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26th August 2026

[REDACTED]

Dear Sir/Madam

Freedom of Information Act (FOI) 2000 - Request for Information Reference: Prostate
MRI: Assessment of Capacity and Quality

I am writing in response to your request for information under the FOI 2000.

I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below.

Home, Community, Hospital.

FOI Request / Question	Question Response	Is there an exemption?	Exemption	Exemption Details
1. Trust Details • Trust full name: • Trust address: • Trust postcode:	Sherwood Forest Hospitals NHS Trust: Mansfield Rd, Sutton-in-Ashfield NG17 4JL			
2. Scanner Inventory How many MRI scanners are used for prostate imaging at your Trust? a) For each scanner please provide the following i. Manufacturer: ii. Scanner Model: iii. Scanner magnetic field strength (T): iv. What year was the scanner manufactured?: v. What year was the scanner software last updated?: vi. Is this scanner a permanent or mobile unit?: vii. Is this scanner PIRADS v2.1 compliant?: viii. If 'NO,' why is this scanner PIRADS v2.1 non-compliant? (Example: lack of high b-value ($\geq 1,400$ sec/mm ²) image set): ix. Is an endorectal coil used with this scanner?: x. If 'YES,' please describe the endorectal coil	3 Inhealth Mobile MR44 (Newark) Manufacturer: Siemens Scanner Model: MAGNETOM Avanto Scanner magnetic field strength (T): 1.5T What year was the scanner manufactured?: 2015 What year was the scanner software last updated?: Unknown Is this scanner a permanent or mobile unit?: Mobile Unit Is this scanner PIRADS v2.1 compliant?: The scanner has the capability to be PIRADS v2.1 compliant – the currently set Prostate protocol is not. If 'NO', why is this scanner PIRADS v2.1 non-compliant? (Example: lack of high b-value ($\geq 1,400$ sec/mm ²) image set): Due to protocol parameters detailed below, all of which can be brought up to compliance:			

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used with this scanner (Example: DxTx Medical, eCoil): xi. Are any AI-based reconstruction or acquisition acceleration techniques used with this MRI scanner? (Example: No / Yes, vendor-provided / Yes, third-party AI software / Other): xii. If 'Other,' please describe: b) i. What is the full time slot that you dedicate to a multiparametric prostate MRI scan, including set-up, patient preparation time, imaging sequences, and patient turnaround? (X minutes): ii. What is the full time slot (minutes) that you dedicate to a biparametric prostate MRI scan, including set-up, patient preparation time, imaging sequences, and patient turnaround? (X minutes):	• AX T2 Sequences has distance factor of 10% (recommendation is "no Gap") • Multi B-Value DWI has distance factor of 10% (recommendation is "no Gap") • DCE sequence has distance factor of 20% (recommendation is "no Gap") • Temporal Resolution currently unknown Is an endorectal coil used with this scanner?: No If 'YES', please describe the endorectal coil used with this scanner (Example: DxTx Medical, eCoil): Are any AI-based reconstruction or acquisition acceleration techniques used with this MRI scanner? (Example: No / Yes, vendor-provided / Yes, third-party AI software / Other) No MR68 _ KMH Mobile InHealth Manufacturer: Siemens Scanner Model: MAGNETOM Aera Scanner magnetic field strength (T): 1.5T What year was the scanner manufactured?: 2021 What year was the scanner software last updated?: 2025 Is this scanner a permanent or mobile unit?: Hybrid Unit Is this scanner PIRADS v2.1 compliant?: The scanner has the capability to be PIRADS v2.1 compliant – the currently set Prostate protocol is not.			
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	If 'NO', why is this scanner PIRADS v2.1 non-compliant? (Example: lack of high b-value ($\geq 1,400$ sec/mm²) image set): Due to protocol parameters detailed below, all of which can be brought up to compliance: • Multi B-value DWI has slice thickness of 5mm (recommendation is ≤ 4mm) • Multi B-Value DWI has FOV of 223mm (recommendation is 160-220mm) • DCE sequence has distance factor of 20% (recommendation is "no Gap") • Temporal Resolution currently unknown Is an endorectal coil used with this scanner?: No If 'YES', please describe the endorectal coil used with this scanner (Example: DxTx Medical, eCoil): Are any AI-based reconstruction or acquisition acceleration techniques used with this MRI scanner? (Example: No / Yes, vendor-provided / Yes, third-party AI software / Other) No Hybrid _ KMH MIP Manufacturer: Philips Scanner Model: MR5300 Scanner magnetic field strength (T): 1.5T What year was the scanner manufactured?: 2024			
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	What year was the scanner software last updated?: 2024 Is this scanner a permanent or mobile unit?: Hybrid Unit Is this scanner PIRADS v2.1 compliant?: Yes If 'NO', why is this scanner PIRADS v2.1 non-compliant? (Example: lack of high b-value ($\geq 1,400$ sec/mm²) image set): Is an endorectal coil used with this scanner?: No If 'YES', please describe the endorectal coil used with this scanner (Example: DxTx Medical, eCoil): Are any AI-based reconstruction or acquisition acceleration techniques used with this MRI scanner? (Example: No / Yes, vendor-provided / Yes, third-party AI software / Other) No CDC Manufacturer: Philips Scanner Model: Ingenia Ambition X - Blueseal magnet Scanner magnetic field strength (T): 1.5T What year was the scanner manufactured?: March 2026 What year was the scanner software last updated?: April 2026 Is this scanner a permanent or mobile unit?: Static Unit Is this scanner PIRADS v2.1 compliant?: Yes If 'NO', why is this scanner PIRADS v2.1 non-compliant? (Example: lack of high b-value ($\geq 1,400$ sec/mm²) image			
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	set): Is an endorectal coil used with this scanner?: No If 'YES', please describe the endorectal coil used with this scanner (Example: DxTx Medical, eCoil): Are any AI-based reconstruction or acquisition acceleration techniques used with this MRI scanner? (Example: No / Yes, vendor-provided / Yes, third-party AI software / Other) No b) i. 50 minutes ii. 30 minutes			
3. Supplementary Imaging Techniques a. Do you use an antispasmodic during prostate MRI imaging?: • If 'YES,' please describe your antispasmodic drug, route of administration and dose (Example: Hyoscine butylbromide, intramuscular, 20mg): b. Do you use any bowel preparation before prostate MRI imaging?: • If 'YES,' please describe your method of bowel preparation (Example: Rectal enema): c. Do you currently use an AI algorithm (commercial or academic) as part of your	a. No b. No c. No			

