Recommendations for Audit of CTC Services

Recommendations from CTC Standards documents relating to audit of CTC services are:

Patient safety audits should include:

- Clearly displayed protocols for managing complications and adverse reactions.
- Documented monitoring of complications and adverse reactions (e.g. perforation, myocardial infarction, or hospitalisation).
- Demonstrable compliance with the standard acquisition and radiation protection protocols.
- Quality control of CTC equipment, including the workstation and insufflators.

Patient outcome measures should include:

- Percentage of the NHSBCSP colonoscopy workload undergoing CTC.
- Description of the reporting methods used for examinations, indicating whether examinations are double reported and, if so, by whom.
- Time interval between CTC examination and receipt of the report by the referrer.
- Assessment of examination quality, including the proportion of inadequate examinations.
- Positive predictive value (PPV) of CTC compared with endoscopy and/or pathology.
- Negative predictive value of CTC (with reference to regional and MDT cancer registries on an annual basis).
- Polyp and cancer detection rate.
- Percentage of examinations with extracolonic finding(s) requiring additional investigation work-up (including the number of examinations and method(s) used, e.g. the imaging modality and PPV for individuals undergoing additional investigation).

Patient experience measures should include

- Waiting times.
- In-room examination time.
- Results from the annual Patient Satisfaction Survey.
- Monitoring of complaints.