



Key Revisions to the 2016 IAC Standards for Nuclear/PET

A new version of [IAC Standards and Guidelines for Nuclear/PET Accreditation](#) was released on September 15, 2016. Some of the changes made are a clarification or explanation of the previous *Standards*, however, in several instances, the requirements have been modified. All changes are shown in the current *Standards* in highlighting and include:

- **Medical Director Required Training and Experience** (Applicable Standards 1.1.1.5A-1.1.1.8A)
- **Medical Director Responsibilities** (Applicable Standards 1.1.2.1Ai, 1.1.2.1Aiii)
- **Medical Director CME** (Applicable Standards 1.1.3.1A, 1.1.3.3A)
- **Technical Director CE** (Applicable Standards 1.2.3.1A, 1.2.3.3A)
- **Medical Staff Required Training and Experience** (Applicable Standards 1.3.1.5A-1.3.1.8A)
- **Medical Staff CME** (Applicable Standards 1.3.3.1A, 1.3.3.3A)
- **Technical Staff** (*Please Note: The Standard previously titled nuclear medicine technologist(s) is now technical staff in all references.*)
- **Technical Staff Responsibilities** (Applicable Standards 1.4.2.1A)
- **Technical Staff CE** (Applicable Standards 1.4.3.1A, 1.4.3.3A)
- **Direct Patient Care Personnel** (Applicable Standard 1.5.1.2A)
- **Storage** (Applicable Standard 2.3A)
- **Records** (Applicable Standards 3.1.2A, 3.1.3A)
- **Image Interpretation and Reporting** (Applicable Standards 3.2.4A, 3.2.4.1A, 3.2.4.2A, 3.3.3A, 3.4A, 3.4.2A, 3.4.3A, 3.4.3.4A, 3.4.8A, 3.4.8.1A, 3.4.8.2A, 3.4.8.3Aiv, 3.4.8.4Aiv, 3.4.8.4Av, 3.4.8.5A, 3.4.8.6A, 3.4.8.7A, 3.4.8.7Ai-vi, 3.4.9.1A, 3.4.9.1Aiii-v, 3.4.9.2A, 3.4.9.2Aii, 3.4.9.3Aiii, 3.4.10A, 3.4.10.1A, 3.4.10.1Ai-ii, 3.4.10.2Ai, 3.4.10.3Ai-ii, 3.4.11.3A)
- **Patient Identification Policy** (Applicable Standards 4.1.1A, 4.1.1.1A, 4.1.1.4A)
- **Pregnancy Screening Policy** (Applicable Standard 4.1.2.5A)
- **Medical Emergencies Policy** (Applicable Standard 4.1.8A)
- **Handling of Non-Radioactive Pharmaceuticals Policy** (Applicable Standards 4.1.9.1A, 4.1.9.3A)
- **Adverse Drug Reactions Policy** (Applicable Standard 4.1.11A)
- **Radiation Safety and Radioactive Materials Handling Protocols** (Applicable Standards 4.2.1A, 4.2.1.1A, 4.2.1.2A)
- **General Radioactive Materials Handling and Radiation Safety** (Applicable Standards 4.4.1.4A Comment, 4.4.1.5Ai, 4.4.1.5Aii)
- **Administration of Radiopharmaceuticals to Patients** (Applicable Standards 4.4.5.1Ai, 4.4.5.1Aii, 4.4.6A, 4.4.7A)

- **Equipment Quality Control Protocols** (*Applicable Standards 1.2B, 1.2.1B, 1.2.1.1B, 1.2.1.1Bi-vi, 1.2.1.3B*)
- **Imaging Equipment Quality Control – Gamma Camera** (*Applicable Standards 1.3.1B, 1.3.1.4B, 1.3.1.7B*)
- **Imaging Equipment Quality Control – PET and PET/CT Scanner** (*Applicable Standards 1.3.2B, 1.3.2.1B, 1.3.2.2B, 1.3.2.3B, 1.3.2.4B*)
- **Non-imaging Equipment Quality Control – Survey Meter** (*Applicable Standards 1.4.1.1B, 1.4.1.3B*)
- **Non-imaging Equipment Quality Control – Dose Calibrator** (*Applicable Standards 1.4.2.1B, 1.4.2.2B, 1.4.2.4B, 1.4.2.5B*)
- **Non-imaging Equipment Quality Control – Well Counter** (*Applicable Standards 1.4.3.3B, 1.4.3.5B*)
- **Non-imaging Equipment Quality Control – Intraoperative Probes** (*Applicable Standards 1.4.4.1B, 1.4.4.2B, 1.4.4.4B*)
- **Non-imaging Equipment Quality Control – Organ Uptake Probes** (*Applicable Standards 1.4.5.1B - 1.4.5.6B*)
- **Other Equipment Quality Control – Emergency Equipment** (*Applicable Standards 1.5.1.2B, 1.5.1.3B*)
- **General Protocol Guidelines** (*Applicable Standards 2.2.3B, 2.2.3.1B, 2.2.3.1Bi, 2.2.3.2B*)
A substantial change to the *IAC Nuclear/PET Standards* regarding the required administered radiopharmaceutical dose ranges and corresponding radiation effective doses for myocardial perfusion imaging was made. To read the background on this change, please visit intersocietal.org/nuclear/main/dose.htm.
- **Clinical Procedure Protocols** (*Applicable Standards 2.4.1.2B, 2.4.1.3B, 2.4.1.3Bi, 2.4.1.5B, 2.4.2B, 2.4.2.1Bi*)
- **Quality Improvement (QI) Program** (*Applicable Standards 1.1C, 1.1.1C – 1.1.5C*)
- **Quality Improvement Measures** (*Applicable Standards 2.1C*)
- **Quality Improvement Meetings** (*Applicable Standards 3.1.1C*)
- **Quality Improvement Documentation** (*Applicable Standards 4.1.1C, 4.1.1.1C, 4.1.1.2C, 4.1.1.3Ci, 4.1.2C*)
- **Part D: Therapy Procedures**
The majority of the new Part D section already existed in the previous Standards, however, these requirements were moved to a new section for Therapy Protocols and Performance only.
- **Therapy Reporting Protocols** (*Applicable Standards 1.1.3D, 1.1.3.1D, 1.1.3.4D, 1.1.7D, 1.1.8D, 1.1.12.1D-1.1.12.3D, 1.1.14D, 1.1.17.1D-1.1.17.3D*)
- **Therapy Clinical Protocols** (*Applicable Standards 1.2.5D, 1.2.5.1D-1.2.5.3D, 1.2.5.5D, 1.2.7.1D-1.2.7.5D, 1.2.8.1Dii, 1.2.8.2Dvi, 1.2.8.3D*)

Standards that are highlighted are major content changes that were made as part of the September 15, 2016 revision. These **Standards** will become effective on March 15, 2017. Facilities applying for accreditation after March 15, 2017 must comply with these new highlighted **Standards**.