A STUDY ON QUALITY CONTROL PROTOCOLS IN THE DEPARTMENT OF RADIOLOGY

SUMMER TRAINING AT COLUMBIA ASIA

INTRODUCTION -

1. Quality control protocols are ingenious of Columbia Asia hospitals and government outlined guidelines to run a radiology department.
2. The organisation observes following protocols – **clinical co relations, re-do's of procedures and patient waiting time**.
3. In addition to the protocols of Columbia Asia , the organisation also follows the guidelines which are mandated by regulatory body such as AERB (Atomic Energy Regulatory Board) India .
4. Clinical co relations checks the feasibility of procedures recommended to its outcome , re do's checks the number of time procedure is repeated and patient waiting time helps in finding out the reason of delays in radiological procedures.

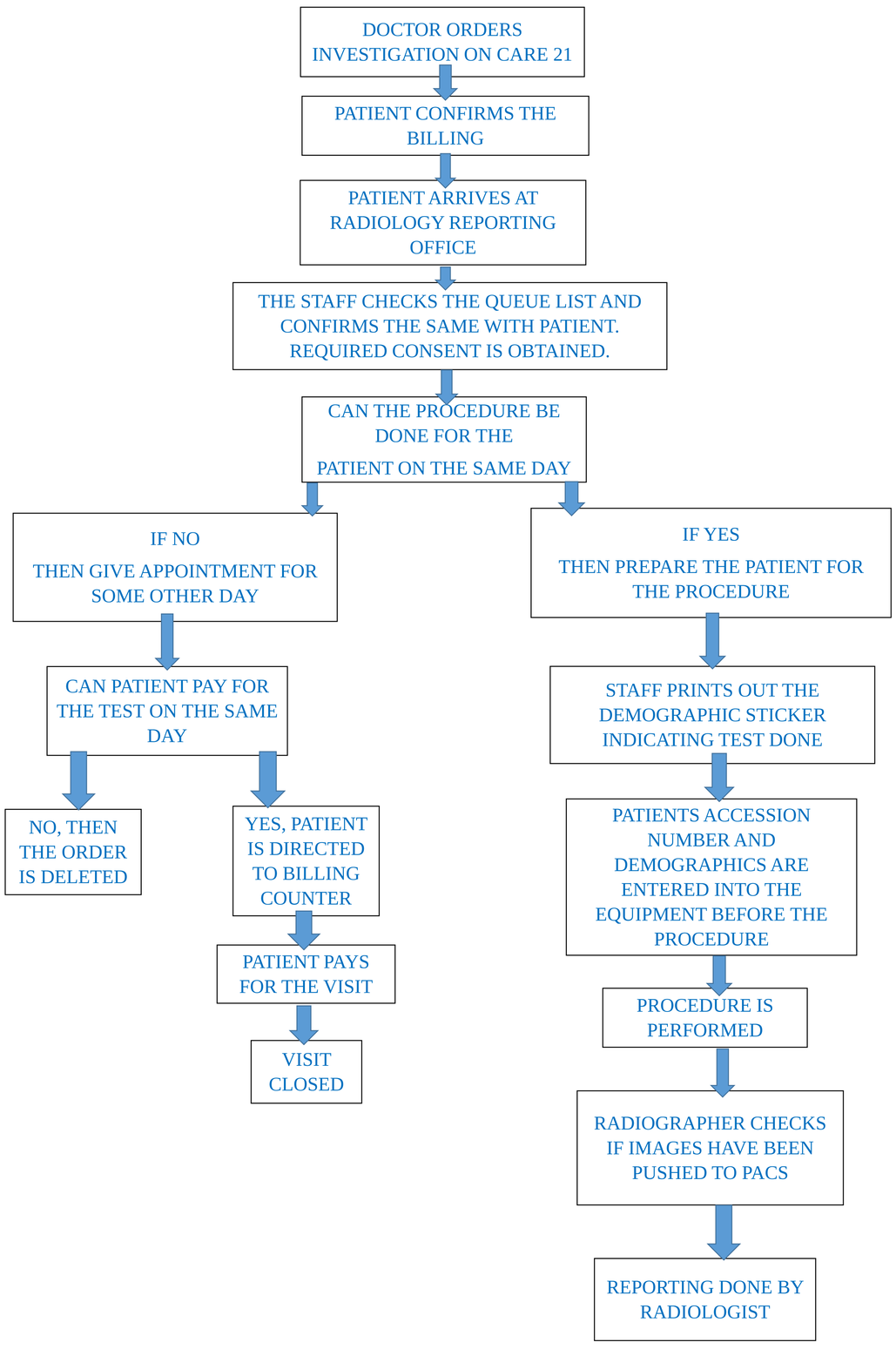
OBJECTIVES –

1. To determine the accuracy in clinical diagnosis and repetition of procedures.
2. To determine the delays in the procedures done.

