

A Cassette Screen Cleaning Program

I recently noted in an annual ALARA report that a facility was not conducting a screen cleaning program for the cassettes in the main radiology department. The Radiology Manager was quite displeased and called my attention to the fact there is no regulation requiring a screen cleaning program for cassettes other than for mammography.

I would like to suggest that nothing seems to be “black and white” anymore. Rather our world of medical imaging seems to thrive on shades of gray. In this instance, one should remember that we have several regulations to follow, such as California Title 17 and the Federal 10 CFR 20. Additionally, we also have some unwritten rules, such as what JCAHO expects in order for the facility to satisfy their standards. Ditto for the ACR standards. Another example are the myriad commonly accepted “rules” called “Good Medical Practices.”

In today's world of medical imaging, the focus is no longer on individual pieces of equipment. Rather, the focus is on the imaging “system” which encompasses the individual pieces of equipment and much more. Similarly, the focus is no longer on operating in accordance with equipment specifications but rather in achieving optimal image quality, which encompasses the manufacturer's specification and much more.

With regard to the cleaning of cassettes, there are three (3) factors to consider. First, most screen manufacturers recommend cleaning not more frequently than every six months, so annually is just fine. Second, JCAHO requires all imaging systems have a routine QC program, and the cassettes are quite arguably part of the imaging system. And, third, Good Medical Practice suggests that the screens be cleaned and inspected on some routine basis to preclude artifacts that could obscure a proper diagnosis.

While carrying out our function as consulting medical physicists for diagnostic radiology, we try to be very resource conscience. We try to not recommend any expenditure of resources frivolously. And we try to assure that all recommendations are practical. At the same time, we always try to remember that if the image you are producing were of us, then we want to be sure the physician is receiving the best image you can get for him.

In conclusion, we recommend an annual screen cleaning program. Further, all of the screens should be inventoried and a check-off list maintained as documentation (for JCAHO) that the program is really conducted. And don't forget those screens commonly left in the bins of the portable xray units.