## Research Priorities for the Radiography Profession

## **Diagnostic Radiography**

 Patient Information and Communication Issues in Diagnostic Imaging and their impact on radiology economy and patient diagnosis (for example: non-adherence, failed examinations, the transfer of information to patients, and the impact from the patient's perspective; breaking of bad news to patients coming for 16 week ultrasound scans).

Complementary Patient Care enhancement techniques (for example the effectiveness of the phobia cure for MRI, needle phobias, relaxation for CT, MRI and invasive procedures).

Sociological analysis of the profession of diagnostic radiography.

Identification of new technologies that require assessment in terms of their impact on patient pathways and clinical/diagnostic outcomes.

The development of leadership in the profession (for example, advanced and consultant roles).

The impact of the movement of diagnostic services from the NHS to the private sector.

The effects of CR/DR on radiographer's work practice e.g. clinical issues, exposure factors, dose and diagnostic performance.

## Therapeutic Radiography

Skin Care/deodorant use (for example, to look at updating skin care instructions and how well departments adhere to current standards).

Patient Information (for example, to focus initially on breast cancer information - including audit of information giving processes and leaflets, variety of information provided, areas of good practice, or innovative approaches to information giving, and to trial new information approaches to standardise provision).

Rectal filling/bladder filling (for Prostate conformal or IMRT therapy, to incorporate research already completed as well as a new study to investigate different pre treatment bladder/bowel prep.).

Follow Up care (for example to investigate post treatment care and the role of the therapy radiographer in this process).

Planning/contouring (for example, advanced practice in planning and assessment of accuracy of outlining contours etc.).

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