

International Workshop on Practical Implementation of
Clinical Audit for Medical Exposure to Ionizing Radiation
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Clinical Audit programme for diagnostic radiology: Intent, Design and early experiences

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IAEA
International Atomic Energy Agency

Key issues in clinical audit

The ultimate objective of the IAEA is for Member States to adapt the clinical audit tool and establish their own appropriate sustainable systems for clinical auditing of diagnostic radiology practices that would address their local or national needs.

Suggested Audit structure for QUAADRIL missions

The logistics in organising a Quality Assurance Audit for Diagnostic Radiology Improvement and Learning (QUAADRIL) mission are detailed. Seven steps essential for successful audit are:

1. Request for audit
2. Composition of audit team
3. Preparation for audit
4. Audit site visit
5. The audit report
6. Dissemination of report
7. Evaluation and follow up of audit process

There are three sections described in the QUADRIL document. Each has key principles and criteria for good practice followed by the audit programme for each point.

Section 1: Quality management procedures and infrastructure

key principles and criteria for good practice

- Mission and vision of the diagnostic radiology unit
- Quality management system
- Structure of the diagnostic radiology unit
- Equipment
- **Documentation control**
- Patient confidentiality, feedback and complaints
- Communication

Section 2: Patient related procedures

key principles and criteria for good practice

- Referral of the patient for examination
- **Identification of the patient**
- Examination
- The imaging report
- Report communication
- Continuity of clinical care
- Accident and incident reporting
- Record and film/image retention

Section 3: Technical procedures

key principles and criteria for good practice

- Quality Assurance Infrastructure
- Radiation protection and general safety
- Equipment Quality Assurance Processes
- **Calibration of instrumentation**
- Dosimetry
- Optimisation



The audit process for each key principle and criterion for good practice

4.1.2. → Identification of the patient¶

It is crucial that fail-safe mechanisms be in place to ensure that the patient is correctly identified, the correct exam and the correct anatomical region are studied. There should be a documented protocol to ensure accurate identification of the patient and the exam.¶

In view of the complexity of patient communications, multiple checks and balances should be in place. Constant vigilance is vital to protect patient safety.¶

4.3-PATIENT-RELATED-PROCEDURES-AUDIT-REPORT-FORMS¶	
4.3.2-Identification of the patient¶	Adequacy¶
POLICY AND PROCEDURES for patient id. & exam order-check¶	Y+NI+N+NA¶
Compliance with patient id. POLICY AND PROCEDURES¶	Y+NI+N+NA¶
Compliance with exam check POLICY AND PROCEDURES¶	Y+NI+N+NA¶
Methodology adequacy¶	Y+NI+N+NA¶
Reliability of radiographer/ radiologist patient id. and exam check¶	Y+NI+N+NA¶
Audit process¶	Y+NI+N+NA¶

SUMMARY¶

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4.2.2. → Identification of the patient¶

The audit team should¶

- Check policies and procedures for checking patient identification and exam order accuracy¶
- Evaluate the methodology used to establish accurate patient identification prior to exam (orderly and receptionist)¶
- Assess that radiography/radiology staff reliably confirm the accuracy of the patient identification¶
- Assess that radiography/radiology staff reliably confirm the accuracy of the exam and anatomical area to be imaged¶
- Establish evidence that there is continuing review of staff compliance with above procedures¶