Radiology Quality and Safety Committee

Radiology Quality and Safety Committee, 2023 Report

Department-wide Projects

2023 Established Peer-to-peer Seminars.

Training of AHC junior MRI technologists by Siemens applications specialists.

Monitoring non-diagnostic biopsy results. The average sampled non-diagnostic rate is 3.4%.

Printed and distributed ACR contrast reaction cards to the reading rooms.

2024 Standardization of critical results notification procedure across the IU Health hospitals. Monitoring ACR RadPeer reports.

Abdominal—Vivek Halappa and Tariq Hameed

2023 Improved turnaround time for IP and OP procedure approvals from 4-6 days to 27 hours.

2024 Decreasing the radiation dose and avoiding contrast for adrenal nodule characterization.

Breast Imaging— Jennifer Medley

2023 Enter more accurate indications for breast MRI examinations using Aspen.

2024 Increase the routine transfer of breast MRI MIP images from the scanner to Synapse.

Cardiothoracic Imaging—Sonal Majmundar

2023 Established cardiac imaging quality assurance conference between Radiology and Cardiology.

2024 Shifting to use a more advanced cardiac MRI software (Precession).

Community, North/West— Jason Ford

2023 Improved ordered to finalized turnaround time of inpatient CTs from 20 hours to 9 hours.

2024 Decrease the backlog in ultrasound-guided fine needle aspirations at North and West.

Community, Ball— Jessica Smith

2023 Reduced the number of biopsies on inpatients performed at Ball Hospital.

2024 Developing structured reporting templates for common GI fluoroscopic procedures.

Emergency Radiology— Alisha Capps

- **2023** Established a **surge protocol** that can be activated to allow an additional radiologist to help.
- **2024** Track appropriately ordered CT GI bleeding exams in the acute setting.

Interventional Radiology— *Eric Beckley*

- **2023** Entering post-op day one notes on new abscess drains placed at the University hospital.
- Improve the quality of reports to improve patient safety for outpatient biliary drainage catheter exchanges/manipulations.

MSK Imaging— Nathan Maertz

- 2023 Implemented guidelines for management and follow-up of incidental bone lesions on MRI.
- **2024** Standardization of measuring technique and reporting leg length radiographs.

Neuroradiology— Benjamin Gray

- **2023** Implemented use of Alberta Stroke Program Early CT Score (ASPECTS).
- **2024** Implemented amyloid-related imaging abnormalities (ARIA) reporting system and template.

Nuclear Medicine— Justin Sims

- 2023 Implemented the initial staging template utilizing standard TNM language in the impression section of PET/CT reports.
- 2024 Standardization of nuclear medicine renal scan reporting.

Pediatrics— Joseph Davis

- **2023** Reduced utilization of cervical CT in pediatric trauma services.
- **2024** Every positive skeletal survey in peds will get a second read, ideally the following day.

Administrative Support— Tyler Avery and Chelsy Challis