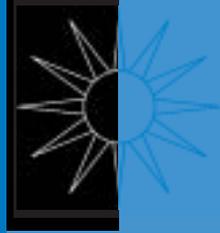


THE COLLEGE OF  
RADIOGRAPHERS



RADIOGRAPHY

# The Scope of Practice 2003

THE SOCIETY OF  
RADIOGRAPHERS





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College of Radiographers' Responsible Officer:  
**Christina Freeman**

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**The College of Radiographers**  
207 Providence Square  
Mill Street  
London SE1 2EW

Telephone 020 7740 7200  
Facsimile: 020 7740 7233  
E-mail: [info@sor.org](mailto:info@sor.org)  
Website: [www.sor.org](http://www.sor.org)



## 1. Purpose

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- 1.1 The aim of this paper is to clarify the current scope of practice for radiographers. This will help radiographers to clearly define their role, justifying its purpose, including their unique contribution to patient care. It will also help to clarify the education and training and other support that is necessary to effectively facilitate developing roles.
- 1.2 The professional body assumes responsibility for leading and managing the profession and strengthening the contribution of radiographers within existing and emerging health care teams, specialising and re-designing roles where appropriate, in line with changing service needs.
- 1.3 In 1996 The Society and the College of Radiographers encouraged radiographers to seize opportunities for role development presented by the dynamic health care environment (CoR 1996). This they have successfully done, diversifying and extending their role to the benefit of the service and patients (NAO 2002). However, the pace of change and the challenges for radiographers to continue to develop their roles and to deliver new services have continued unabated. Consequently radiographers are obliged to seek and adopt even more innovative ways of working.

## 2. Defining Scope of Practice

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- 2.1 Radiography services are central to delivering fast and reliable diagnosis of disease and curative and palliative care for cancer patients. As such radiographers take responsibility for managing the complete radiographic/therapeutic episode within the continuum of care.
- 2.2 Radiography requires the safe use of radiations to achieve a diagnostic or therapeutic health gain. Radiographers have a unique duty to use radiations safely. Exposure to ionising radiation carries risk to both the individual and future generations and the medical use of radiation is the largest controllable factor contributing to the total population dose. The profession of radiography is exceptional in that all of its practitioners carry an individual responsibility for minimising the radiation dose to both individual patients and the genetic inheritance of the public at large.
- 2.3 The current scope of practice for diagnostic radiographers can be defined within the following framework:
- Occupational Role: clinician, manager, researcher and/or educator.
  - Sector: NHS (acute, community, GP practice), higher education, private practice, industry, veterinary practice, armed forces, prisons, customs and excise, research centres.
  - Clinical Departments: clinical imaging, nuclear medicine, ultrasound, magnetic resonance, computed tomography and screening, which includes breast imaging.
  - Specialisms: reporting, mobile units (wards and theatres), minor injuries, accident and emergency, paediatrics, interventional, gastro-intestinal, bone densitometry, dental, vascular, urological, forensic, radiation protection, counselling, quality assurance, informatics, clinical research, health education.
  - Patient Groups: foetal, neonates, children and adults to include those with special needs, elderly and post-mortem.
- 2.4 Diagnostic radiographers take the lead in undertaking the examinations, including the intravenous administration of drugs and contrast agents, and providing the radiographic report and management of the following examinations and specialities:
- Plain film radiography
  - Trauma
  - Ultrasound
  - Nuclear Medicine
  - Computed Tomography
  - Magnetic resonance imaging
  - Breast screening
  - Urography
  - Vascular
  - Gastro-intestinal procedures
  - Clinical Education
- 2.5 Radiographers have an important and developing part to play as integral members of the multidisciplinary team involved in delivering the range of other services e.g. interventional procedures.
- 2.6 The current scope of practice for therapeutic radiographers can be defined within the following framework:
- Occupational Role: clinician, manager, researcher and/or educator
  - Sector: NHS (acute, community, GP practice), higher education, private practice, industry, veterinary practice, research centres.
  - Clinical Departments: cancer units, cancer centres, and nuclear medicine.

- Specialisms: radiation protection, counselling, quality assurance, health education, treatment units, brachytherapy, pre-treatment planning to include computed tomography and magnetic resonance planning, dosimetry planning, portal imaging, pharmacology, informatics, site specialism, clinical research, review and assessment, information and support
- Patient Groups: children and adults to include those with special needs and the elderly.

2.7 Therapeutic radiographers take the lead responsibility for the care and management of the patient during the radiotherapy phase of their cancer journey.

2.8 This routinely includes:

- Radiographer led information, support and counselling
- Planning, verification and delivery of treatment
- On-treatment review and assessment
- Conformal radiotherapy
- Breast volume delineation
- Radiographer led palliative care
- Radiographer prescribing for treatment related toxicity
- Radiotherapy site specialism
- Follow up care
- Management of the service
- Clinical education
- Research and research trials

2.9 Therapeutic radiographers must work collaboratively with other members of the multidisciplinary cancer team to deliver cohesive care for patients.

2.10 The above does not represent the complete range of activities and/or roles undertaken by diagnostic and therapeutic radiographers in practice. In addition, both diagnostic and therapeutic radiographers continue to be involved in research to build the knowledge base and in the transfer of knowledge in their fields.

2.11 The education and training of radiographers is such that they are prepared to deliver the variety of service functions within the above context. Radiographers recognise the limits of their own competency and must practice within them. As such the scope of the individual radiographers practice can be configured in a wide variety of ways. Consequently it can be said that a radiographer is whatever a radiographer chooses to be provided that he/she is adequately educated and trained and competent to do so.

### **3. Defining Individual Scope of Practice**

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3.1 In identifying and communicating their scope of practice, radiographers must consider the roles and the environments in which they work and ensure that they are educated and competent to operate in that role. In making decisions about what tasks they should undertake, radiographers must:

- Work within the advice and guidance given in the Statements for Professional Conduct (CoR 2002) and within current legal and ethical frameworks
- Seek authorisation from the employing authority
- Put the interests of the patient first at all times
- Maintain and develop competence to practice by keeping knowledge, skills and competency up to date
- Recognise any deficiencies in knowledge, skills and competency and take appropriate action
- Be professionally accountable
- Avoid inappropriate delegation.

## 4. Conclusion

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- 4.1 By defining the scope of practice as that which the radiographer is educated, competent and authorised to perform, The Society and College of Radiographers is making clear that it sees no boundaries to practice and that it will support radiographers to further develop their roles.
- 4.2 Looking to the future and with the implementation of the proposals for the four broad categories of practice set out in A Strategy for the Education and Professional Development of Radiographers (CoR 2002), the professional body expects an increase in role development activity and further expansion of the current scope of practice.
- 4.3 According to the Audit Commission many departments are using radiographers more flexibly to take on new roles and there is scope to extend this further (NAO 2002).
- 4.4 A significant part of the diagnostic imaging and radiotherapy and oncology services are now radiographer led. Increasingly, diagnostic radiographers report on images and undertake procedures previously the province of radiologists while therapeutic radiographers provide on-treatment review and assessment and take responsibility for palliative care previously the domain of clinical oncologists. Such activities have now become a recognised part of the scope of practice for radiographers.
- 4.5 The Society and College of Radiographers recognises that for radiographers to be able to deliver improvements in the service to patients undergoing diagnostic imaging and/or radiotherapy the scope of practice needs to be relevant and responsive. Radiographers can undertake the necessary education and training and respond to this challenge supported by the professional body.

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