)