

## 6.14 Computed Tomography Pulmonary Angiography (CTPA) pre-test probability and outcomes in University Hospital Waterford

<sup>1</sup>Tom Farrell, <sup>1</sup>Ghadeer Alkhafaji, <sup>1</sup>Ciaran Redmond

<sup>1</sup>University Hospital Waterford, Waterford, Ireland

**Background:** The purpose of this study was to conduct an audit against best clinical practice guidelines on computed tomography pulmonary angiography (CTPA) at University Hospital Waterford (UHW). The primary objective was to assess the adequacy of clinical details provided in the patient history. Secondary objectives were to assess scan outcomes. **Methods:** A retrospective review of all CTPAs performed across March/April, 2024, at UHW was conducted. CTPA requests were assessed for use of pre-test scoring tools as per National Institute for Health and Care Excellence Guidelines. CTPA reports were reviewed for secondary outcomes of this study. **Results:** A total of 220 CTPAs were reviewed. Pre-test validated scoring systems were documented in only 39% of cases. 11% of scans were positive for pulmonary emboli (PE). 194 scans documented non-PE findings with further investigations recommended in 17% of cases. **Conclusion:** In spite of the guidelines on the use of validated pre-test scoring systems, these were documented in less than half of cases. This study also demonstrated the low rate of positive studies for PE (11%) (guidance from The Royal College of Radiologists target of 15-37%), as well as significant rate of follow-on investigations. This serves to underpin the importance of appropriate referrals. **Conflicts of interest:** The authors have no conflicts of interest