

SAFE INTRODUCTION OF NEW MEDICAL INTERVENTIONAL PROCEDURES INTO CLINICAL PRACTICE

POLICY®

SCHN Policy

- This policy is to be applied when a clinician or a department is considering introducing an interventional procedure that has been undertaken in other facilities in NSW, elsewhere in Australia or internationally but has not been undertaken within SCHN previously.
- The purpose of this policy is to assist clinicians to introduce new interventional procedures which are supported by evidence of efficacy, safety and effective resource utilisation.
- The policy provides a standard process for assessment and approval as well as an agreed process for monitoring the outcomes of new interventional procedures.
- This policy is not intended for the introduction of new interventional procedures that are new to NSW or that require state-wide/ national planning.
- This policy does not apply to emergencies where an interventional procedure is considered by an attending clinician to be required urgently to prevent or minimise harm to a patient.
- Applications under this policy are made to the SCHN Medical and Dental Appointments Advisory Committee.
 - Where there are shared services with SESLHD, consultation and appropriate approval must also be obtained by SESLHD.

Procedure at SCHN

1. To apply, complete an [Application Form \(Form A\)](#) and submit it to the Medical and Dental Appointments Advisory Committee.
2. The Medical and Dental Appointments Advisory Committee must approve the application and complete an [Approval Form \(Form B\)](#).
3. If approved, a [Progress Report \(Form C\)](#) must be completed after six months and submitted to the Medical and Dental Appointments Advisory Committee.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st May 2020	Review Period: 3 years
Team Leader:	Director Clinical Governance	Area/Dept: Clinical Governance

4. If a new interventional procedure is performed as an emergency, the Medical and Dental Appointments Advisory Committee should be notified as soon as possible after the event through the Director of Clinical Governance

If unsure about what to do, contact the **Director of Clinical Governance or his/her delegate on 9845 3475 for advice.**

CHANGE SUMMARY

- Due for mandatory review. No major changes.

READ ACKNOWLEDGEMENT

- All Clinical Medical Staff and relevant Clinical Governance Administration staff should read and acknowledge this document.

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