Conclusion The compliance of the SA population to a LCD was reduced by a third compared to age matched WE with full compliance. Although similar improvements in insulin resistance and weight loss were achieved, there was trend towards less reverse concentric remodelling in the SA group and larger studies with longer follow up periods will be required to assess if the cardiovascular responses to weight loss are equally beneficial in ethnic minority populations.

Conflict of Interest None

158 COMMON REASONS OF REJECTED TRANSTHORACIC ECHOCARDIOGRAPH Requests In A TERTIARY REFERRAL Hospital

Introduction Transthoracic echocardiogram (TTE) is routinely requested in the clinical setting as it is a non-invasive investigation that provides invaluable diagnostic information. However, inappropriate requests impact the quality of service provision to other patients in a timely and effective manner. Rejected TTE (rTTE) requests were evaluated over two months to determine common themes of inappropriate referrals in a tertiary unit.

Methods The study design utilised both retrospective and prospective methods to analyse rTTE requests from September to October 2021. A collaboration with the local echocardiography department identified rTTE requests within the aforementioned time frame. A retrospective cohort study was performed in the first month to evaluate the underlying reason of rTTE requests. This was accomplished by entering patient unique identifiable number on the electronic request system to obtain the data. On 01/10/2021, a trust-wide oral presentation aimed at medical practitioners was organised to facilitate the understanding of TTE indications and contraindications in accordance with British Society of Echocardiography (BSE)

Abstract 158 Figure 1 Reasons of rejected transthoracic echocardiogram requests in September and October 2021