SOP · RTH-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 57.1

At a glance

- Every course of radiotherapy has a justification and a clinician-signed prescription (RAD-POL-001).
- The treatment plan is checked by a second qualified person before the first fraction (RTH-FRM-001).
- Any discrepancy is corrected and the plan is re-checked before treatment starts.
- Stop and get help straight away if: treatment starts on a plan with no recorded independent check.

1. Purpose

To make sure every radiotherapy plan is checked independently before the first fraction (57.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

To make sure every radiotherapy plan is checked independently before the first fraction (57.1).

5. Responsibilities

Role	Responsibility	Competence
Radiation oncologist	Signs the prescription and the justification	Clinical lead
Medical physicist	Carries out the independent plan check	Radiation oncologist

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Prescribe.

- Record the justification and sign the prescription (RAD-POL-001).

Key point: Prescribed.

Step 2. Check.

- A second qualified person checks the plan and records it (RTH-FRM-001).

Key point: Checked.

Step 3. Correct.

- Correct any discrepancy and re-check before the first fraction.

Key point: Corrected.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Courses with an independent plan check before the first fraction	100%	Monthly	Clinical lead	Hold treatment until checked
Plan discrepancies found and corrected before treatment	100%	Monthly	Clinical lead	Review the planning process

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
RTH-FRM-001	Treatment plan verification record	Record
RAD-POL-001	Radiation justification and dose optimisation (existing, reused)	Policy

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Oncology & Infusion Therapy Safety Endorsement** (AMB-11)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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