Standards of Practice in Interventional Neuroradiology or Endovascular Neurosurgery

WFITN Site Conditions and Technical Operational Guidelines

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SITE CONDITIONS GUIDELINES

Preamble

Endovascular approaches represent one of the most complex aspects of Interventional Neuroradiology. The following recommendations are intended to provide optimal conditions to practice Interventional Neuroradiology.

Art. 1

Interventional Neuroradiology and/or Endovascular Neurosurgery is defined as invasive diagnostic and therapeutic interventions involving the central and peripheral nervous systems, head and neck, brachiocephalic, spine vessels and adjacent structures.

Art. 2

Optimally, endovascular interventions on the brachiocephalic vessels should be practised in authorized Interventional Neuroradiology, Endovascular Neurosurgery institutions.

Art. 3

A healthcare institution can be authorized to practice Interventional Neuroradiology, Endovascular Neurosurgery, if it provides at the same site, the following facilities:

- In-patient hospital beds
- Interventional angiography suite suitably equipped for these activities
- A department of neurosurgery and neurology with vascular expertise
- An intensive care unit
- A department of neuroradiology.

Art. 4

In order to qualify as an Interventional Neuroradiology, Endovascular Neurosurgery approved facility, the institution shall provide the services mentioned in Art. 3 on a full time basis all year around.

Art. 5

The 24h service can be provided by agreement with other Interventional Neuroradiology, Endovascular Neurosurgery sites. Patient transfers should be carried out within a time frame compatible with safety imperatives.

Art. 6

Authorization to practice Interventional Neuroradiology, Endovascular Neurosurgery can only be granted or renewed if the applying institution documents a minimum annual activity. Projected activity is permitted during the

development phase of a service. An agreed level of activity will be defined by the accrediting authority for each applying institution.

Acceptable levels of activity will be set, bearing in mind local circumstances, such as the population of the healthcare catchment area, population density and excessive travel time.

Authorization to practice Interventional Neuroradiology, Endovascular Neurosurgery is valid for five consecutive years. Projected activity is permitted during a development phase of three years.

TECHNICAL OPERATIONAL GUIDELINES

Art. 7

Like other clinicians, interventional neuroradiologists, endovascular neurosurgeons, shall have admission privileges under their care either in dedicated neuroradiology intervention units or in other appropriate facilities.

In-patient, intensive care, and continued monitoring beds shall be made available in sufficient numbers to accommodate interventional neuroradiologists, endovascular neurosurgeons' patients at any time.

The treating physician is responsible for the patient's care, which includes: pre-operative examination and consultation, documented informed consent, post-operative information, follow-up consultations in an out-patient clinic.

When the admitting physician and treating physician are different they are jointly responsible for the care of the patient.

Art. 8a

In order to provide a comprehensive service as stated in Art. 3, the necessary medical personnel should include:

a minimum of two, optimally four, physicians with experience and training in Interventional Neuroradiology, Endovascular Neurosurgery, either on site or in a network ...

Neuro-anesthesiologists or anesthesiologists on the basis of a protocol agreed with the above-mentioned physicians.

Art. 8b

Each intervention requires the presence of the following experienced individuals:

- an interventional neuroradiologist, endovascular neurosurgeon
- a radiographer (technician/technologist) and a nurse, a radiographer or an additional interventional neuroradiologist, endovascular neurosurgeon.

The anesthesiologist should be required, according to local regulations.

Art. 9

The practice of Interventional Neuroradiology, Endovascular Neurosurgery requires having access at all times to properly staffed facilities:

- MRI, CT, ultrasound tests,
- intracranial pressure measurement and continuous recording devices,
- appropriate laboratory testing

Art. 10

According to the local regulations, the practice of Interventional Neuroradiology, Endovascular Neurosurgery requires:

- a digital angiography suite accommodating anesthesia and asepsis conditions similar to an operating theatre,
- a control room, radioprotection measures in accordance with current regulations
- a minimum of a single plane high resolution DSA C-arm and the ability to perform 3D imaging in at least one medium, i.e. CT, MRA or angiography
- or, optimally, a bi-plane digital angiography unit with three-dimensional image reconstruction capabilities.

Art. 11

For sites with regular pediatric activity, the operating suite for Interventional Neuroradiology, Endovascular Neurosurgery, as well as the postoperative recovery arrangements, include medical facilities and an environment adapted to newborn infants and children.

Anesthesia should be administered by medical and paramedical personnel who are skilled in pediatrics.