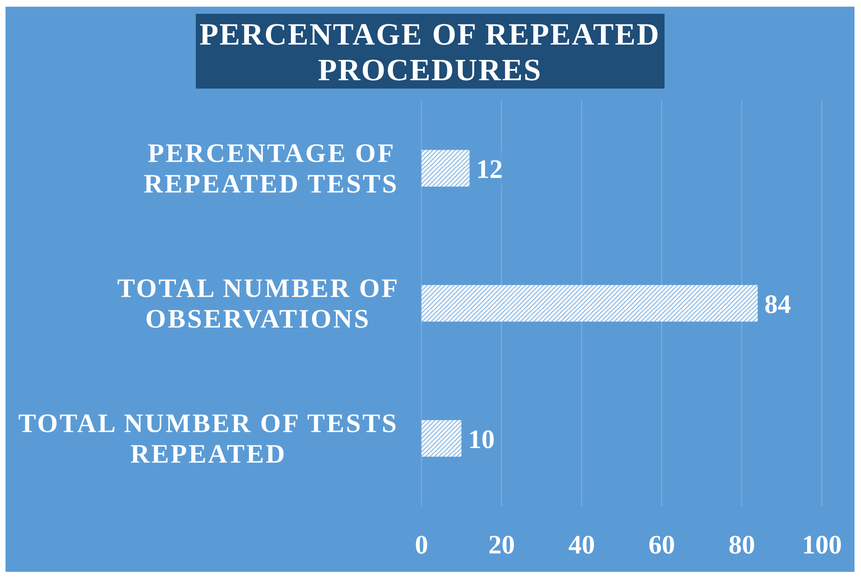
RESEARCH METHODOLOGY –

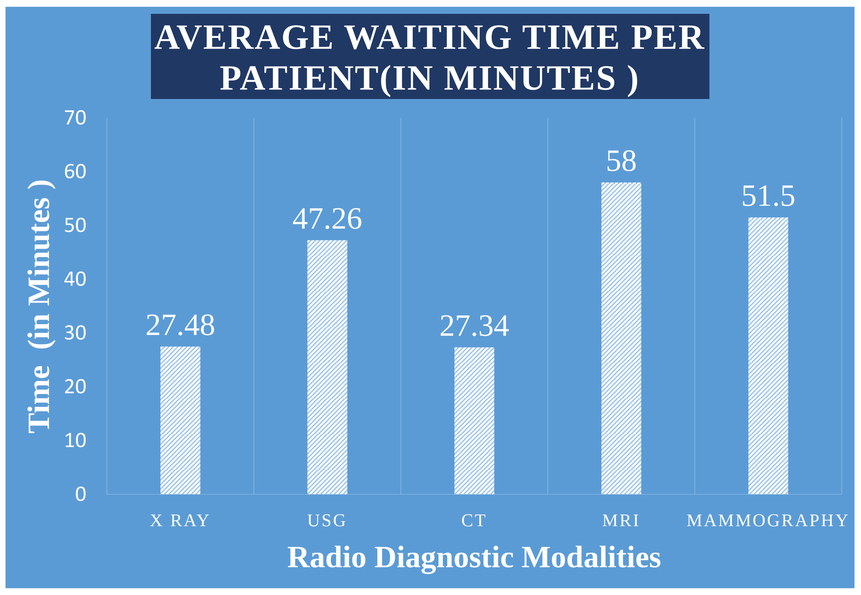
- **STUDY TYPE** – Observational and Analytical study.
- **STUDY SAMPLE** – All the Radiological procedures performed from 1st of April to 31st of May .
- **STUDY PERIOD** - 2 months (1st April to 31st May 2016)
- **SAMPLE SIZE -** A sample of 284 patients were taken for the study

PROCESS ANALYSIS IN RADIOLOGY :-

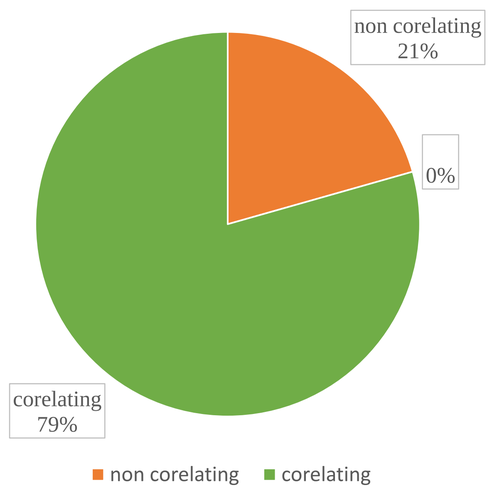


FINDINGS





Percentage Distribution Of Clinical Diagnosis



RECOMMENDATIONS

- To reduce the repetitions , technicians should be well trained.
- Patient should be pre informed about the procedural guidelines for their full cooperation.
- X ray Film Positioning should be checked again before beaming.

- Unchecked appointment allotting leads to backlog and hence unrest amongst patients. At the time of allotting appointment slots, it should be checked that whether the previous procedure is going to exceed the ideal half an hour slot time. If yes then the patient should be given the next slot.
- There should be an attendant at the reporting office who should be particular of only making entries.

- Availability of the Radiographers according to the given appointment slot should be checked.
- Repetition should be brought down to as low as 5 percent as repetition of the procedure automatically adds up to the wait time for the next patient and so on.

- Clinical accuracy is of 79 % . Any accuracy higher than the available one is preferred.

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