

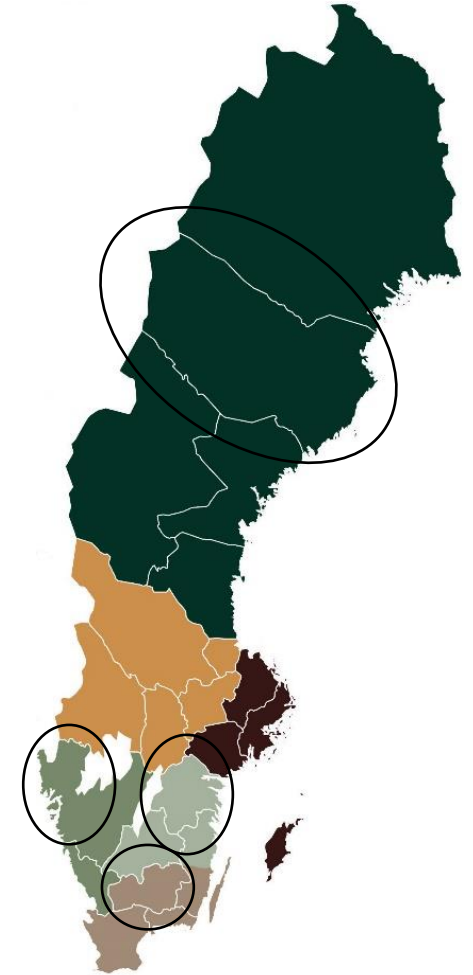
EU JUST CT 

Audit of CT justification Sweden

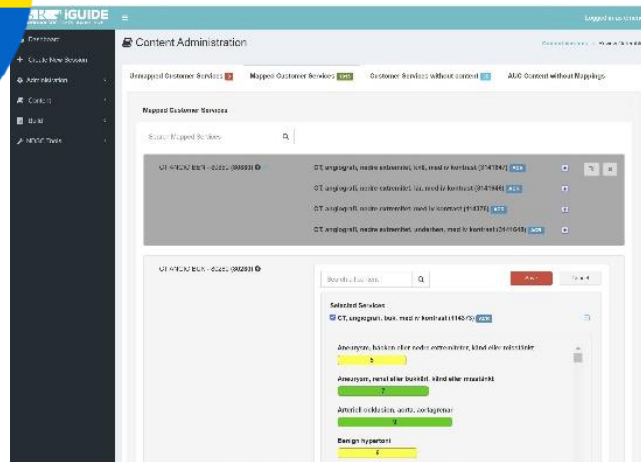
Henriettæ Ståhlbrandt, MD, PhD

CT audit

