

YORK DIAGNOSTIC IMAGING

Radiology Reporting Policy

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Document Control

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Document History

Version	Comments	Author	Date
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1.1	2013 Review	R Devlin	Sept 2013
1.2	Header update YDI	R Devlin	May 2014
1.3	Changes to reflect new reporting service	R Devlin	July 2015
1.4	Review and update	R Devlin	May 2017
1.5	Review and update	A Morland	December 2017

Contents

.....	1
Document Control.....	2
Document History.....	2
1. Aim.....	3
2. Scope.....	3
3. Roles and Responsibilities.....	3
4. York Neuro Imaging Reporting Services.....	3
5. Radiologist Reporters.....	3
6. Breaches.....	4
7. Review.....	4

1. Aim

The aim of this document is to provide details of York Diagnostic Imaging's (YDI's) responsibilities and standards relating to the reporting of images acquired at York Diagnostic Imaging.

2. Scope

This document relates to all reported imaging services operated by YDI.

3. Roles and Responsibilities

- 3.1 The Director has ultimate responsibility for ensuring that the reporting services commissioned are appropriate.
- 3.2 Reporting will either be commissioned from 3rd party teleradiology providers using Qualified Consultant Radiologists or commissioned from currently practicing Qualified Consultant Radiologists.
- 3.3 The Registered Manager will be responsible for ensuring that:
 - Incidents or complaints relating to radiology reporting are managed appropriately

4. York Neuro Imaging Reporting Services

4.1 Service standards

- 4.1.1 All clinical images will be reported within 5 business days of acquisition.
- 4.1.2 If the reporting clinician identifies clinically urgent findings when reporting the reporting clinician will be responsible for contacting the referring clinician, the general practitioner or another suitable clinician to ensure that no harm comes to the patient. YDI staff will assist in sharing information between health care professionals.
- 4.1.3 If the reporting clinician identifies clinically important but not urgent findings, the reporting clinician will be responsible for flagging this to the referring clinician in a timely manner. YDI staff will assist in sharing information between health care professionals.
- 4.1.4 If a referrer wishes to discuss a report with the reporting clinician YDI will use reasonable endeavours to facilitate direct contact between referrer and reporter.
- 4.1.5 Under circumstances where the YDI radiographer identifies a significant pathology requiring immediate intervention they will follow the Society of Radiographers recommendations to contact the relevant health care professionals or services.

4.2 Report Standards

- 4.2.1 All reports will contain as a minimum the following:
 - A description of the examination undertaken
 - A summary of the clinical indications
 - A concise report
 - A summary conclusion with a direct answer to any clinical question posed

5. Radiologist Reporters

- 5.1 Where a third party Radiology provider is engaged to provide reporting they shall be responsible for ensuring that only consultant Radiologists are used to report for York Diagnostic Imaging and they shall be responsible for ensuring that each radiologist is appropriately qualified for the work they are asked to report.
- 5.1.1 Where consultant radiologists are engaged directly by York Diagnostic Imaging they must be able to provide evidence of the following on request:
- License to practice (General Medical Council)
 - Registered on GMC specialist register (Radiology or Cardiology)
 - Medical indemnity insurance
- 5.2.1 **Reporting requirements**
- 5.2.1 Reporters must not operate outside of their standard normal working practices when reporting on behalf of YDI and will not be asked to do so.
- 5.2.2 All reporters will follow the process for managing a clinically urgent or unexpected finding as outlined in Section 4 of this document.

6. Breaches

- 6.1 Any breach to this policy by the reporter will be reported to the employing agency and where required, YDI will report incidents or acts of negligence to external agencies.

7. Review

- 7.1 This policy will be reviewed every 3 years or earlier if required due to changes in legislation, guidance or other notifications.