


<b>Name of Policy:</b>	<u><a href="#">X-ray Quality Assurance Committee</a></u>	 <p><b>THE UNIVERSITY OF TOLEDO MEDICAL CENTER</b></p>
<b>Policy Number:</b>	3364-135-150	
<b>Department:</b>	Radiology	
<b>Approving Officer:</b>	Chief Operating Officer - UTMC	
<b>Responsible Agent:</b>	Chairman & Professor, Radiology	
<b>Scope:</b>	Radiology	
		<b>Effective Date:</b> 4/01/2022
		Initial Effective Date: June 16, 2015
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy		

**(A) Policy Statement**

It is the policy of the University of Toledo Health Science Campus (HSC) and UT Medical Center and the Department of Radiology that an X-ray QA Committee will be appointed as defined below.

**(B) Purpose of Policy**

To define the goals, objectives, composition, and responsibilities and duties of the X-ray Quality Assurance (QA) committee.

**(C) Procedure**

1) Description

The X-ray QA committee is a coordinating body for quality assurance testing and performance improvement initiatives in support of the University of Toledo Medical Center.

2) Objectives

- a) Identify possible quality and patient safety performance improvement projects that will be reported to the Quality and Patient Safety Council.
- b) Evaluate performance of radiation generating equipment annually.
- c) Assure radiation protection is maintained for all staff and patients with and around Radiation Generating Equipment in accordance with Ohio Department of Health Regulations.

3) Composition

The quality assurance committee shall include at least the following members:

- a) A member of the hospital’s executive administration;
- b) The individual responsible for radiation protection;
- c) A radiologist or radiation oncologist;
- d) A certified radiation expert representing each of the following as applicable in each hospital;
  - i. Radiation therapy services
  - ii. Mammography, or
  - iii. Diagnostic radiography other than mammography; and
- e) A management representative of each department of the hospital which has responsibilities involving the handling of radiation-generating equipment.

The members of the quality assurance committee shall be approved by an executive administrator.

4) Responsibilities and Duties

