

# Radiotherapy Patient Referrals and Booking Process Policy

## UK

### 1. Introduction and Purpose

GenesisCare is committed to delivering its strategic and operational objectives in accordance with all applicable legislation, standards, and principles of good governance.

The purpose of this policy is to provide clear guidance to all staff involved in receiving and accepting referrals and undertaking booking processes. The requirements set out in this policy will ensure:

- all patients are referred in accordance with protocols and,
- any exposure to the patient is authorised and justified

### 2. Scope

This policy applies to Therapy Radiographers and Patient Administration Officers receiving Radiotherapy referrals.

### 3. Terms and Definitions

Abbreviation	
RT	Radiotherapy
PAO	Patient Administration Officer
ATT	Agreement to treat (consent form)
MDT	Multi-disciplinary Team
ClinOnc	Clinical Oncologist
IR(ME)R	Ionising Radiation (Medical Exposure) Regulations
CAT	Clinical Advisory Team
CEG	Clinical Escalation Group
RCR	Royal College of Radiologists
Authorised	All medical exposures within GenesisCare are 'authorised' with an appropriate signature on the Radiotherapy booking form or by electronic signature on a computerised administration system.
Justified	The practitioner is responsible for justifying the individual referral.

### 4. Responsibilities

- ClinOnc is responsible for:
  - Providing a completed RT Booking Form containing all the clinical information required including the Radiotherapy prescription
  - Providing a full clinical dataset
  - Providing a Consent/Agreement to Treatment form completed with patient signature and having explained any side effects of treatment
  - Informing GenesisCare of any additional imaging that may have been performed with another provider
  - Informing GenesisCare if the dose to be used is off protocol and providing the source of evidence to support the request
  
- PAOs are responsible for:
  - Registering the patient into MOSAIQ
  - Adding clinical documents into MOSIAQ
  - Requesting any previous treatment information
  - Requesting any previous imaging
  
- Lead Therapy Radiographer is responsible for:
  - Training all radiographers in RT Booking form Assessment and assessing their competence in the process
  - Ensuring that audits are completed in line with this policy e.g. radiotherapy patient pathway audit
  - Completing the RT Booking form Assessment
  - Ensuring that the proposed treatment is within GenesisCare UK standard doses (RT-PRO-051)
  - Ensuring that we have a minimum dataset for the patient
  - Instructing the PAO if any additional imaging, clinical documents or previous treatment information is required
  - Raising CAT cases for non-standard referrals that aren't within the GenesisCare UK Standard Doses (RT-PRO-051)
  
- Therapy Radiographers are responsible for:
  - Completing RT Booking Form Assessment
  - Ensuring the proposed treatment is within GenesisCare UK Standard Doses (RT-PRO-051) and, if not, escalating to lead radiographer

- Ensuring that we have a minimum dataset for the patient  
Instructing the PAO if any additional imaging, clinical documents or previous treatment information is required.

## 5. Policy

### 5.1. Referral

All referrals made for Radiotherapy are made by Clinical Oncologists, all of whom have practicing privileges with GenesisCare UK.

Each Centre has a Consultant Directory, detailing Clinical Oncologists (ClinOncs) with practicing privileges and listing their specialities.

For the purposes of IR(ME)R, and limited to their specialties, the ClinOncs are designated as **Referrers** and **Practitioners** for:

- pre-treatment imaging
- external beam radiotherapy treatment
- concomitant imaging

In all cases the ClinOnc completes the booking form and submits the form to GenesisCare centre staff.

Referrals can be submitted:

- In person
- In paper form
- By email
- Via electronic booking platform

In doing so the ClinOnc is acting as **Referrer** and is referring the patient for:

- Pre-treatment imaging (as specified on the booking form)
- Radiotherapy treatment (as specified on the booking form)
- Imaging during the treatment episodes (Image Guided Radiotherapy - IGRT)

The ClinOnc **MUST** ensure that the clinical dataset is complete and is sufficient to justify radiotherapy planning and treatment radiation exposures in line with IR(ME)R 17, Regulation 10(5).

For a radiotherapy treatment referral, this means providing evidence of:

- Diagnosis
- Histology
- Clinical finding and staging examination must be made available.

The clinical documentation required for evidence of diagnosis will differ per treatment site and machine and may include the following:

- Full Histology report
- Pathology report
- Imaging report (not required for Breast referrals)
- Histopathology report instead of Full histology and Pathology report
- MDT report (Radical patients)

**A summary of this requirement can be found in Appendix 1.**

For each patient, the ClinOnc will prescribe the dose and in doing so is acting as **Practitioner** and justifying the exposures involved in these interventions.

The ClinOnc in completing the booking form should request pre-treatment imaging and is authorising the exposures involved in the pre-treatment imaging (CT scans etc.)

Once the referral has been received by the centre, the PAO and Radiographers will follow the referral and bookings process outlined in the PAO manual and Radiotherapy Booking Assessment Work Instruction.

### **5.2. Clinical Dataset**

Upon receipt of the booking form a Radiographer must check and ensure that adequate and sufficient medical data is available to justify radiotherapy planning and treatment radiation exposure in line with IR(ME)R 2017, Regulation 10(5).

A referral must be made by a registered healthcare profession as defined by IR(ME)R 17. Referrers are entitled by the employer to request that a patient is exposed to ionising radiation as part of their treatment process.

