1	10A NCAC 15.	.2005 is a	adopted as published in 39:19 NCR 1225-1262 as follows:
2			
3	10A NCAC 15	.2005	QUALITY MANAGEMENT PROGRAM
4	(a) Each license	ee or app	olicant subject to Rules within this subpart shall develop, implement, and maintain a quality
5	management pro	ogram to	provide high confidence that radiation will be administered as directed by the authorized
6	user.		
7	(b) Scope and A	Applicab	ility. The quality management program shall address, as a minimum, the following specific
8	objectives:		
9	<u>(1)</u>	Writte	n Directives:
10		(A)	A written directive must be approved by an authorized user prior to the administration of
11			radiation. If because of the patient's condition, a delay in the order to provide a written
12			revision to an existing written directive would jeopardize the patient's health, an oral
13			revision to an existing written directive will be acceptable, provided that the oral revision
14			is documented as soon as possible in writing in the patient's record and a revised written
15			directive is signed by an authorized user within 48 hours of the oral revision.
16		<u>(B)</u>	The written directive must contain the patient's name, treatment site, method of delivery,
17			dose per fraction, total number of fractions, and total dose.
18		(C)	A written revision to an existing written directive may be made provided that the revision
19			is dated and approved by an authorized user prior to the administration of the therapeutic
20			radiation machine dose, or the next fractional dose.
21		(D)	The licensee shall retain a copy of the written directive for three years.
22	(2)	Proced	ures for Administrations. For any administration requiring a written directive, the licensee
23		shall d	evelop, implement, and maintain written procedures to provide that:
24		(A)	Prior to the administration of each course of radiation treatments, the patient's identity is
25			verified.
26		(B)	Each administration is in accordance with the written directive.
27		<u>(C)</u>	Develop a table-shift policy describing action to be taken by staff in the event shifts are
28			used for patient setup and a table shift exceeds limitations established within the treatment
29			<u>plan.</u>
30		(D)	Therapeutic radiation machine final plans of treatment and related calculations are in
31			accordance with the respective written directives by: Checking both manual and computer-
32			generated dose calculations to verify they are correct and in accordance with the written
33			directive, and verifying that any computer-generated calculations are correctly transferred
34			into the consoles of authorized therapeutic medical units;
35		<u>(E)</u>	Any unintended deviation from the written directive is identified, evaluated, corrective
36			action taken, the unintended deviation documented; and

1	(F) The licensee retains a copy of the procedures for administrations for the duration of the
2	license.
3	(c) New Procedures on Established Equipment. Established and commissioned therapeutic radiation machines shall
4	reevaluate equipment parameters, pursuant to this Section, when new procedures are to be performed [that] if the
5	parameters, including dose rate, field size, imaging accuracy, maximum dose, falls outside of the original
6	commissioned parameters.
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8	History Note: Authority G.S. 104E-7;
)	Eff. October 1, 2025.