

**STANDARD FOR  
RADIOLOGICAL, DIAGNOSTIC IMAGING, RADIOTHERAPY & RADIOISOTOPE SERVICES**

Name of Facility:

Address:

*If comply tick (✓) Yes, if not tick (✗) No. Please add comment for any explanation.*

PROVISION	ITEM	YES	NO	COMMENT
	<b>INFRASTRUCTURE &amp; EQUIPMENT</b>			
R.345(3)	Shall comply with the Atomic Energy Licensing Act 1984 [Act 304] and any regulations made thereunder			
	<b>Location</b>			
R.348(a)	Avoid outpatient traffic through inpatient areas			
R.348(b)	Accessible to outpatients and inpatients			
R.348(c)	Minimize exposure hazard to patients and staff			
R.348(d)	In or near the clinical department			
R.231(1)	Conveniently located to emergency department/facilities and services			
	<b>Signs and labels</b>			
R.60	Proper signage and labelling system			
S.108	Not to mislead the public on the type or nature of facilities or services			
	<b>Ramp</b>			
R.52(6)(a)	Size $\geq 1.1\text{m}$ wide			
R.52(6)(a)	Landing $\geq 1.8\text{m}$ wide			
R.52(6)(b)	Non skid surface			
R.52(6)(c)	Handrails on both sides ( <i>where necessary</i> )			
R.52(6)(d)	Guardrails ( <i>where necessary</i> )			
R.52(6)(e)	Slope not exceeding 1:16			
R.52(6)(f)	Comply with Fire Services Department			
	<b>Entrance and exit</b>			
R.59(1)	Main entrance adjacent to lobby with minimum disturbance			
R.59(2)	Entrance designed for wheelchairs and stretchers			
R.59(3),(4)	Separate emergency entrance ( <i>accessible to pedestrian, ambulance and traffic</i> )			
R.59(3)	Separate patients and visitors entrance			

PROVISION	ITEM	YES	NO	COMMENT
	<b>Door</b>			
R.54(1)	Clear opening $\geq 1.2\text{m}$ ( <i>for patient care</i> )			
R.54(2)	Patients' toilet and bathroom door clear opening $\geq 0.9\text{m}$ , not swing in, neither to corridor			
R.54(3)	Adequate size for large carts or bulk goods to pass through ( <i>for entrance, store etc</i> )			
R.54(4)	All 2 way swing doors shall have vision panel			
R.54(5)	Clearance at the bottom of exterior door $\leq 0.6\text{cm}$			
R.54(6)	All doors except closet doors shall not swing into the corridors			
	<b>Corridor</b>			
R.53(1)	Size $\geq 2.1\text{m}$ wide ( <i>exceptions may be permitted for corridor limited to foot traffic in a single department</i> )			
R.53(2)	Handrails ( <i>compulsory for patients with physical disabilities unit i.e. orthopaedic &amp; rehabilitation units</i> )			
R.64(1)	No beds shall be placed in corridors			
	<b>Floor and wall</b>			
R.56(1), 57(1)	Easy to wash and clean & non skid for floor			
R.56(1), 57(1)	Non-toxic ( <i>safe</i> )			
	<b>Ceiling</b>			
R.58(1)(a)	Height for air-conditioned room $\geq 2.4\text{m}$			
R.58(1)(b)	Height non--conditioned room $\geq 3.0\text{m}$			
R.58(4)	Non- toxic ( <i>safe</i> )			
	<b>Window and ventilation</b>			
R. 55 & 89(1)	All rooms and areas adequately ventilated			
R.89(4)	Fresh air supply intakes away from any source of contaminants or odours			
R.89(5)	Air discharge exhaust located to avoid cross circulation to air supply intakes or windows			
R.89(6)	Ventilation system to avoid contaminated air flow to patient, food preparation, clean or sterile areas			
R.89(7)	Air from rooms/areas likely to contain infectious micro-organisms or noxious gas shall be exhausted and not re-circulated through the normal air-conditioning system			
	<b>Electrical supply</b>			
R.83	Appropriate and grounding type of electrical sockets			
R.84(1)	Adequate number of electrical sockets			

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R.84(3)	No adaptors, extension cords or junction boxes			
R.85	Adequate lighting fixtures for illumination in all areas			
R.86	Circuit-breakers in all critical areas and located in or adjacent to the areas			
R.87(1)	Emergency power supply for the essential systems, equipment, rooms or areas ( <i>call system, alarm system, critical areas, etc</i> )			
R.87(1)&(2)	Emergency power supply for the illumination ( <i>exit signs, nurses' station, corridor etc</i> )			
R.122(2)	Emergency lights are kept in good repair and operating condition			
	<b>Plumbing</b>			
R.81(1)	Designed & installed, to be easily cleaned & maintained			
R.81(4)	Installation to prevent the possibility of cross connection between safe and unsafe water supplies or back siphonage			
R.81(6)	No floor traps in clean areas.			
	<b>Hand washing facilities</b>			
R. 68(1)	Soap, appliance and sanitary hand drying facilities			
R. 68(2)	All taps are patient-friendly ( <i>except for psychiatric patients</i> )			
R. 68(3)	Hands-free taps ( <i>for healthcare professional</i> )			
R.20	<b>Resuscitation facilities</b>			
8 <sup>th</sup> Schedule (c)	Ventilation assistance equipment ( <i>e.g.ambubag</i> )			
(f)	Laryngoscope and endotracheal tubes			
(d)	ECG monitoring with cardiac defibrillator			
(g)	Suction equipment			
(b)	Oxygen			
(h)	Urinary catheters			
(i)	Drugs ( <i>Adrenaline, Atropine, Steroid, S.Bicarb</i> )			
(e)	Intravenous therapy			
(j)	Basic obstetric supplies			
	<b>Facilities for radiological or diagnostic imaging services including:</b>			
R.349(a)	Administrative facilities (may share with adjacent services)			
R.349(b)	A reception area, separate from the work area			

