

radiolabeling is apparent based on the data analysis or the images of the eggs, design an intervention to ameliorate the problem. Reflect on the barriers that exist in your practice that hinder high quality gastric emptying scintigraphy from being performed.

Possible contributors may include:

1. Inhomogeneous radiolabeling of eggs
 - a) Review the technique the technologists use to prepare the radiolabeled eggs and share the egg image data with the technologists.
 - b) Design an intervention to improve egg preparation technique and reassess the egg radiolabeling through the imaging method. Provide feedback to the technologists.
2. Excessive time allowed for the patient to ingest the meal. This may lead to activity in the small bowel on time 0 images from normal emptying.
 - a) Review the Tougas protocol with the technologists and stress that the meal needs to be ingested within 10 minutes
 - b) Possible intervention: have the technologist record the time the patient took to eat the meal

Post Intervention Data Collection

After your intervention has been completed, review the next 10 gastric emptying studies using the Tougas protocol and record the number of cases where small bowel activity is present at time 0 or the 0-30 minute emptying percentage is greater than the 30-60 percentage. Calculate the percentage of positive studies. Reassess these same parameters in 10 consecutive patients who underwent the Tougas protocol 6 months after the intervention. The goal is to have zero cases of small bowel activity present at time 0 or a greater emptying percentage at 0-30 minutes unless rapid emptying is clinically suspected. Given the small number of cases assessed, changes in the number of positive cases are not expected to be statistically significant but collection of this data may demonstrate a trend. High volume practices may want to consider reviewing more than 10 patients. If the goal is not achieved, then additional training is warranted and it may be beneficial to repeat the egg imaging on a number of studies as this provides direct visual feedback to technologists on the quality of their preparation.

Data Sheet

Pre-intervention

Number of studies with small bowel activity at time 0 _____

Number of studies where 0-30 emptying > 30-60 emptying _____

Percentage of studies that were positive _____

Images with inhomogeneously mixed eggs _____

Post-intervention

Immediate

Number of studies with small bowel activity at time 0 _____

Number of studies where 0-30 emptying > 30-60 emptying _____

Percentage of studies that were positive _____

6 months

Number of studies with small bowel activity at time 0 _____

Number of studies where 0-30 emptying > 30-60 emptying _____

Percentage of studies that were positive _____