
Audit 15

- 1) **Audit Title**
Reject Analysis of Radiological Images.
- 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.
- 3) **Source of standard (or reference document)**
These are derived from existing published literature and available guidances at local, national and international level.
- 4) **Type of audit – clinical audit, BSSD related, workflow**
- 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 image rejection rate, type of examination, reason for image rejection.
- 7) **Method: Retrospective / Prospective / Other**
This audit can be performed retrospectively or prospectively.
- 8) **Data or information to be collected**
Number and type of images rejected, documented reasons for image rejection (e.g., patient positioning, improper patient preparation).
- 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, period of collection.
- 10) **Target achieved (yes / no / not applicable)**
Is there compliance with agreed standards
- 11) **Actions to be taken if the target is not met**
This needs to be managed sensitively, review of reasons for rejection, review of local radiographic practices where necessary, education of relevant staff around key principles.
- 12) **Timing for re-audit (yes / no / not applicable)**
This audit should be repeated periodically to confirm either continuing compliance with standards or, if needed, that necessary improvements have occurred. It is important all/replacement staff are involved proactively in training and education around the importance of high-quality technique in reducing reject analysis rates.