clinical workflow for prostate MRI reporting?: • If 'YES,' please describe which algorithm(s) is currently being used (Example: Pi - Lucida Medical):																																								
4. Capacity a) How many prostate MRIs were performed at the Trust in the last 3 months (Apr-Jun)? • What proportion(%) of these scans were biparametric? b) How many prostate MRIs were performed at the Trust in for the following calendar years 2023, 2024 and 2025? • Please also advise What proportion(%) of these scans were biparametric per calendar year?	a. 258 April to June 26 and 9% (22) of these were Biparametric <table><tr><td></td><td>2023</td><td>2024</td><td>2025</td><td>2026</td></tr><tr><td>MRI Prostate</td><td>1666</td><td>1945</td><td>1632</td><td>608</td></tr><tr><td>Biparametric</td><td>848</td><td>999</td><td>601</td><td>53</td></tr><tr><td>%</td><td>51</td><td>51</td><td>37</td><td>9</td></tr></table>		2023	2024	2025	2026	MRI Prostate	1666	1945	1632	608	Biparametric	848	999	601	53	%	51	51	37	9																			
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MRI Prostate	1666	1945	1632	608																																				
Biparametric	848	999	601	53																																				
%	51	51	37	9																																				
5. Workforce How many radiologists report prostate MRIs at your Trust? (For each radiologist) • How many prostate MRIs does each radiologist report per year? • How many years of experience does each radiologist have in reporting prostate MRIs?	Do not have data re reporting experience <table><tr><td>Radiologist</td><td>2023</td><td>2024</td><td>2025</td><td>2026</td><td>Total</td></tr><tr><td>1</td><td>397</td><td>456</td><td>228</td><td>60</td><td>1141</td></tr><tr><td>2</td><td>0</td><td>5</td><td>229</td><td>201</td><td>435</td></tr><tr><td>3</td><td>888</td><td>689</td><td>620</td><td>168</td><td>2365</td></tr><tr><td>4</td><td>0</td><td>0</td><td>0</td><td>1</td><td>1</td></tr><tr><td>5</td><td>375</td><td>0</td><td>0</td><td>0</td><td>375</td></tr></table>	Radiologist	2023	2024	2025	2026	Total	1	397	456	228	60	1141	2	0	5	229	201	435	3	888	689	620	168	2365	4	0	0	0	1	1	5	375	0	0	0	375			
Radiologist	2023	2024	2025	2026	Total																																			
1	397	456	228	60	1141																																			
2	0	5	229	201	435																																			
3	888	689	620	168	2365																																			
4	0	0	0	1	1																																			
5	375	0	0	0	375																																			

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6. Access a) Based on the last 3 months (Apr – Jun), what is the mean wait time (days) for patients to receive an MRI having been referred onto the 2-week suspected prostate cancer pathway? (Duration from date of referral to date of scan in days): b) Based on the last 3 months, what is the mean wait time (days) for prostate MRI interpretation by a radiologist? (Duration from date of scan to date of report in days):	a. Req to Scan is 21.7 days b. Scan to report is 5.4 days			
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I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

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