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## Audit 25

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- 1) **Audit Title**  
**Reject rate for projection radiographs**
- 2) **Standard against which the audit topic is to be compared**  
To be discussed and agreed locally with local managerial and radiographic teams, noting variations in published reject analysis rates and between imaging technologies (film-screen, CR, DR)
- 3) **Source of standard (or reference document)**  
Existing published literature and local/national guidance
- 4) **Type of audit – clinical audit, BSSD related, reporting / workflow**
- 5) **Target / compliance percentage to be achieved**  
For local agreement in line with published literature/national guidance
- 6) **Item or variable to be audited**  
Image rejection rate for projection radiography examinations of differing types. Also, to include reason for rejection
- 7) **Method: Retrospective / Prospective / Other**  
Retrospective or prospective
- 8) **Data or information to be collected**  
Number and type of images rejected, documented reasons for rejection
- 9) **Sample details (categories, number of patients, collection time period)**  
To be agreed locally, including areas of radiographic practice to be included, number of patients or period of collection to ensure representativeness of sample.
- 10) **Target achieved (yes / no / not applicable)**  
Compliance with local/national/published standards for the technology (film-screen, CR, DR)
- 11) **Actions to be taken if the target is not met.**  
Root cause analysis to consider areas for future improvement (for example reasons for rejection, reject rates per examination type, common errors) to allow for staff education. Follow up re-audit to evaluate impact of education and training with staff
- 12) **Timing for re-audit (yes / no / not applicable)**  
Repeated periodically, with more frequent audits appropriate when compliance levels are low