



**Minutes of the Imaging Meeting
Held on Wednesday 27th September 2006
Royal Brompton Hospital**

Present:

Professor Richard Underwood, Professor of Cardiac Imaging (RU) (Chair)
Maria O'Brien, Director NWL Cardiac Network (MOB) (Minutes)
Jinty Wilson, Assistant Director, NWL Cardiac Network (JW)
Professor Dudley Pennell, Director Cardiovascular MR Unit RBH (DP)
Dr Andrew Kelion, Consultant Cardiologist, Royal Brompton & Harefield NHS Trust (AK2)
Ian Haig, General Manager Specialist Medicine Ealing NHS Trust (IH)

Apologies:

Dr Richard Grocott-Mason, Consultant Cardiologist Hillingdon (RG)
Dr Jamil Mayet, Consultant Cardiologist, St Mary's Hospital NHS Trust
Dr Raj Sharma, Consultant Echo Cardiologist, Ealing Hospital (RS)
Dr Roxy Senior, Consultant Cardiologist, Northwick Park Hospital (RS1)

Action By

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1.	Welcome & Apologies	
2.	Minutes of Previous Meeting The minutes of the previous meeting were agreed as an accurate record.	
3.	Update on Choice of Scan MOB updated the group in relation to Choice of Scan Phase 2. All organisations have been contacted in relation to this and are all currently meeting the target. The network has had to give a significant amount of support to two hospitals in order to reduce their waits for diagnostics.	
4.	Data Analysis & Presentation The diagnostic data collected from across NW London was presented by JW and the remainder of the meeting was spent discussing this. Diagnostic tests covered in the analysis included: exercise tolerance, stress echo, cardiac CT, CMRi and nuclear imaging. JW highlighted a number of issues. In particular, the fact that an electronic reporting system was not in place in the majority of organisations which meant that data had had to be counted manually. This also meant that for some of the tests it was not possible to split by NW London and non NW London residents, and on that basis a number of assumptions had to be made which were highlighted as part of the presentation. JW and MOB stated that they were confident that the data obtained to date was accurate. DP commented on the low number of CMRi's reported for RBH and indicated that this had been due to a recording issue at the Trust during the previous year. Alternative figures were provided and it was agreed to update the presentation with these prior to circulation to other members of the group. One or two other suggestions were made in relation to the presentation of	

	<p>the data and it was agreed to incorporate these prior to wider circulation, (presentation attached).</p> <p>In summary, the analysis indicated that a significant proportion of patients undergo exercise testing. The use of the stress functional tests including stress echo and nuclear imaging remain under-used when compared to angiography across all NW London activity. This situation is even more apparent when account is taken of the volume of patients booked as Angiography ?proceeds. As a next step, it was agreed that a paper would be drafted detailing the outcomes of this analysis along with some recommendations for commissioners. JW agreed to take this forward. It was also agreed that there would be a need to incorporate costs within the paper which IH agreed to help with. RU agreed to pull together the relevant clinical details required for the paper. It was agreed to circulate a draft of this paper 2 weeks prior to the meeting.</p>	<p>JW/RU/IH</p> <p>JW</p>
5.	<p>A.O.B.</p> <p>Nothing further was raised.</p>	
6.	<p>Date/Time/Venue of next meeting</p> <p>The next meeting was agreed to take place on 13 February 2006 @ 10am, Harefield Hospital.</p>	