



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Health Service Regulation

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director

Policy for Self Requesting Mammograms

Facilities in North Carolina that offer screening mammography shall not accept self-referred patients pursuant to 10A NCAC 15.0603 (a)(1)(G);

Individuals shall not be exposed to the useful beam except for healing arts purposes. Such exposures shall have been authorized by a licensed practitioner of the healing arts. This provision specifically prohibits deliberate exposure of an individual for training, demonstration or other nonhealing arts purposes.

Facilities may, however, accept self-requesting patients under the following conditions. Facilities who accept self-requesting patients shall maintain policies and procedures available for inspector review. This policy shall document the actions of the facility for self-requesting patients following the patient from point of contact to the end of the mammography procedure. A listing of health care provider(s) willing to accept self-requesting patients should be available for review. A mechanism shall be in place to ensure that this list remains current and this process should be explained to the inspector. A written agreement updated at least annually is strongly encouraged.

As for facilities that do not accept self-requesting mammograms, they **MUST have a policy in place stating that fact.**

Many facilities have chosen to offer screening mammography on a self-requesting basis. These facilities are expected to have a policy that outlines how such patients would be accepted. The policy shall address the following situations:

- a. The self-requesting patient must provide the facility with the name of a referring physician who is willing to provide appropriate follow-up care. This information shall be confirmed by the facility accepting it.
- b. A facility accepting self-requesting patients shall maintain a list of physician(s) who will accept the self-requesting patient for follow-up care. Either the patient or the facility may select the physician for follow-up care. The selected physician, by agreeing to be on the list, is responsible for the appropriate follow-up and treatment protocols.

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