



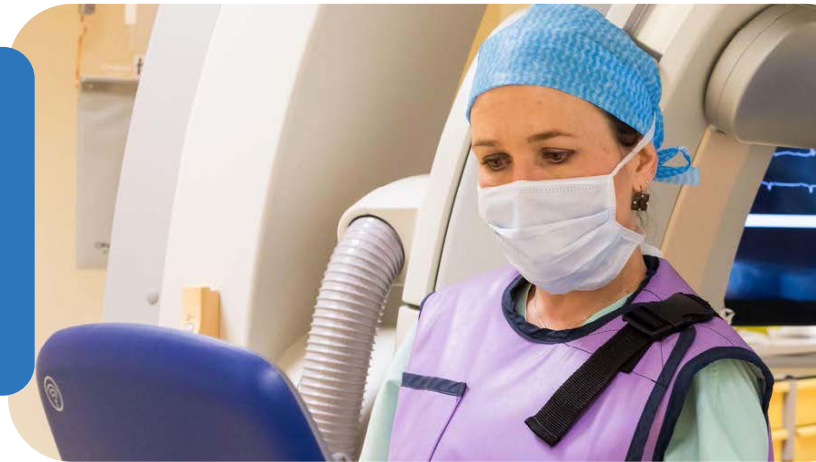
THE
IMAGING
SOLUTIONS COMPANY*



RCS
Radiological Care Services

Total Lead Garment Solutions

The solutions healthcare teams trust for
X-Ray garment care and management



Reinventing X-Ray Garment Management

The process for maintaining the cleanliness and integrity of X-Ray garments is broken, often falling on busy staff and taking time away from patient care. RCS is the world's first company to reinvent X-Ray garment care by providing a comprehensive service platform for hospitals.

Our Services



Cleaning & Sanitization

Following recommendations from the CDC and governing bodies, RCS developed a proprietary two-step process for cleaning & sanitizing.



Garment Repairs

From broken buckles to torn Velcro, RCS provides complimentary repairs for cosmetic damage and other wear and tear related issues.



Annual Integrity Inspections

RCS annually X-Ray scans all garments to check for holes, cracks and tears. All images are saved in RADCOMPLY™ and shared with customers for easy review and compliance.



Inventory Management

RCS inputs garment servicing and inventory information into RCS's cloud-based RADCOMPLY™ platform. Customers have access for survey and audit needs.



Garment Disposal

RCS's EPA-approved garment disposal process provides hospitals a quick, easy, and responsible option for disposing of lead garments.



New Garments

Garments purchased through RCS are asset tagged, X-Ray scanned, and the data is loaded into RADCOMPLY™ before the new pieces arrive.

Why RCS?

When 84% of lead garments carry Staph a and Ringworm*, gain peace of mind with a service contract from RCS. As the world's lead garment servicing leader with over a decade of experience, our services were developed with patient and staff safety in mind and to save teams hundreds of hours on annual integrity inspections and inventory management. Take X-Ray garment management off your to-do list with RCS.

*M. Jaber, M. Harvill, E. Qiao. Lead aprons worn by Interventional Radiologists contain pathogenic organisms including MRSA and Tinea species, JVasc Interventional Radiol. 2014;25(3):S99-S100



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