	NATIONAL RADIOLOGY QI PROGRAMME KEY QUALITY INDICATORS
PEER REVIEW	
Prospective Review	Number of accession numbers with prospective peer review (expressed for each modality and as a % of total accession numbers for each modality
Retrospective Review Assigned Review	Number of accession numbers reviewed (expressed for each modality and accession number type and as a % of total accession numbers for each modality) Number of accession numbers referred for consideration at Radiology Quality Improvement meetings (expressed as a % of total cases reviewed, by modality) (Apply to both Retrospective and Assigned Review.)
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RADIOLOGY ALERTS	
Critical	 Number of Radiology Alerts where the acknowledgement was received within the guideline acknowledgement time (expressed as a % of the number of Radiology Alerts) Number of Radiology Alerts for each urgency level (expressed as % of total workload) Number of acknowledged communicated cases of unexpected and clinically significant radiological findings (expressed as % of total workload)
Urgent	
Unexpected - Clinically Significant	
REPORT TURNA	ROUND TIME
The % of cases with	Report Turnaround Times within either 24hrs or 72hrs for all and by referral source and modality
Summary Data -	require manual input to NQAIS-Radiology by Consultant Radiologist
RADIOLOGY QUALITY IMPROVEMENT (RQI) MEETINGS	
Number of accessic Number of accessic (to include Clinico-I Number of accessic	sed as percentage of persons in attendance out of all invited. on numbers reviewed at RQI meeting (expressed as a percentage of total workload) on numbers reviewed at RQI meeting by source: Peer Review, MDM Radiological conferences) on numbers reviewed at RQI meeting by outcome: rcentage of total workload)
MULTIDISCIPLIN	ARY MEETINGS (MDM)
Number of patients (expressed as a % c Number of patients	Clinico-Radiological Meetings held reviewed at these MDMs / Clinico-Radiological Meetings of total patients) referred to a Radiology Quality Improvement Meeting of total patients reviewed at MDM / Clinico-Radiological Meeting)
OUTCOME MEETINGS (Interventional Radiology)	
Number of patients	is held reviewed (expressed as a percentage of total accession numbers) for which learning points were listed or difficulties perceived reentage of total accession numbers).