REPORTING RADIOGRAPHER ACCURACY IN DIRECT ACCESS CT REFERRALS

EVALUATING SPECIFICTY AND ESTABLISHING A BASELINE FOR A RADIOGRAPHER LED SERVICE

Introduction

Lung cancer is the second most common cancer in the UK and is often associated with high mortality (NLCA HQIP, 2024). Direct access CT following abnormal chest X-rays (CXRs) supports timely diagnosis and improved survival rates (NHS England,2024).

Radiographer-led reporting of CXRs is common across the UK and has been demonstrated to be valuable and cost effective (Woznitza et al., 2017), with most practitioners able to make referrals for direct access CT.

This retrospective audit evaluates the specificity of radiographers' chest CT referrals following abnormal X-rays in 2024, with the goal of establishing baseline standards to ensure judicious use of cross-sectional imaging for abnormal CXRs.

Methodology

Single centre retrospective audit of all direct access chest CT referrals made by reporting radiographers in 2024. Low-dose plain CT (LDCT) and contrast scans to be included.

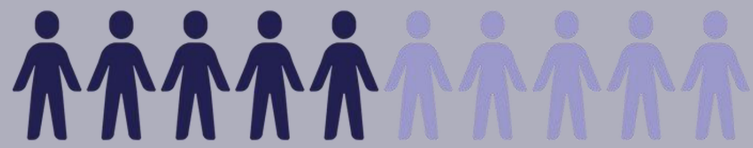
Specificity will be determined according to significant abnormality requiring follow up or suspected cancer, based on the CT results.

Five categories will be used for analysis;
- CAT 1: Malignancy
- CAT 2: No malignancy but positive finding requiring follow up
- CAT 3: NAD - CXR abnormality corresponds to rib #/old atelectasis etc.
- CAT 4: Positive for incidental finding
- CAT 5: Nothing

Analysis

415 Patients were recalled for CT

237 (57%) LDCT vs 178 (43%) Contrast CT



224 (54%) of those recalled had abnormality requiring follow up, or malignancy

90 (37.9%) of LDCT CT were positive for malignancy or abnormality requiring follow up

134 (76%) of Contrast CT were positive for malignancy or abnormality requiring follow up

10 (2%) SCANS DID NOT TAKE PLACE

82% of CT findings fell within CAT1-4

Conclusion

- Results suggest effective utilisation of LDCT and contrast CT scans
  - Contrast CT identified a high proportion of significant abnormalities
  - LDCT provides a crucial role in clarifying equivocal findings
- Findings indicate the positive influence of direct access CT as directed by reporting radiographers on clinical practice.
- Novelty of this audit underscores the need for ongoing monitoring and comparison with future data and external benchmarks to confirm such observations.

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