



Radiology - RIS Downtime Exam Tracking form



SCHEDuler		<i>Scheduler Name</i>			
MRN	Name: Last		First	DOB	
<i>Ordering Provider</i>	<i>Name</i>		<i>Phone Number</i>		<i>Fax Number</i>
STAT	YES / NO	Pt. Type	InPt / OutPt / ER		Patient Location
DT Number			Exam Code		
RIS ACC Number(s)					

RADIologist	<i>Contributing/Responsible Provider Name(s)</i>
Protocol	

TECHnologist(s)	<i>Performing Provider Name(s)</i>	
Medications / Contrast with Strength/Dosage		
Begin Time	Complete Time	Resource
Technologist Comments		

Reading RADIologist (s)	<i>Contributing/Responsible Provider Name(s)</i>
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RUNNER (s)	<i>Front Desk/Scheduler/Technologist Name(s)</i>
Preliminary Downtime Report Delivered through:	
<i>(Circle one)</i>	fax phone Hand deliver

Exam Post entered into RIS system CHECKLIST:	<i>SCHEduler Name</i>	<i>TECHnologist Name</i>	<i>RADIT Name</i>
	<input type="radio"/> Anc Order (RIS)	<input type="radio"/> Exam Protooled (RIS)	<input type="radio"/> PS360 Report Attached
	<input type="radio"/> Add On (RIS)	<input type="radio"/> Enter Meds/Contrast (RIS)	<input type="radio"/> Verify Report in RIS
		<input type="radio"/> Exam Begin/End (RIS)	
		<input type="radio"/> Unspecified Merges (PACS)	