Template: Ventilation/Perfusion Scans: Clinical Audit of Nondiagnostic Scans Following Wider Application of SPECT and Transition to Trinary Reporting

Aim

To assess how many studies are reported as non-diagnostic after beginning to perform SPECT imaging, when possible, for all ventilation/perfusion (V/Q) scans for diagnosing pulmonary embolism (PE) and utilizing a trinary system of reporting (no PE, non-diagnostic or PE present).

Methodology

All relevant lung perfusion scans preformed over a two-month period of time were reviewed.

Target

Less than 3.5% should be reported as non-diagnostic.

References:

1. Successful and Safe Implementation of a Trinary Interpretation and Reporting Strategy for V/Q Lung Scintigraphy. Glaser et al Journal of Nuclear Medicine. 52(10):1508-12. 2011.