

SAMPLE ABSTRACT SUBMISSION

This example is under 250 words excluding title, subtitles and audit team. In this particular example the target was chosen as 90%. The first cycle results are presented as well as the action plan. Some submissions may also include second cycle results.

Title

Use of Gonad Shielding in Pediatric Pelvis Radiography.

Presenting Author's Level of Training

Medical Student

Principial Location of Audit

University hospital site

Background/Aim

AP pelvis radiographs include some of the most radiation sensitive organs in the body. The pediatric population is especially sensitive to radiation exposure. Most institutions agree that gonad shielding should be used in all pediatric AP pelvis studies, excluding the first image in trauma cases. Appropriate use of gonad shielding will dramatically reduce exposure to the reproductive organs without significant loss of diagnostic information.

The aim is to assess the current use of gonad shielding during pediatric AP pelvis radiographs.

Standard

Appropriate gonad shielding should be used in pediatric pelvis radiographic examinations

Target

The standard should be achieved in 90% of cases.

Methods

We reviewed 100 consecutive AP pelvis radiographs. Trauma studies were excluded. The technologist and resident assessed presence or absence of gonad shielding, shield size and appropriate placement.

Audit Team

Medical student, Radiology resident, Radiation Technologist, Student Technologist, Radiology Staff

Results

Shielding was used in 69/100 cases (35/44 for males and 34/56 for females). Adequate coverage was achieved in 10/100 cases (6 males, 4 females). The most common error in male patients was shielding placed too low. The most common error for female patients was shielding that was too small to provide adequate coverage. The target was not achieved.

Interventions/ Action Plan

Results were presented by the medical student and technologist during an multidisciplinary Grand Rounds.

The departmental protocol will be revised and placed prominently in CR rooms.

Technologist led small group in service sessions will be scheduled.

Discussion

A re-audit will assess compliance and progress. We will present possible factors leading to the target being met or not after re-audit.