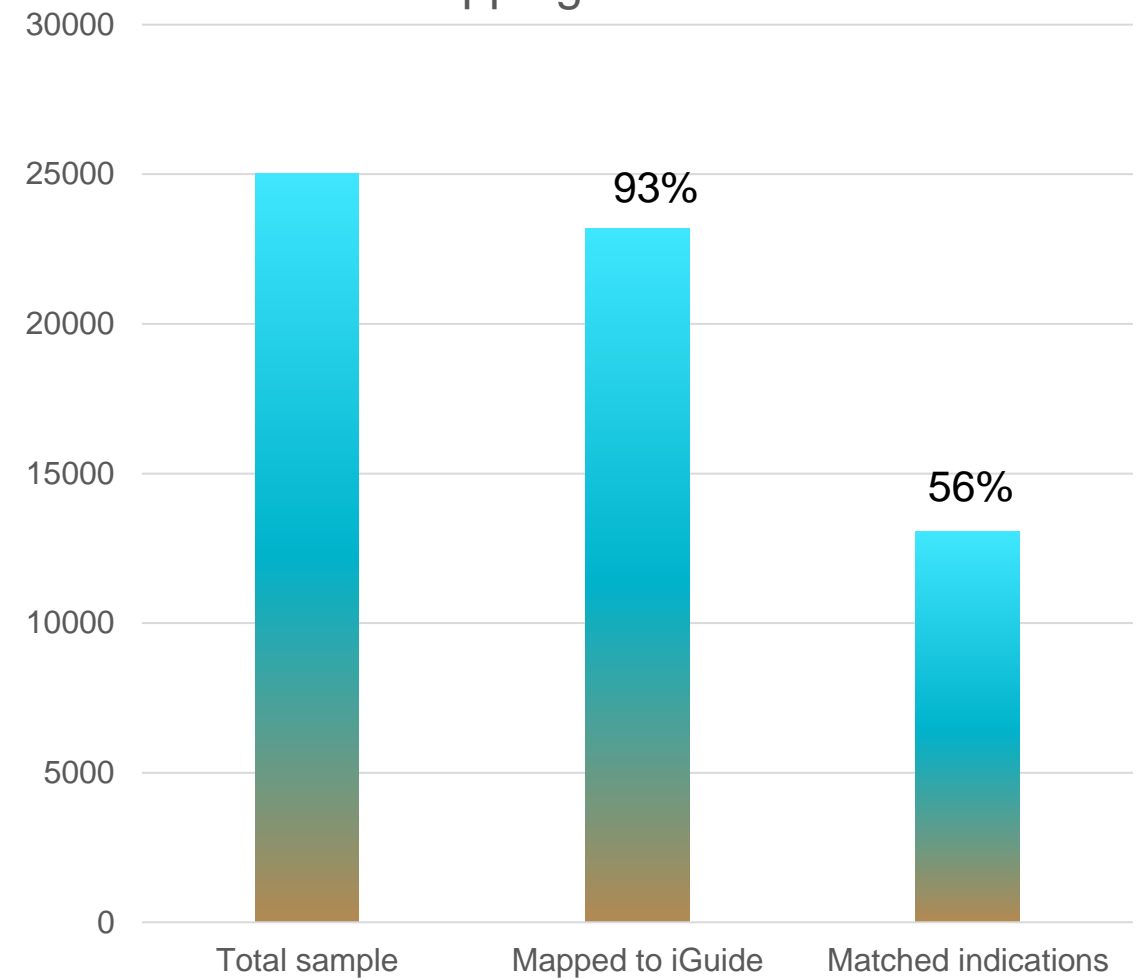
- Data collected from four healthcare regions in Sweden, retrospectively
- All CT (and MRI) exams performed during October 2021 in patients age >18 years



