

PEER REVIEW AUDIT TOOL

Date of Scan	Reporter	Machine / Site
Date of Review	Reviewer	Patient Identification

Image Quality (I)

I		Score	Comments
3	Good Image Quality		
2	Acceptable Diagnostic Quality		
1	Poor Image Quality		
	(Images of an unacceptable standard)		

Report Quality (R)

R	C	Score	Comments
3	Report Content and Structure		
	Optimal		
2	Report of Acceptable Quality		
1	Poor Report Quality		

Clinical Quality (C)

C (Y=1;N=0)	Yes	No	Comments
Clinical Referral Appropriate		*q	
Clinical Question Answered			
Appropriate advice or conclusion (including no abnormality demonstrated)			

Overall S	core:		Comments:			
I		R		С*	Total:	

Recommended Peer Review Audit Tool

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Descriptors:	

IMAGE QUALITY (I)			
3 Good Image Quality	High quality examination. Organs identified by characteristic features and / or labelling. Appropriate measurements made. May include suboptimal images but with evidence that this was due to patient factors and attempts have been made to address these.		
2 Acceptable Diagnostic Quality	Reasonable image quality but a few poorer quality images and parameters (i.e. incorrect focus, measurement, protocol, colour, label, etc)		
1 Poor Image Quality	Images of an unacceptable standard		
REPORT QUALITY (R)			
3 Report Content and Structure Optimal	Report answers clinical questions and gives appropriate advice and conclusion (within local guidelines). Report may also include additional clinical information gained from verbal feedback from patient and include documentation of any information given to the patient.		
2 Report of Acceptable Quality	Report satisfactory but additional diagnosis or advice could have been provided		
1 Poor Report Quality	Report of an unacceptable standard. List of descriptive findings with no attempt to correlate to clinical setting or answer clinical question posed. May also include disagreement with the report findings		
CLINICAL QUALITY (C)			
Yes = 1 point, No = 0 points			
Clinical Referral Appropriate	The referral contains a clear clinical question and is appropriate for ultrasound imaging. See BMUS recommendations for justification of referrals. *NB add q to total score if clinical referral is inappropriate to differentiate between examination quality and referral quality (eg a referral where the clinical question has not been specified, and may not therefore be answered, with normal findings on Ultrasound could therefore score C 1 *q). Highlighting poor referrals should allow appropriate audit of the referral process.		
Clinical Question Answered	The report answers the clinical question posed or the question gleaned from questioning the patient during the examination		
Appropriate advice or conclusion	The report includes a conclusion or appropriate advice where applicable and in line with local guidelines. This may include a statement of normality including no abnormality demonstrated or no cause for symptoms in normal examinations		
The total score (max 9) is thus subdiv	vided as per I (1-3),R (1-3) Q(0-3(+/-q))		

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Dec 2014