



Provincial Health Services Authority

# IMAGE ASSESSMENT PROCEDURE: BREAST SCREENING

(QUALITY MANAGEMENT – SG 130)

## Summary of Changes

	NEW	Previous
BC Cancer	May 2023	01-DEC-2017; 01-JAN-2017

Last Revised:	06/MAR/2023	Next Review:	06/MAR/2026	
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## 1. Introduction

### 1.1. Focus

The purpose of this procedure is to outline the Steps of BC Cancer Breast Screening Program image assessments to ensure consistent quality of imaging at each centre. Image Assessments will be performed on a regular basis:

- Annually
- 3-6 months after commencement of a new screening centre opening
- Upon request of a Chief Screener and/or Provincial Practice Leader

### 1.2. Health Organization Site Applicability

All BC Cancer Breast Screening Centres

### 1.3. Practice Level

- Breast Screening Program Chief Radiologists
- Breast Screening Program Chief Technologists
- Breast Screening Technical Quality Management Coordinator

### 1.4. Need to Know

The Chief Screening Radiologist and Chief Mammography Technologist for each centre will perform *BC Cancer Breast Image Assessments* (IA) as outlined by the Technical QM Coordinator.

## 2. Procedure

### 2.1. Steps and Rationale

Workflow Step	#	Procedure	Role
Image Selection	1.	Randomly select 10-20 mammography cases for review by the Centre.  IA involves the review of 10 or 20 studies*, dependent on the number of screening technologists at a centre. * Considerations are made to include, when possible, at least one study performed by each technologist at the designated centre.	Technical QM Coordinator
Image Assessment	2.	Review the selected cases on 5-mega pixel workstation monitors. Evaluate:	Chief Technologist Chief Screener

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		<ul style="list-style-type: none"> <li>- Accuracy and completeness of the Clinical History intake information in MagView</li> <li>- Verification of image DICOM header information</li> <li>- Accuracy of annotated side and view marker</li> <li>- Breast Positioning</li> <li>- Image quality factors (i.e. sharpness, artefacts, contrast and density, etc.)</li> </ul> <p>Ensure that all centre technologists are given the opportunity to review so they may obtain CME credits.</p> <p>Submit completed <i>Image Assessment Forms</i> to the Program's QM Coordinator.</p> <p>Send corresponding breast screening images + one set of screening priors via the DES transfer grid OR transfer breast screening images + one set of screening priors onto an encrypted USB (supplied by the program) and mailed to QM Coordinator at Central Office.</p>	
Image Assessment Summary	3.	Evaluate the Centre completed IA forms and corresponding images to construct an <i>Image Assessment Summary Report</i> .  Consults the Breast Screening Provincial Practice Leader, Program Physicist, and Breast Screening Medical Director as required.	Technical QM Coordinator
	3.1	Includes in the <i>IA Summary Report</i> : <ul style="list-style-type: none"> <li>- Overall clinical image evaluation (i.e. requires improvement, satisfactory, good, or excellent)</li> <li>- Recommendations for improvement of clinical history intake, breast positioning, image quality, image artifacts and positioning in-service</li> </ul>	Technical QM Coordinator
	3.2	Distribute the <i>IA Summary Report</i> to the Chief Technologist, Chief Screener, Centre Manager, and the Provincial Practice Leader.	Technical QM Coordinator
	3.3	Arrange for an <i>In-Service</i> training session with the Breast Screening Quality Management Team, if there are recommendations for positioning in-service.	Technical QM Coordinator Provincial Practice Leader
QM Review of Image Assessment	4.	Document the result of the IA in a <i>Quality Management Report</i> and present to the BC Cancer Breast Screening Quality Management Committee.	Provincial Practice Leader
CPD Credits	5.	Technologists who participate in IA may obtain CAR MAP self assessment (Category B / unaccredited) CPD credits.	Centre Technologists

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## 2.2. Documentation

As outlined above, the Provincial Practice Leader documents the result of the IA in a *Quality Management Report* and present to the BC Cancer Breast Screening Quality Management Committee.

## 3. Related Documents and References

### 3.1. Related Documents

Image Assessment Form

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<b>Approving Body:</b>	Breast Screening Quality Management Committee		
<b>Final Sign Off:</b>	<b>Name</b>	<b>Title</b>	<b>Date Signed</b>
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