Method



Mapping

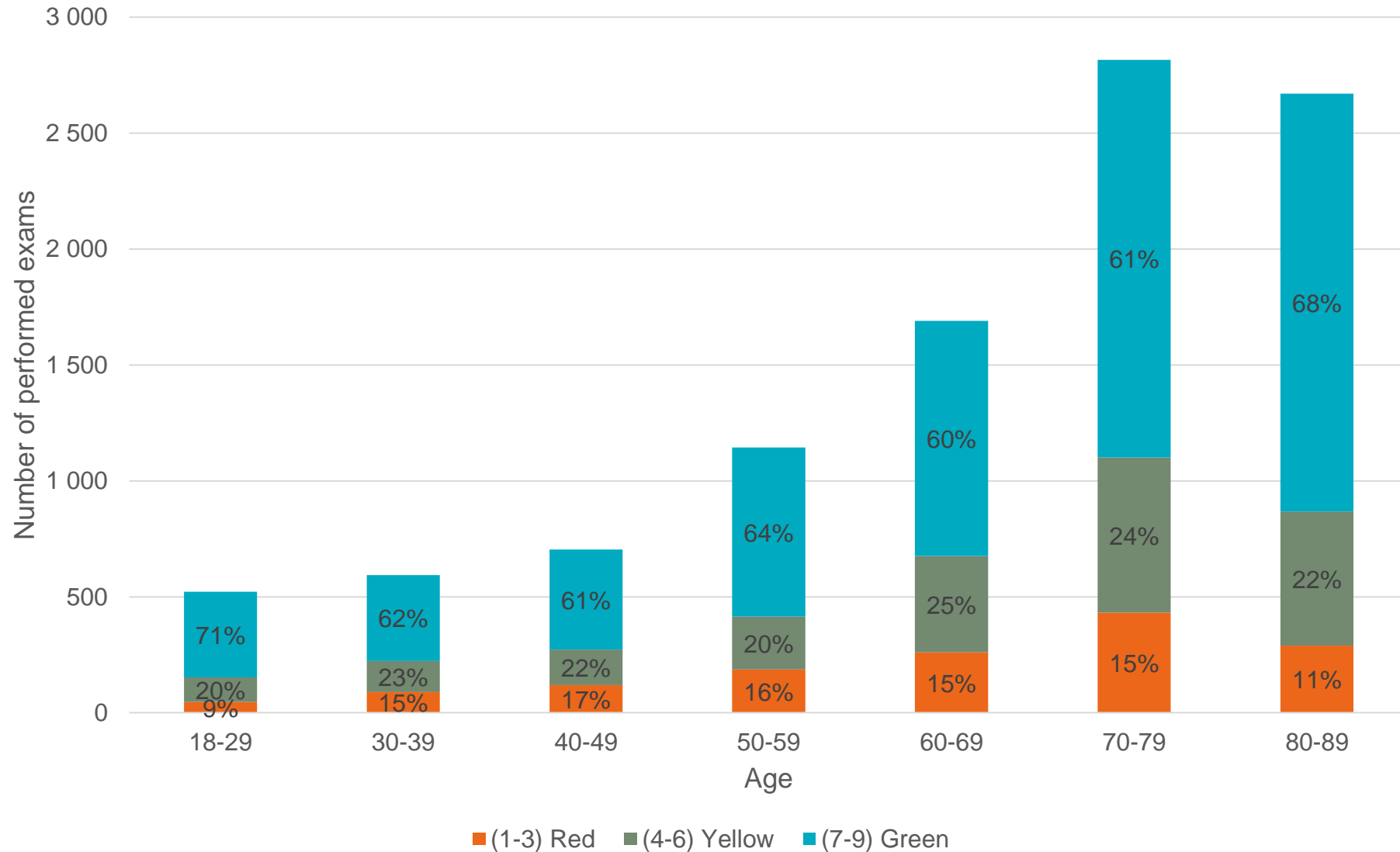


Causes of non-matching

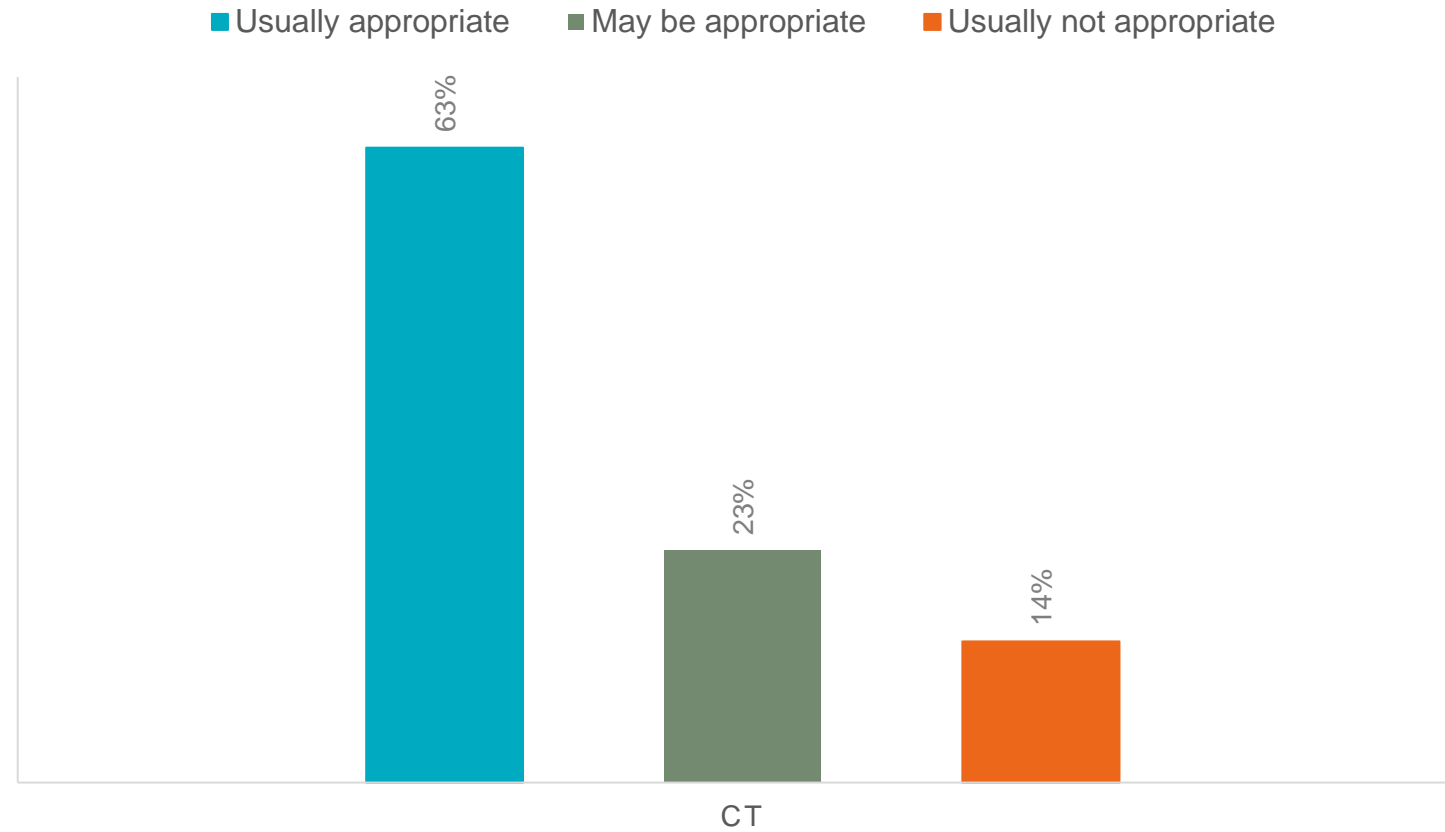
- non-matching text to iGuide (e.g. misspellings)
- unspecific requests when taken out of context (e.g. "Any changes?")
- indications not recognized by iGuide (e.g. standardized cancer pathways)
- indications not matching that examination in iGuide (e.g. fractures on CT thorax/abdomen)
- iGuide not matching relevant indications (e.g. "Ileus" on low dose CT abdomen, "Diverticulitis" on CT abdomen with iv contrast)



