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The RCR Breast Group represents the interests of United Kingdom radiologists who undertake breast imaging. Having over 450 members.

Cross border healthcare within the EU involves not only physical mobility of citizens and health professionals but also telemedicine. Teleradiology is a major component of telemedicine and is the method by which ever increasing numbers of scans and radiographs of E.U. citizens are being interpreted. Teleradiology provision within the E.U. often occurs across national boundaries.

We consider it important that all patients or well women being screened, outside their own country of residence or having their diagnostic images interpreted out side their country of residence, are entitled to the same quality of care, to the same standards and safe guards as if they were being treated by a medical professional working or residing in their own member state.

Ideally a woman would not perceive any difference in the care received regardless of her physical location or where the imaged were being reported.

In many ways the issues for breast imaging /diagnosis and screening are unique in that although both standards and practice differ across EU states there is a set of evidence based common basic standards. These have been set by the EU for screening and by the EUropean SOciety of Mastology for diagnosis and treatment.

Measuring performance of an individual medical practitioner (or the team they work with in) is much harder as the individual or team need to see large numbers of women before it is possible to identify under performance. For instance a team would need to screen at least 15,000 women (50 to 70 years of age) per annum to have statistically stable cancer detection rates and this number would need to be even larger for younger women.

For any one individual attending screening the balance between risk and harm is fine but patient perception and expectation is high so It is therefore particularly important that any regulatory framework protects both the patient and the medical (clinical) practitioners providing the service.

Regulation of radiologists:

A radiologist who reports on medical images of E.U, patients should:

- Be registered with the Medical Regulatory Body of each E.U. Member State where his/her patients reside.
- Should be on the Radiology Specialist Register of the Medical Regulatory Body of each Member State where his/her patients reside.
- Should have individual insurance/indemnity cover for each of the Member States where his/her patients reside.
- Must have a proper knowledge of the language(s) of each Member State where his/her patients reside, as required by the E.U. Qualifications Directive 2005.
- Should have a "Certificate of Current Professional Status" when applying for registration with a Medical Regulatory Body.
- If providing radiology services for patients in another E.U. Member State, radiologists should be subject to the same regulatory requirements as local Radiologists. Such specific national medical regulatory arrangements may include revalidation, recertification, relicensure, annual appraisal.

Radiologists should be subject to the regulations applied to locum doctors by the Medical Regulatory Body in each Member State where his/her patients reside.

Regulation of Teleradiology Providers

Teleradiology companies which provide reporting of medical images of E.U. citizens:

- Should be registered with the Healthcare Commission or equivalent in each E.U Member State where their patients reside, and be subject to its regulations/standards.
- Should be subject to the same Member State Regulations as apply to Medical Locum Agencies.
- At the conclusion of every doctor's employment, teleradiology providers should be required to make a brief standardised return to the relevant national Medical Regulatory Body.
- Teleradiology Providers should ensure that teleradiologists reporting imaging of patients in a particular Member State comply with the regulation revalidation annual appraisal and other national Clinical Governance Regulations of that Member State.

- When a teleradiologist changes employer or contracting organisation between relicensure cycles, the pervious teleradiology provider should provide the new employer with a standardised record outlining the practitioner's current position in relation to the elements contributing to relicensure/recertification/revalidation.
- Clinical evaluation and data should be provided to the reporting teleradiologist.
- Teleradiology providers must comply with the requirements of the Euratom 97/43 Directive including Justification, and optimisation of imaging technique.
- Reports from Teleradiology Providers should be integrated with the patient's notes, electronic records, Radiology Information Systems and should be capable of review by clinicians and at multi disciplinary team meetings as easily as if the reports were generated locally.
- Teleradiology Providers should have close communication with the Radiology Departments who produce the medical images.
- Teleradiology Providers should ensure security and privacy of transmitted patient data comply with E.U. and National Directives.
- Teleradiology Providers should conduct regular user/clinician surveys. Robust audit procedures should be in place to check the quality and accuracy of reports and the overall therapeutic and clinical impact of the service.
- Teleradiology providers should have adequate medicolegal and insurance cover.

Dr Erika Denton Chairman Dr Matthew Wallis Executive Committee Member

On behalf of Royal College of Radiologist Breast Group

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