

Minutes Audit Meeting

Wednesday 4th April 2018

Present: AC, PG, CR, MY, SM, KC

MDT cases discussed, learning outcomes available in the MDT folder.

Plaque morphology discussed and it will now be added to any significant carotid reports. It was decided that we will only use 4 terms as free floating and ulcerated are rare and hard to diagnose.

Irregular- plaque with a broken irregular luminal surface.

Smooth- plaque with uninterrupted luminal surface.

Homogeneous – plaque demonstrates a uniform echo pattern, i.e.: all bright echoes or all dark echoes.

Heterogeneous- plaque demonstrates a mixed, random echo pattern, i.e. some echogenic and echo lucent areas.

It was decided that we will look at all of the significant carotids we report using this criteria for the next month to check that we are all reporting in the same way. We will also contact the operating surgeon to see if our analysis of the plaque met their findings. We are going to ask the nurses to send DV the surgical lists for SGH to facilitate this plan.

MY to adjust the CRIS wording and protocols.

We are currently looking at the possibility of creating our own image bank of plaque morphology for teaching purposes.

AC discussed an interesting positive TOS case and informed us that following her conversation with the Southampton Surgeons MRI will now be the first line of investigation for these patients as Doppler assessments can be equivocal.



4-4-18