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## ***The Republic of Ireland sonographer reporting pilot study***

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UK Imaging and Oncology Congress, Liverpool ACC, 10<sup>th</sup> to 12<sup>th</sup> June 2024.

### **Abstract**

Background: In the Republic of Ireland (ROI) speciality radiographers (sonographers) undertake ultrasound examinations however, outside of obstetrics they are limited to providing a provisional report which a radiologist will verify. Sonographers in ROI are usually educated to the same standard as their independently reporting UK counterparts having attended CASE-accredited post-graduate courses. This report investigates the comparability of sonographer and radiologist reporting throughout ROI.

Methodology: The report follows a clinical audit methodology. To ensure full population representation CEOs from all hospitals in the ROI were contacted to take part. Participants were all sonographers, covering 6 of the 7 hospital groups of ROI. Each sent data from 400 randomly chosen non-obstetric examinations over 6 months, provisionally sonographer reported then reviewed by the supporting radiologist. The radiologist allocated an agreement score to the report based on the Riley et al (2010) grading system.

Results: 6037 ultrasound examinations were included in the audit. Over 99% of the reports fell into the acceptable range of Grades 1 and 2. 0.35% (21) of reports were classified as Grade 3. Only 2 reports within the Grade 3 classification were changed to upgrade the classification of pathology seen. No reports were classified as Grade 4.

Conclusion: This large, multicentre audit demonstrates the accuracy of sonographer reporting in the ROI with an acceptable agreement score of over 99%. Sonographers in ROI can report as accurately as their UK counterparts who report

independently. With the increasing demand for non-obstetric ultrasound, the existing workforce needs to be utilised efficiently.

## **References**

Riley SJ, Groves CJ, Chandramohan M. (2010) 'Musculoskeletal Ultrasound: Audit of Sonographer Reporting', *Ultrasound*. 2010;18(1), pp.36-40.