

**MILLE LACS BAND OF OJIBWE  
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

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**Department:** Health Services - Radiology

**Policy Number:** HHS-HS-RAD 1427

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**Policy Title:** Repeat Analysis

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**Attachments:**

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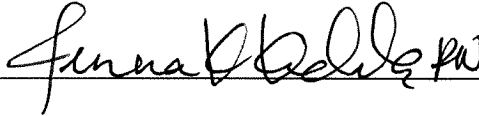
**Revision History:** New Policy

**Revised by/Date:** Lance Roeschlein/Dr. Mark Bostrom 1/2022

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**Approved by:**

Jenna Kuduk, Health Services Director



**Date:**

01/31/22

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**Approved by:**

Nicole Anderson, Commissioner of HHS



**Date:**

2-4-22

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**POLICY STATEMENT:** It is the policy of Mille Lacs Band Health Services Radiology department that a repeat analysis will be performed on CR and DR on a quarterly basis by the Radiation Safety Officer (RSO). A goal for maintaining a repeat rate of less than 5% has been set.

**PURPOSE:** To conduct a repeat analysis on a quarterly basis (or every 1000 images) which will help the facility understand why various images were repeated, to identify trends or frequent errors and what steps can be taken to correct the errors. The analysis will also help to identify ways to reduce facility cost and unnecessary radiation exposure to the patient.

**PROCEDURE:**

- A. The facility should work towards a repeat rate of less than five percent (< 5%) for CR and DR. The repeat/reject rate should not only continue to be monitored quarterly, but also investigated with appropriate documentation if there has been a shift upward when compared to the previous quarter, even if the quarterly analysis is below the 5% target rate. The repeat analysis must include a summary of the causes for the retakes or rejects.
- B. Reasons for repeats are usually divided into three major categories:
  - a. Equipment: Including, but not limited to, inaccurate kVp, mA, etc., light field/x-ray field misalignment, darkroom fog, processor problems and/or computer problems.
  - b. Patient: Including, but not limited to, motion, breathing, jewelry or other foreign objects and other body parts overlapping the area of interest.
  - c. X-Ray Personnel Error: Including, but not limited to, improperly set techniques (i.e. kVp), improper collimation, improper positioning and poor film/IP handling.
- C. In order to reduce repeats, it is necessary to know what the cause is for the given repeat (i.e. positioning, patient motion, over/under exposure, etc.). Please mark reject/retake reason on patient log book and select the reason on the X-ray machine.
- D. Calculating the repeat rate:
  - a. At the beginning of the analysis period, a new patient utilization log will be started. The films/exposures/images will be evaluated and logged at the time it is repeated.
  - b. At the end of the analysis period (either quarterly or 1000 images), the total number of retakes will be reviewed.

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- c. Since each repeated film/exposure/image was evaluated and logged at the time of repeat, one must simply add up check marks for each category and record the total on the data sheet (Note: This may be already done if using computer generated software).
- d. One must then add up the numbers in each category to get the total number of repeated films. One must also determine the overall total of images conducted for that quarter if analyzing more than 1000 images. Then to determine the overall repeat rate one must divide the total number of repeated images by the total number of images taken during the quarter.
$$\frac{\text{total number of retakes for quarter}}{866 \text{ (total images for quarter)}} = 0.024 \text{ or } 2.4\% \text{ Overall Repeat Rate}$$
- e. This process will be completed on a quarterly basis (or at a minimum of every 1000 images).
- f. Records of the repeat analysis will be maintained inspection to inspection.

<b>Internal and/or External References</b>	
<b>Compliance - Posting Date</b>	2/4/2022 AH
<b>Replaces – Policy Number</b>	
<b>Next Review - Due Date</b>	1/2023