PROVISION	ITEM	YES	NO	COMMENT
R.349(c)	A radiographic room			
R.349(d)	Light proof, dark room with equipment			
R.349(e)	Changing room or area			
R.349(f)	Easy access to toilet from radiographic room			
R.349(g)	Therapy room, if applicable			
	<b>Facilities for radiotherapy and radioisotope services including:</b>			
R.350(a)	Impermeable and readily decontaminated work surfaces and floors			
R.350(b)	Adequate equipment and protective devices in radiochemistry laboratory to ensure safe storage & handling			
R.350(c)	Patient up-take measuring room - appropriately located or adequately shielded			
	<b>Overall findings</b>			
S.16(1)(a)	Complies with the building layout plan, design construction and specification to which the approval to establish or maintain relates			
S.16(1)(b)	Equipment, apparatus, instrument, material, article, sample or substance or any other thing found in the premises, or any matter connected therewith			
R.122(2)	Infrastructure and all equipment are kept in good repair and operating condition			
R.345(3)	Shall comply with the Atomic Energy Licensing Act 1984 [Act 304] and any regulations made thereunder			
	<b>STANDARD &amp; REQUIREMENT (DOCUMENTATION)</b>			
	<b>Organization &amp; Management</b>			
R.346	Head of facilities and services shall be a RMP			
R.16(1),(2)	Appointment of head of department ( <i>if ≥ 2 RMP or RDP per specialty in accordance to the type of facilities &amp; services provided</i> )			
R.16(3)	Relevant qualification, training & experience of HOD			
R.11(2)	Plan of organization in writing ( <i>specify the authority, responsibility and functions of each category of staff</i> )			
	<b>Personnel</b>			
R.347(1)	Staff shall be qualified by qualification, training and experience for the type of service rendered			
R.347(2)	A technologists is on duty or on call at all the times			

PROVISION	ITEM	YES	NO	COMMENT
R.351(1)	All diagnostic tests should be at the request of a RMP/RDP			
R351(2)	All results of diagnostic tests should be reported to the referring RMP/RDP or any one designated by then.			
R351(3)	Past reports may be made available to the currently managing RMP/RDP			
R351(4)	All x-rays films (that required specialised knowledge) to be interpreted by a radiologist			
R351(5)	All findings & evaluations of each x-rays shall be signed by the RMP/RDP and be made a part of the patient's medical record.			
R531(6)	Any verbal/faxed/e-mail report shall be accompanied by the original report to the requesting person.			
R531(7)	Reference ranges of the test should be made available to the requesting RMP/RDP			
	<b>Policies and standard operating procedures</b>			
R.22	Relevant written policies, standards, procedures and guidelines are available and accessible to all personnel			
R.21(1)(b)	Procedure for patient admission, discharge & transfer			
R.21(1)(c)	Procedure for patient registration, attendance & referral			
R.21(2)(a)&(b)	Written policy available to all staff & review every 5 years			
	<b>Records, registers, returns and books</b>			
R.34	Staff register			
R.13(3)	Temporary register for RMP & RDP with current APC			
R.42 – 46	Appropriate patients' medical record (refer 6 <sup>th</sup> Schedule) (Patient identification, relevant clinical details, details on the procedures including consent form etc) including:			
R.352(1)(a)	Name of PHFS and RMP/RDP requesting the test			
R.352(1)(a)	Date of despatch of results to the RMP/RDP			
R.352(1)(b)	Radiology laboratory identification number			
R.352(1)(c)	Date and time of receipt of patient			
R.352(1)(d)	Date and type of test performed			
R.352(1)(e)	Person who performed the test			
R.352(1)(f)	Results of the test			

PROVISION	ITEM	YES	NO	COMMENT
R.352(3)	All records required to be kept at least for the period as specified under any written law pertaining to limitation period.			
	<b>Program and activities on quality</b>			
S.74(1),(2)	Information on quality programme and activities			
	<b>Overall findings</b>			
S.16(1)(c)	Complies with standards or requirements: books, records, policies, standard operating procedures, clinical practice guidelines or the management or related matters			
R.345(3)	Shall comply with the Atomic Energy Licensing Act 1984 [Act 304] and any regulations made there under			

<b>Comments:</b>	
<b>Recommendation:</b>	
<b>Prepared by:</b>	<b>Verified by:</b>
(Name & Stamp)	(Name & Stamp)
<b>Date :</b>	<b>Date:</b>