

**Clinical Audit 7669 Printed By: adiamantopoulos on 23/10/2018**

<b>Project Number:</b>	<b>7669</b>
<b>Project Title:</b>	Extravascular incidental findings in lower and upper CT angiography in patients with peripheral limb ischaemia
<b>Proposer:</b>	Athanasios Diamantopoulos
<b>Added Proposers:</b>	Romman Nourzaie
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<b>Email Address:</b>	Athanasios.Diamantopoulos@gstt.nhs.uk
<b>Bleep:</b>	85479
<b>Lead Specialty:</b>	Interventional Radiology
<b>Specialty Lead:</b>	Leo Monzon
<b>Responsible Person:</b>	Athanasios Diamantopoulos

**Reason for carrying out this project:**

Of local concern

Quality Improvement

**Objective(s) of this project: What do you intend to achieve by carrying out this activity?**

To evaluate the incidence and clinical relevance of extravascular incidental findings in CT angiography of the upper and lower extremities in patients presenting with Peripheral arterial disease as well as to identify the periods between the request, performing and reporting of this exams.

**Stakeholders and their involvement (maximum of 5). List the individuals or types of staff who will be involved in or affected by this activity and indicate how they will be involved**

Stakeholder	Design	Data Source	Review	Plan Action	Other
<b>Diamantopoulos Athanasios</b>	✓	✓	✓	✗	✗
<b>Romman Nourzaie</b>	✓	✓	✓	✗	✗

**Will the project involve Patients/Carers? e.g. advise on data collection/planning action**

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**Population (Patients, Service Users, Events or Situations):****Include:**

Peripheral arterial disease patients who have had a CT angiography of the upper and/or lower limbs

**Exclude:****Additional data to be collected for information only (specify):**

The date the CTA was requested, the date it was carried out and the date the scan was reported. Cardiovascular risk factors of the patients e.g. history of smoking, diabetes mellitus, hypertension

**Population or Sample****Number of Cases:**

201 - 300

**Date From:**

01/08/2015

**Date To:**

01/08/2017			
<b>How will they be selected:</b>			
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<b>Data collection strategy:</b>			
Retrospective			
<b>Data sources to be used:</b>			
Patient or service user records			
<b>Identifying problems and finding causes:</b> Describe how you plan to address any problems revealed by the audit to find the root causes so that effective action can be taken			
<b>Standard</b>	<b>Evidence</b>	<b>Exceptions</b>	<b>Definitions</b>
2 month	all reports to be available within 2 months from scan	none	Date scan was requested, date scan was carried out and date scan was reported
<b>Time plan</b>			
<b>Data collected by</b>		31/10/2017	
<b>Findings reviewed by</b>		15/11/2017	
<b>Report submitted by</b>		30/11/2017	
<b>Audit design and measures agreed by</b>		31/10/2017	
<b>Flagged case reviewed by</b>		02/11/2017	
<b>Problems/causes analysed by</b>		04/11/2017	
<b>Action plan implemented by</b>		04/12/2017	
<b>Remeasurement completed by</b>		30/11/2017	
<b>Identifying patients or carers</b>			
<b>Data collected WILL NOT include:</b>			
<b>Name</b>	✓		
<b>Date of birth</b>	✗		
<b>Hospital or patient number</b>	✗		
<b>Other easily linked identifiers</b>	✓		
<b>Identifying Healthcare or other professionals</b>			
<b>Data collected WILL NOT include:</b>			
<b>Names</b>	✓		
<b>Professional registration or PIN numbers</b>	✓		
<b>Other easily linked identifiers</b>	✓		
<b>Reports or representations will not include any of the above (including initials)</b>	✓		
<b>Storing information</b>			
<b>Code sheets or lists to protect identity will be used</b>	✓		
<b>Code sheet will be kept securely and separately from main data</b>	✓		
<b>Data (in any format) will be stored in a secure place</b>	✓		
<b>Patient records or any other identifiable information will</b>	✓		

not be removed from GSTT site	
No patient identifiable data will be kept on laptops, memory stick or other removable storage device	X
NO patient identifiable information will be emailed to a non NHS email account (e.g. Hotmail, Yahoo, Google etc.)	✓
Data will be accessed by the auditing team (or those specifically authorised by the lead clinician) only	✓
Password protected databases or spreadsheets will be used	✓
Data sheets (electronic or hard copy) will be kept and disposed of in accordance with Trust Information Governance policy	✓
<b>Is Audit on forward plan</b>	
No	
<b>Specialty Lead Comments</b>	
No comments	
<b>Directorate Lead Comments</b>	
No comments	
<b>CG Comments</b>	
No comments	