
Audit 17

1) Audit Title

Auditing the Appropriateness of CT Referrals.

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

This audit can cover a wide variety of CT procedures and can be extended to other forms of imaging (ultrasound/MRI). Standard for compliance to be set and agreed locally.

3) Source of standard (or reference document)

The source of standards will generally be existing published literature and guidances at local, national and international level e.g., the use of CT in head injury.

4) Type of audit – clinical audit, BSSD related, workflow / requesting**5) Target / compliance percentage to be achieved**

To be agreed locally and in light of relevant guidelines.

6) Item or variable to be audited

The appropriateness of referrals for CT procedures, do they align with best practice guidance and recommendations.

7) Method: Retrospective / Prospective / Other

Retrospective or prospective.

8) Data or information to be collected

See above – review of clinical information provided in support of CT request and assessment of appropriateness.

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

To be decided locally, including type of CT procedure to be audited, number of patients, time period.

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

Review results and compliance with standard.

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

A process of education of referrers, review of local referral practices and guidelines and education of radiology staff around rejection of inappropriate imaging requests.

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

This audit should be repeated periodically to ensure continuing compliance or to demonstrate required changes in referral practice have been achieved and maintained. A continuing process of education for referrers is also desirable.