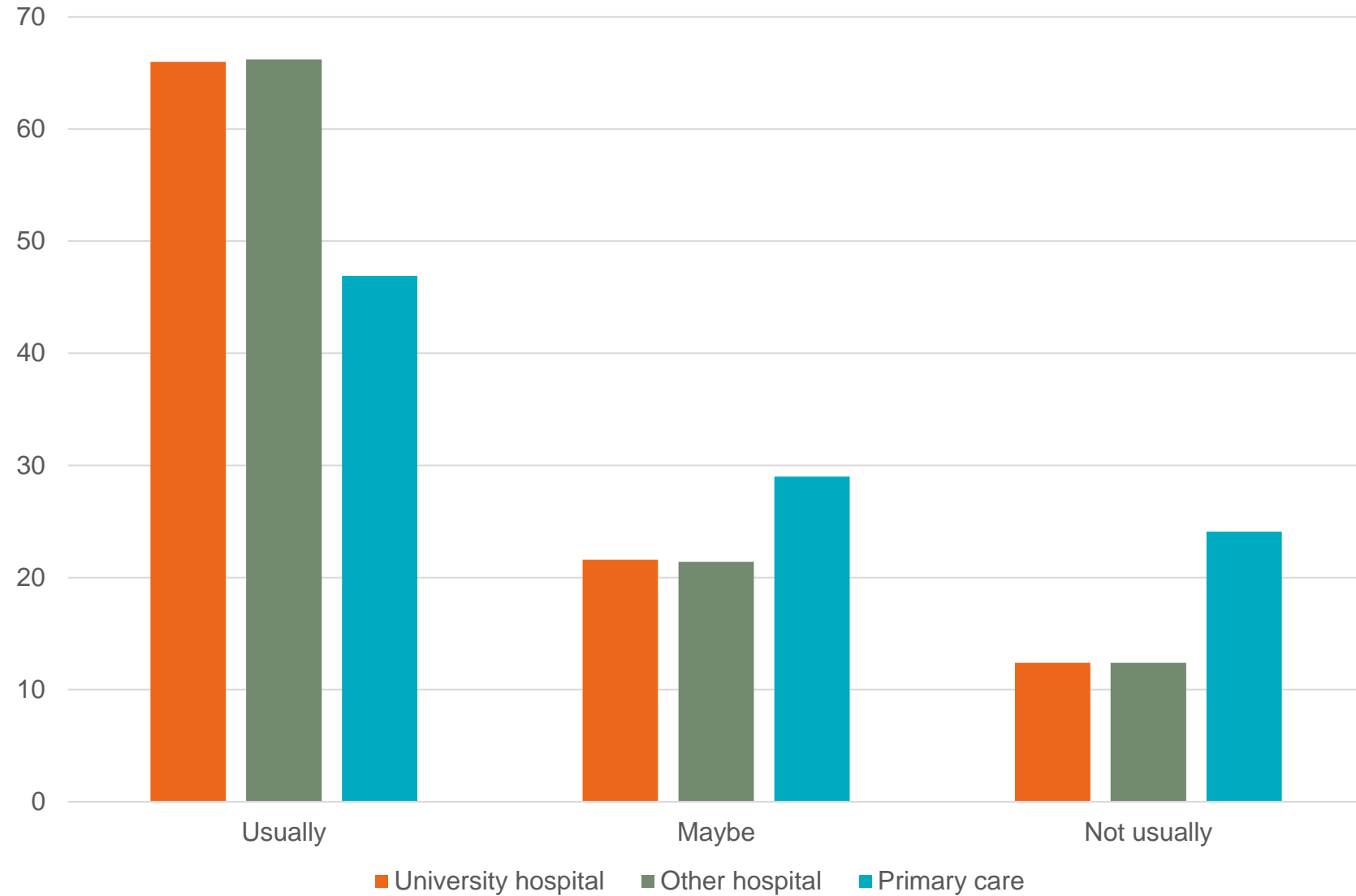
Results



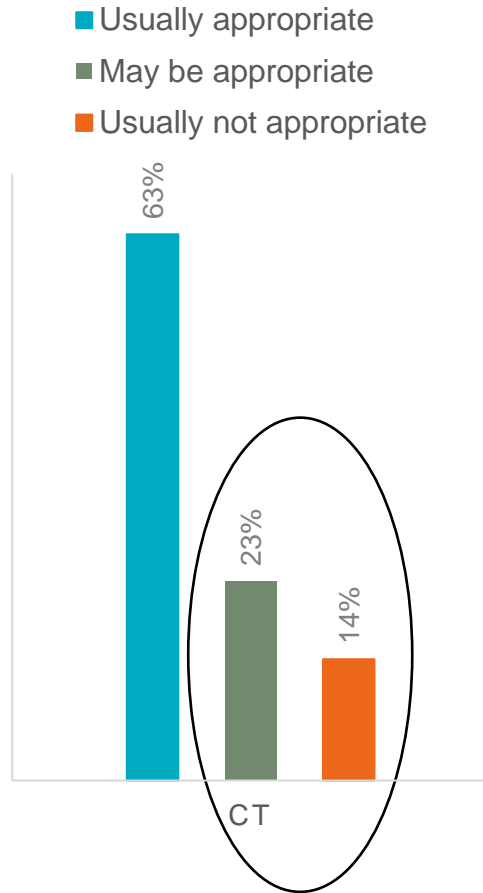
CT justification



Referrers– CT exams



More appropriate exams?



MODALITY CHANGE	PERCENTAGE OF TOTAL
CT (no change)	12%
X-ray	9%
MRI	7%
Ultrasound	5%
Intervention	1%
Nuclear medicine	0%
Flouroscopy	0%

No more appropriate exam available: 2%

Conclusions

- It is possible to use iGuide for retrospective appropriateness analyses of large data sets
- A high number of performed exams were not appropriate
- In most cases, more appropriate exams exist
- Regional differences exist
 - National and easy accessible guidelines could help



Thank you