According to "A Guide to Understanding the Implications of the Ionising Radiation (Medical Exposure) Regulations in Radiotherapy", it is essential that the referrer provides sufficient clinical data so that the exposure can be justified.

### **5.3. Dose Prescriptions**

The Radiographer will review the referral form and ensure that the proposed treatment and dose prescription comply with standard GenesisCare protocols.

### 5.4. GenesisCare Doses

GenesisCare uses Standard Doses in accordance with RCR (Royal College of Radiologists), Radiotherapy Dose Fractionation, third edition, March 2019, these are specified in RT-PRO-051.

If the proposed dose prescription is a Standard Dose and listed in RT-PRO-051 then the booking may proceed.

If the proposed dose prescription is not a GenesisCare Standard Dose listed in RT-PRO-051, the radiographer completing the assessment should contact the ClinOnc to request additional evidence to support the justification of the prescribed dose.

Acceptable evidence may include:

- NHS written protocols
- RCR Guidelines
- Radiotherapy trial protocols (if the trials have been completed and published)

It is the responsibility of the Lead Radiographer to raise a case with the CEG as per Clinical Escalation Group & Clinical Advisory Team (CAT) Policy (RT-POL-136), this will include:

- any additional evidence provided by the ClinOnc
- state that this is not a standard treatment dose
- the ClinOncs reasons for giving this treatment
- The local team's recommendation.

Cases that cannot be dealt with by the CEG will be raised with the CAT and this process is managed by the CEG.

Once the proposed dose prescription is approved by CEG or CAT, the booking of the patient may proceed.

## 6. Related Documents

- Radiotherapy Booking Assessment Work Instruction (RT-WI-404)
- PAO Process Manual (PS-MAN-002)
- GenesisCare UK Standard Doses (RT-PRO-051)  
Clinical Escalation Group & Clinical Advisory Team Policy (RT-POL-136)

## 7. References

- Department of Health and Social Care, Ionising Radiation (Medical Exposure) Regulations 2017: guidance, June 2018.
- HCPC (Health and Care Professions Council), Standards of proficiency, 2013.
- RCR (Royal College of Radiologists), Radiotherapy Dose Fractionation, Third edition, March 2019.

## 8. Appendix

- Appendix 1: Table of Linac Treatment Dataset Requirements
- Appendix 2: Table of MR-Linac Dataset Requirements
- Appendix 3: Table of SRS-Linac Dataset Requirements

## Revision History

Version	Revision Date	Revised By (Position Title)	Description of change
14.0	April 2017	Deputy Director of Radiotherapy	Document Reviewed and updated
15.0	April 2019	Portfolio Leads Radiotherapy	Annual review and branding update.
16.0	June 2020	Mark Bowler – Head of Radiotherapy	Annual review and update.
16.1	August 2020	Sanell Pienaar, Compliance Manager	Document Authoriser updated to reflect changes in the business
16.2	February 2021	Kyle Woods – Principal Stereotactic Radiographer	Minor amendment to SABR section to ensure prostate SABR dataset requirements are differentiated
16.3	May 2021	Jo Summersell – Regional Principal Radiographer	Minor amendment to Dataset requirement and table of requirements added
16.4	May 2021	Helen Roadway/Jo Summersell – Regional Principal Radiographer	Minor amendment to Dataset requirement and table of requirements added and MRL table added
16.5	Jan 2022	Helen Roadway – Regional Principal Radiographer	Addition of SRS dataset requirements and changes to Skin dataset requirements
16.6	February 2022	Joanne Rigley – Regional Principal Radiographer	Updated Palliative bone mets required dataset to include imaging report.

# RT-POL-001

Document Owner:  
Head of Radiotherapy  
Document Authoriser:  
Radiation Oncology Committee  
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## Appendix 1: Table of Linac treatment Dataset Requirements

Dataset	Breast	Prostate +/- nodes	Prostate bed +/- Nodes	Head & Neck	Palliative Bone Mets	Other palliative	BCC/SCC	Linac SABR (excluding Prostate)	Dupuytren's and benign skin
RT Booking form	✓	✓	✓	✓	✓	✓	✓	✓	✓
ATT	✓	✓	✓	✓	✓	✓	✓	✓	✓
MDT	✓	✓	✓	✓	✗	✗	✓	✓*	+
Imaging report	✗	✓	✓	✓	✓	✓	✗	✓	✗
Histopathology	✓	✓	+	✓	+	+	+	✗	✗
Clinic letter	+	+	+	+	+	+	✓	+	+

✓ - Required dataset

+

- Useful to have

✗ - Not required

\*SABR Advisory Team MDT Decision Report

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## Appendix 2 – Table of MR-Linac Dataset requirements

Dataset	Prostate +/- nodes	Non-Prostate
RT Booking form	✓	✓
ATT	✓	✓
MR Linac Supplementary Consent form	✓	✓
Imaging report	✓	✓
Histopathology	✓	+
Clinic letter	+	+
SABR Advisory team MDT decision report	✓	✓

✓ - Required dataset

⊕ - Useful to have (maybe required for pre-authorisation)

## Appendix 3 – Table of SRS-Linac Dataset requirements

Dataset	SRS
RT Booking form	✓
SRS Consent Form	✓
GC Neuro MDT	✓
MRI	✓
Histopathology	+
Clinic letter	✓
CT CAP (done within the last 6 weeks)	✓

✓ - Required dataset

⊕ - Useful to have (maybe required for pre-authorisation)