[Name of Dental Practice] [How to use templates](https://www.psm.sdcep.org.uk/templates/how-to-use-templates/)

[Date]

# Quality Assessment of Radiographic Images

### Assessment period:

From/To (dates):

Name of Assessor:

Audit number:

**Quality Ratings**

**A = Diagnostically acceptable**. No errors or minimal errors in either patient preparation, exposure, positioning, image (receptor) processing or image reconstruction and of sufficient image quality to answer the clinical question.

**N = Diagnostically not acceptable.** Errors in either patient preparation, exposure, positioning, image (receptor) processing or image reconstruction which render the image diagnostically unacceptable.

The [Guidance Notes for Dental Practitioners on the Safe Use of X-ray Equipment](https://cgdent.uk/standards-guidance/) provides a list of common image quality faults.

| **Radiograph Number** | **Rating(A/N)** | **Comments**(If rating is N, record: date of radiograph; nature of deficiency; known or suspected cause of this deficiency; number of repeat radiographs/images) |
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## Summary

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|  | **No. of Images** | **% of Total** | **Target % for Digital Imaging** | **Target % for Film Imaging** |
| **Rated A** |  |  | Not less than 95% | Not less than 90% |
| **Rated N** |  |  | Not greater than 5% | Not greater than 10% |

## Conclusions

## Action Required

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