

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

Project Number:	7669
Project Title:	Extravascular incidental findings in lower and upper CT angiography in patients with peripheral limb ischaemia
Proposer:	Athanasios Diamantopoulos
Added Proposers:	Romman Nourzaie
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Bleep:	85479
Lead Specialty:	Interventional Radiology
Specialty Lead:	Leo Monzon
Responsible Person:	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
Diamantopoulos Athanasios	✓	✓	✓	✗	✗
Romman Nourzaie	✓	✓	✓	✗	✗

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

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			
How will they be selected:			

Data collection strategy:			
Retrospective			
Data sources to be used:			
Patient or service user records			
Identifying problems and finding causes: Describe how you plan to address any problems revealed by the audit to find the root causes so that effective action can be taken			
Standard	Evidence	Exceptions	Definitions
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
Time plan			
Data collected by		31/10/2017	
Findings reviewed by		15/11/2017	
Report submitted by		30/11/2017	
Audit design and measures agreed by		31/10/2017	
Flagged case reviewed by		02/11/2017	
Problems/causes analysed by		04/11/2017	
Action plan implemented by		04/12/2017	
Remeasurement completed by		30/11/2017	
Identifying patients or carers			
Data collected WILL NOT include:			
Name	✓		
Date of birth	✗		
Hospital or patient number	✗		
Other easily linked identifiers	✓		
Identifying Healthcare or other professionals			
Data collected WILL NOT include:			
Names	✓		
Professional registration or PIN numbers	✓		
Other easily linked identifiers	✓		
Reports or representations will not include any of the above (including initials)	✓		
Storing information			
Code sheets or lists to protect identity will be used	✓		
Code sheet will be kept securely and separately from main data	✓		
Data (in any format) will be stored in a secure place	✓		
Patient records or any other identifiable information will	✓		

not be removed from GSTT site	
No patient identifiable data will be kept on laptops, memory stick or other removable storage device	✗
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	✓
Is Audit on forward plan	
No	
Specialty Lead Comments	
No comments	
Directorate Lead Comments	
No comments	
CG Comments	
No comments	