

Direct Supervision for Contrast Studies (Updated 9/23/2024)

With the end of the Public Health Emergency, the ACR recommends that sites follow the ACR CT and MR Accreditation requirements for onsite supervision of contrast administration and management.

<https://accreditationsupport.acr.org/support/solutions/articles/11000055862-interpreting-supervising-physician-mri-breast-mri-revised-9-23-2024->

<https://accreditationsupport.acr.org/support/solutions/articles/11000055868-interpreting-physician-ct-revised-9-23-2024->

Intravenous Contrast Media

Onsite Personnel to Ensure Safety

On site, there must be a radiologist or other physician OR qualified person who is acting under the general supervision of a physician. This individual must:

1. Have received training and meet institutional periodic competency guidelines at evaluating patients and diagnosing and differentiating different types of adverse reactions to contrast material.
2. Be able to recognize when medical intervention is required for hypersensitivity immediate reaction or physiology adverse event due to contrast administration.
3. Be trained and legally permitted to administer prescription medications (e.g. antihistamine, intravenous fluid, beta agonist inhalers, epinephrine) and other appropriate interventions independently or under a standing orders/algorithmic approach under state law or regulations, and under local, institutional, site and facility policies, guidelines and rules. These interventions are those indicated for urgent response to a contrast material adverse event as listed in the ACR Manual of Contrast Media or similar local policies or guidelines.
4. When qualified to act under general supervision of a physician, be able to consult with the supervising physician within an appropriate timeframe.
5. Has minimum BLS certification.
6. Understand when to call for assistance and how to activate emergency response systems.
 - If the general supervision by a physician is performed remotely, the process should comply with all federal/state law or regulations and local, institutional, site and facility policies, guidelines, or rules related to telemedicine. This remote general supervision should be available whenever contrast material is administered and include the standard post administration monitoring as dictated by all federal/state law or regulations and local, institutional, site and facility policies, guidelines, or rules.
 - Overall staffing should take into account the timeliness of available emergency response systems.

Note: Other physicians include radiology residents and fellows

Radiologist Led Teams

In order to ensure quality in diagnostic imaging, it is essential that the supervising professional be able to assess the quality of an image relative to the capability of the equipment and diagnostic demands, ensure diagnostic quality, and minimize unnecessary radiation exposure to the patient and personnel. Onsite personnel should continue to be part of the radiologist led teams. To ensure that, APRNs and PAs should continue to work alongside physicians-led teams.