

Emergency Imaging Audit - MRI provision for suspected acute cauda equina syndrome

## **In-hours**

* 1. Does your department perform MRI for suspected acute cauda equina syndrome (CES during in-hours?
○ Yes >Q2
○ No >Q24
* 2. Is there a dedicated acute cauda equina syndrome (CES) pathway in your department during in-hours?
○ Yes
○ No
* 3. Are there on-site scanning facilities in place for suspected acute CES during in-hours?
○ Yes >Q5
○ No >Q4
* 4. Is there a patient transfer policy in place for scanning off-site during in-hours?
○ Yes
○ No
* 5. Approximately how many MRI scans for suspected acute CES are performed in your
department each month during in-hours?
* 6. Approximately, what proportion of MRI scans for suspected acute CES that are
performed in your department during in-hours are positive for CES?

Please select tick all the apply.  On-site radiology consultant/SpR (in-house) Off-site radiology consultant/SpR (in-house) Off-site radiology consultant (teleradiology) No vetting required Other (please specify)  * 8. Does your department have a target timeframe for performing an MRI scan for suspected acute CES in-hours? Yes No If yes, please specify  * 9. Does your department have a target timeframe for reporting for suspected acute CES in-hours? Yes No If yes, please specify  * 10. Who provides the first MRI report for suspected acute CES during in-hours? Please select all that apply. On-site radiology consultant On-site radiology consultant (teleradiology)  * 11. Is there formal documentation between reporting radiologist and referring clinician for discussion of findings in-hours? Yes No ut-of-hours  12. Define out-of-hours in your department.	On-site radiology consultant/SpR
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Off-site radiology consultant/SpR (in-house)   Off-site radiology consultant (teleradiology)   No vetting required   Other (please specify)	
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for discussion of findings in-hours?  Yes  No  No	Off-site radiology consultant (teleradiology)
No No ut-of-hours	
ut-of-hours	○ Yes
	○ No
12. Define out-of-hours in your department.	ut-of-hours
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* 13. Does your department perform MRI for suspected acute cauda equina syndrome (CES) during out-of-hours?
Yes >Q14
○ No >Q24
* 14. Is there a dedicated acute cauda equina syndrome (CES) pathway in your department during out-of-hours?
○ No
* 15. Are there on-site scanning facilities in place for suspected acute CES during out-of-hours?
○ No >Q16
* 16. Is there a patient transfer policy in place for scanning off-site during out-of-hours?
Yes
○ No
* 18. Approximately, what proportion of MRI scans for suspected acute CES that are
performed in your department during out-of-hours are positive for CES?
* 19. Who is the MRI scan for suspected acute CES vetted by during out-of-hours? Please select all that apply.
On-site radiology consultant/SpR On-site radiographer
Off-site radiology consultant/SpR (in-house)
Off-site radiology consultant (teleradiology)
No vetting required
Other (please specify)

	Yes
	) No
If v	es, please specify
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	1. Does your department have a target timeframe for reporting for suspected acute :-of-hours?
	Yes
	) No
If v	es, please specify
	I
* 2	2. Who provides the first MRI report for suspected acute CES during out-of-hours?
Ple	ase select all that apply.
	On-site radiology consultant
	On-site radiology SpR
	Off-site radiology consultant/SpR (in-house)
	Off-site radiology consultant (teleradiology)
* 2	3. Is there formal documentation between reporting radiologist and referring clinic
for	discussion of findings out-of-hours?
	Yes
	) No
. Те	extbox for clarification of answers/comments.
ank	you for completing the questionnaire.
	a will be held in accordance with the General Data Protection Regulation (2018). You can find out bout our data protection policy and procedures at <a href="https://www.rcr.ac.uk/about-us/policies/data">https://www.rcr.ac.uk/about-us/policies/data</a>
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