



Initial perceptions of Australian clinicians participating in the SCANPatient clinical trial of synoptic reporting of CT scans to assess pancreatic cancer

Lin Li¹, Samantha Ellis^{2,3}, Ariadna Recasens¹, Liane Ioannou¹, John Zalcborg^{1,4}, Charles Pilgrim^{1,3,5}

1. School of Public Health and Preventive Medicine, Monash University; 2. Department of Radiology, Alfred Health; 3. School of Translational Medicine, Monash University; 4. Department of Medical Oncology, Alfred Health; 5. Hepatopancreaticobiliary Surgery, Alfred Health.

Introduction:

To assess baseline perceptions and satisfaction levels of Australian clinicians regarding CT scan reporting practices for pancreatic ductal adenocarcinoma (PDAC) prior to implementation of synoptic reporting in the SCANPatient clinical trial.

Methods:

A pre-intervention online survey was conducted between December 2023 and April 2024 among radiologists and hepatobiliary surgeons participating in the nationwide SCANPatient trial (ACTRN12623000508673). The survey assessed demographics, current CT scan reporting practices, satisfaction with anatomical detail discussion and documentation in multidisciplinary team (MDT) meetings, and perceptions of synoptic reporting utility. For statistical analysis, Fisher's exact tests, Wilcoxon rank-sum tests and binary logistic regression were employed.

Results:

Twenty-three clinicians completed the survey (response rate 34.3%): 13 surgeons (12 HPB surgeons, 1 surgical oncologist) and 10 radiologists (5 abdominal imaging specialists, 5 general/other). Most respondents (56.5%) had ≥ 10 years of specialty practice. The most commonly used resectability classification systems were those of the National Comprehensive Cancer Network 2016 (30.4%) and International Consensus 2017 (26.1%). Thirteen respondents (59.1%) were satisfied with anatomical detail discussion in MDT meetings (mean score 3.54 ± 0.59 on 1–5 scale), with no significant differences between surgeons and radiologists ($p=0.219$). Most clinicians (82.6%) perceived synoptic reporting as useful for PDAC assessment. Ninety percent



of radiologists had prior synoptic reporting experience in other tumour types, and 70% believed it would enhance reporting efficiency and accuracy.

Conclusion:

Initial findings indicate that clinicians had moderate baseline satisfaction with current CT reporting practices and positive perceptions toward the utility of synoptic reporting, highlighting its potential to improve communication of anatomical details.