

Nirav R. Shah, M.D., M.P.H. Commissioner Sue Kelly Executive Deputy Commissioner

June 1, 2011

Dear Chief Executive Officer,

The New York State Department of Health Patient Safety Center and the Center for Environmental Health would like to call your attention to concerns that have recently been raised about the use of full body x-rays of newborns. These have been referred in the media as "Babygrams", and the term loosely refers to a whole body image of a neonate (i.e., uncollimated) without gonadal shielding. This type of image is rarely clinically indicated, and their use subjects vulnerable neonates to excess and unnecessary radiation.

Concerns over excess radiation exposure are not limited to "babygrams" in the Neonatal Intensive Care Unit (NICU) setting. The recent attention in the media to the issue of excess medical radiation exposure should prompt all facilities to identify quality improvement opportunities in both pediatric and adult medical imaging.

- Last year the Department sent information about the Image Gently campaign to all
  hospital administrators and radiology departments. Components of this campaign
  included information about increasing awareness for both providers and parents on the
  need to protect children from excess medical radiation, and included dosimetry cards
  ("My Child's Medical Imaging Record") that parents could use to track their children's
  radiologic procedures.
  - More information on the Image Gently Campaign of the Alliance for Radiation Safety in Pediatric Imaging can be found at <a href="http://www.pedrad.org/associations/5364/ig/">http://www.pedrad.org/associations/5364/ig/</a>
  - "My Child's Medical Imaging Record" card can be found at <a href="http://www.nyhealth.gov/radiation">http://www.nyhealth.gov/radiation</a> or you may request copies from the Bureau of Environmental Radiation Protection at 518-402-7550 or berp@health.state.ny.us.
- Policies and procedures regarding x-rays for newborns should be reviewed, including standards for clinical appropriateness, achieving appropriate collimation and image quality, shielding, etc. Technique charts specific to the NICU may be needed.
- Quality assurance activities need to be undertaken to verify that the policies and procedures are being followed. Quality improvement should be oriented towards obtaining adequate diagnostic images while minimizing the patient exposures. The quality assurance activities can and should reach beyond equipment monitoring, and include monitoring the use of the appropriateness criteria developed by the AmericanCollege of Radiology, clinical audits, and direct observation of imaging procedures. Accreditation by an outside agency may also provide a review of the



effectiveness of your quality improvement program. For example, by having your CT service accredited, you are assured that the technical and professional components meet acceptable standards of practice.

- Identify and eliminate barriers to proper imaging.
  - Do the radiologic technologists and nursing staff work as a team to optimize imaging studies?
  - Have the radiologic technologists received proper training in pediatric imaging?
  - What feedback is provided to radiologic technologists on their imaging?
  - Does a radiologist address the field of exposure in providing feedback to the technologist?

If you have any questions concerning this correspondence, please visit the New York State Department of Health Bureau of Environmental Radiation Protection Home page at: http://www.nyhealth.gov/radiation or call the Bureau of Environmental Radiation Protection at 518-402-7550.

Sincerely,

John Morley, Medical Director

John Morley

Office of Health Systems Management

Stephen Gavitt, Director

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Bureau of Environmental Radiation Protection