

BreastScreen

AUSTRALIA

A joint Australian, State and Territory Government Program

REMOTE RADIOLOGY ASSESSMENT CLINICS

CLINICAL CERTIFICATION

Name of Service: _____

I certify that the Remote Radiology Guidelines and minimum technical requirements and quality control procedures outlined in Appendix G of the BreastScreen Australia National Accreditation Standards Commentary (March 2022) are:

(tick one and provide comments if Partially Implemented or Not Implemented):

IMPLEMENTED

PARTIALLY IMPLEMENTED

NOT IMPLEMENTED

Name: _____

Signature: _____

Role: _____

Date: _____

Comments (continue over page if required):

Comments (continued):

Version control	
V #	1.0
Approved by NQMC	4 March 2022
Author	Joan Burns, National Surveyor