

Patient records

Patient records must be kept and be available for inspection purposes by DoH.

A patient record / register must be preserved for 5 years.

Patient record information must contain the following detail:

1. date of examination;
2. surname, name,
3. date of birth or ID number
4. age and gender;
5. type of examination;
6. brief clinical indication of the examination;
7. number of exposures (repeat exposures included) and
8. fluoroscopy time, dose results (if available) and the name of the person performing the fluoroscopy procedure
9. total dose read-out or Dose Area Product (DAP) reading (if applicable)
10. brief statement of the diagnostic information obtained from the examination.

Record keeping is also applicable to theatre