# Guideline

**Document Number: QH-GDL-017-2015** 

## **Provision of Diagnostic Imaging Reports**

#### 1. Purpose

This guideline provides recommendations regarding best practice to support the reporting of diagnostic imaging procedures.

## 2. Scope

This Guideline provides information for all Queensland public health system employees (permanent, temporary and casual) and all organisations and individuals acting as its agents (including Visiting Medical Officers and other partners, contractors, consultants and volunteers).

#### 3. Related documents

#### Standards, procedures, guidelines

- Australian Council on Healthcare Standards (ACHS) Radiology Indicators Version 5 (2014) http://www.achs.org.au/media/117185/radiology v5.pdf
- Health Insurance Act 1973 https://www.legislation.gov.au/Details/C2016C01004
- Health Insurance (Diagnostic Imaging Services Table) Regulation 2016 <a href="https://www.legislation.gov.au/Details/F2016L01303">https://www.legislation.gov.au/Details/F2016L01303</a>
- Diagnostic Imaging Accreditation Scheme (DIAS) Practice Accreditation Standards, Department of Health <a href="http://www.health.gov.au/internet/main/publishing.nsf/Content/di-DIAS-Prac-Accred-Standards-1-January-2016">http://www.health.gov.au/internet/main/publishing.nsf/Content/di-DIAS-Prac-Accred-Standards-1-January-2016</a>
- Credentialing and defining the scope of clinical practice (QH-HSD-034:2014) https://www.health.gld.gov.au/directives/docs/hsd/gh-hsd-034.pdf

## 4. Guideline for Diagnostic Imaging Reports

#### 4.1. Provision of Reports

Queensland Health patients require timely access to appropriate diagnostic imaging services to enable the most appropriate choice of treatment.

A diagnostic imaging service should comprise both a diagnostic imaging procedure and a report on that procedure within a clinically appropriate timeframe.

An appropriately credentialed radiologist or medical practitioner should be responsible for the supervision, interpretation and reporting of the diagnostic imaging procedure. All or part of the report preparation may be delegated to a suitably qualified practitioner; all authors should be identified on the report.

The report should be made available to the referring clinician as part of the patient's medical record, i.e. the patient chart or relevant information system. Where diagnostic imaging is provided in conjunction with a surgical procedure, the findings may be noted in the patient record and included or referenced in the radiology report.



The report should be available at a time appropriate to inform a clinical decision. This includes taking all reasonable steps to advise the requesting clinician about urgent or unexpected findings.

Where an amendment or addendum to a report is made, this should be identified as such in the report and under whose authority it has been made. The treating clinician should be notified of a clinically significant change.

#### 4.2. Monitoring of Reporting

#### 4.2.1. Reporting rates

Hospital and Health Services (HHS) should provide data on a monthly basis as outlined in *the Procedure* for monitoring monthly radiology reporting rates <a href="http://gheps.health.gld.gov.au/hssa/radiology/docs/guidelines/proc-monitoring-rep.pdf">http://gheps.health.gld.gov.au/hssa/radiology/docs/guidelines/proc-monitoring-rep.pdf</a>.

Reporting rates are monitored by Healthcare Purchasing and System Performance (HPSP) in accordance with the HHS Performance Management Framework, and are included in the patient safety and quality quarterly reports distributed by the Patient Safety and Quality Improvement Service (PSQIS). If reporting rates fall below the clinically acceptable range, this is escalated through the HHS Relationship Management Group.

#### 4.2.2. Key performance indicators

Each HHS should have a local procedure for monitoring the key performance indicators described in *Key Performance Indicators for Diagnostic Imaging Services*<a href="http://gheps.health.gld.gov.au/hssa/radiology/docs/guidelines/guide-kpi-gh.pdf">http://gheps.health.gld.gov.au/hssa/radiology/docs/guidelines/guide-kpi-gh.pdf</a>.

## 5. Definitions of terms used in the guideline

Term	Definition / Explanation / Details	Source	
Diagnostic Imaging Service	Any service listed in the Diagnostic Imaging Services Table of the Medicare Benefits Schedule	Health Insurance Act 1973	
Diagnostic Imaging Procedure	A procedure for the production of images (for example, X-rays, CT, Ultrasound, MRI, Nuclear Medicine) for use in the rendering of diagnostic imaging services	Health Insurance Act 1973	
Diagnostic imaging examination	A single diagnostic imaging event that aligns with a single exam code and descriptor in the QH Imaging Exam Catalogue.	QH Imaging Exam Catalogue	
Reported	A final validated report is available to the referring clinician		
Report availability  The radiology report should be available to the referrer within the time specified in the health care organisation's own guideline or policy		ACHS Clinical Indicator: RADI Area 1: Report availability	
Clinically appropriate timeframe	A time that is appropriate to inform a clinical decision.		

# 6. Document approval details

### **Document custodian**

Chief Operating Officer HSQ

**Approval officer** 

Chief Executive HSQ

Approval date: 30 November 2016

## 7. Version control

Version	Date	Prepared by	Comments / reason for update
1	19/06/2013	Tanya Oliver	Transition from policy to guideline
2	02/03/2015	Susan Green	Update approved by Radiology Strategy Group
3	28/11/2016	David Thiele	Changed all occurrences of "shall" to "should". Updated section 4.2.1 with current monitoring bodies. Section 4.2.2 refers to KPI guideline.