

## Document Control

<b>Title</b> <b>Standard Operating Procedure for Repeat/ reject analysis in Mammography</b>			
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0.2	Nov 2019	Draft	Sent to RMG for approval, noted stakeholders and responsible contact not correct. Details corrected. Also main contact email address updated. Sent to mammography team for consultation again as changes not recorded. Governance lead and Medical Physics also consulted.
0.3	Dec 2019	Draft	Draft approved by Helen O'Brien Medical Physics
0.4	Jan 2020	Draft	Changes made as advised by Governance Lead. Draft approved by Mammography team and sent to RMG for final approval.
1.0	Feb 2020	Final	Approved at Radiology Management Group
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<b>Lead Director</b> Lead Clinician in Clinical Radiology			
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<b>Consulted with the following stakeholders: (list all)</b> <ul style="list-style-type: none"> <li>Mammographers</li> <li>Medical Physics</li> </ul>		<b>Contact responsible for implementation and monitoring compliance:</b> Lead Mammographer	
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**Approval and Review Process**

- Radiology

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## 1. Background

- 1.1.** A mammographer is a specialist breast radiographer and is responsible for producing images of the highest quality to enable cancer detection rates to be maximised. The mammographer has a primary role to play in the woman's experience, satisfaction and continued acceptance of the examination. The needs of individual women and their circumstances must be recognised to ensure a satisfactory and positive experience.

- 1.2. Early experience of changing from analogue to digital showed that the number of repeat images may increase initially. A log of all repeat examinations must therefore be kept and regularly audited. The design of the PACS/digital systems should allow for repeat and reject analysis (Public Health England, 2013).
- 1.3. Mammographers must achieve optimum image quality with as low a radiation dose as practicable. There are specific responsibilities under IR(ME)R 2017) for justifying and thereby minimising repeat mammographic examinations. The NHS Breast Screening Programme (NHS BSP) 'Guidance on collecting, monitoring and reporting technical recall and repeat examinations' (2017) states that it is important for a unit to carry out audit on a regular basis and the outcome of this audit should be available for discussion and for feedback to the mammographers (Public Health England, 2017).
- 1.4. Although the NHS BSP recommend audit on a monthly basis, given the smaller numbers of mammograms undertaken by mammographers in this hospital we will perform this analysis every three months.
- 1.5. The NHSBSP minimum standard for repeat and recall examinations is < 3% of total examinations (Public Health England, 2013). Given the nature of symptomatic imaging, this may be difficult to achieve but without historical audit data in this department, there is currently no other standard to aim towards.

## 2. Purpose

- 2.1. The Standard Operating Procedure (SOP) has been written to:

- To identify the number of repeated and rejected x-rays in mammography.

### 3. Scope

- 3.1.** This Standard Operating Procedure (SOP) relates to the following staff groups who may be involved in the operation of the mammography unit:
- Mammographers
  - AP Mammographers
  - Medical Physics

### 4. Location

- 4.1.** This Standard Operating Procedure applies to Siemens Mammomat Inspiration Unit used at the Northern Devon Healthcare Trust.
- 4.2.** 'Quality assurance' can be implemented in the mammography room by competent staff available to undertake this role (Mammographers and AP Mammographers).
- 4.3.** Staff undertaking this procedure must be able to demonstrate continued competence as per the organisations policy on assessing and maintaining competence.

### 5. Equipment

The equipment required for the QA is listed below.

- Siemens Mammomat Inspiration Unit

### 6. Procedure

- 6.1.** When undertaking the mammogram, the Mammographer records their initials against the examination. This should be recorded in the first drop down box. If Mammographers are working together both names should be recorded in this box (whether trainee or not as this will record as a separate statistic).
- 6.2.** Open up patient browser
- 6.3.** Click on the 'management of rejected/repeated images' button ?
- 6.4.** At the bottom of the next box that appears, click on 'show analysis'

- 6.5. Then select 'Export analysis'. Save data on to a USB stick, (there is one specifically for this use in the mammography office). To save this click 'save in' and select the USB drive from the drop down box.
- 6.6. Safely remove the USB stick from the unit.
- 6.7. This data can be uploaded in to an Excel spreadsheet by then inserting the USB stick in to a computer (NB check figures match those on the Siemens mammomat screen as sometimes the reject images and repeated images are uploaded incorrect).
- 6.8. As per the NHSBSP, total repeat and recall examinations should be < 3% of total examinations (Public Health England, 2013).
- 6.9. Delete this data on the Siemens Mammomat following the reject analysis by selecting 'reset'.

## 7. References

- Public Health England (2017) NHS Breast Screening Programme Guidance on collecting, monitoring and reporting technical recall and repeat examinations, London: PHE publications
- Public Health England (2013) Routine quality control tests for fullfield digital mammography systems Equipment report 1303: fourth edition, London: PHE publications
- Ionising (Medical Exposures) Regulations 2017. Statutory Instruments 2017

## 8. Associated Documents

- The Quality Assurance of Procedures Standard Operating Procedure-IR(ME)R 2000