
Audit 24

1) Audit Title

Radiographic image labelling – use of anatomical side markers for projection radiography

2) Standard against which the audit topic is to be compared

To be discussed and agreed locally. All projection radiographs should include a legible anatomical side marker, placed prior to exposure

3) Source of standard (or reference document)

Existing published literature and local/national guidance

4) Type of audit – clinical audit, clinical practice and BSSD related, reporting**5) Target / compliance percentage to be achieved**

100%

6) Item or variable to be audited

Percentage of projection radiographs which have a visible side marker.

7) Method: Retrospective / Prospective / Other

Retrospective

8) Data or information to be collected

Percentage of images which have a side marker. Percentage of images where a side marker is in the primary beam and placed pre-exposure. Percentage of images where side marker was placed at time of post-processing, but pre-exposure marker is visible in secondary beam. Percentage of images where a side marker was only placed at post processing.

9) Sample details (categories, number of patients, collection time period)

For local agreement to ensure representativeness of sample to include range of staff and examination types.

10) Target achieved (yes / no / not applicable)

Yes/No

11) Actions to be taken if the target is not met.

Identify the failures and the reasons for failures. Discuss the results at radiographer audit meetings. Potential further actions might include: Training on correct use of PACS, using radiographer identifiable clip on markers, reminder notices on the X-ray units. Individual result sharing may be appropriate for persistent failures.

12) Timing for re-audit (yes / no / not applicable)

Repeated periodically, with more frequent audits appropriate when compliance levels are low