

**Atlantic Medical Imaging
Physician Operations Meeting Minutes
May 29, 2018**

Attendance: Drs. Kenny, Avagliano, Pack, Schmidling, T. Patel (via conference phone), Shah (via conference phone), Jennifer Gorgol, Cyndy Dill and Frank Dente.

OLD BUSINESS

- **Dotarem-** implementation practice wide is June 4th. The only other agent available will be Eovist. Dotarem will be used for Arthrograms. Dosage will be weight based.
 - Techs need not ask radiologists for approval with GFR between 30 & 60. Jen will follow up with Kristin.
 - If referrer requests; should be a dr. to dr. discussion.
 - If GFR is between 15 & 30 and the study is specifically requested The radiologist will confer with referring doctor and consider giving Dotarem if medically necessary.
 - Hospital is negotiating changing to Dotarem.
 - Patients will now be given information about Dotarem; this is required by the FDA. The MRI techs were trained to provide this info to the patients. Cyndy will follow up with Kristin so the nurses can be trained on how to answer patient questions and concerns.
 - Nicole will post FDA required info on the rad portal.
 - Jen will follow up with Carla to let her know we are moving forward with Dotarem. This can be used as a marketing tool.
- **Pregnancy tests-** We are going to move forward with giving patients pregnancy tests if needed.
- **Family history-** The committee would like to survey referrers to see what history information they would like included on the report, particularly WI. Will be discussed further at the next Ops meeting.
- **Breast MRI-** We will be trialing axial imaging at TR; Peggy, Pack and Ibrahim will be reading these cases.
- **ACR/ MQSA issues-** Information on Digital training needs to be given to Marc.
- **Overuse and underuse of XCC-** Trial was inclusive. The rad needs to write down who the tech is and how many images they are producing. Many unnecessary views are being done. Specific tech training may be required.
- **Skin markers-** Triangles are for palpable lumps.
- **Magview-** We are two full versions behind; Frank will follow up with Finance for approval.

Body Imaging

- **CTA slice thickness-** Issue with SafeCT; fix is a works in progress.
- **BOB update-** Fetal Cardiac lecture with Dr. Julia Solomon was a success. All materials are available on the web portal.
- **Ultrasound cheat sheet for referrers-** Carla sent out today, 5/29/18.
- **Doppler interrogation-** Remind techs that if Color/Spectral images are performed and no flow is felt to be present, the tech needs to notify a radiologist to determine significance.

MRI

- MR Elastography- fix is complete.
- MR Fe Quant
 - Dr Tejas Patel working with Siemens to resolve issue

NEW BUSINESS

- **Body**
 - Making progress on the issue in TR regarding larger patients on the 3T.
 - Erica attended training on Cardiac. Need to be able to process on Fuji software.
 - ICON- no reads needed by AMI.
 - Fetal US for BOB
 - Dr. Solomon lecture was a success.
 - BOB tech worksheets will be scanned in with paperwork, once they have been put on Fuji system. They need to follow exact AMI protocol. Jen will inform Drs Patel or Dr. Kenny of any pushback.
 - Pelvic pain patients- This is an items for QI. Dr. T. Patel will reach out to Cherry.
- **Women's Imaging**
 - All mammo readers need to send Marc their documentation.
 - B readers need to take some time and look at the 2D images for comparison. We are inappropriately calling back too many cases.
 - Peggy and Jen will discuss offline how to create a review list in Fuji for B readers.
- **Neuro**
 - RAPID vs. OLEA- Dr. Shah spoke with Ernie from A'Care; waiting on RAPID.
 - Dementia and reporting- Modify brain MR slightly; T1 sequence for dementia should be added to the MRI Brain. This would require tweaking some templates.
 - Roche Study- Memory Center in Wall would like us to scan patients for pre-admission testing. Scan needs to be done on 1 scanner, hour long study with contrast. Dr. Shah will follow up with Kristin to see how labor intensive this will be for the staff.
- **General Radiology**
 - Scoliosis x-rays- Will be discussed at the next meeting.
 - ICD 10 codes- Automatically populate in report templates.
 - Orbits x-rays- Will make effort to cut down on unnecessary exams; this is not a routine x-ray.
 - Reports to be called- We need to document who we spoke with and this info needs to be put in PACS
 - IMorgan
 - We will be using the full function of IMorgan. Added to future Pomona projects list.
- **New Projects/ Other**
 - PACS update- Go live slated for 7/30. There are issues with migration that may delay.

- The orders coming over need to be corrected for image migration can begin. WI will be last to be migrated.
 - Only outside films 7 years and older for WI and pediatrics will be migrated over. Every other type of case will only have 3 years of AMI priors loaded.
 - Hanging protocols- Works in progress.
- Heartflow CCTA- Dr. Levi working on contract. Will require an additional CPT code in addition to the CTA.
 - iSTAT- Handheld blood analyzers have arrived. They will be used in Galloway and SP. Staff training on the device begins June 14th.
 - Needle sticks- Uptick in unnecessary needle sticks amongst employees so far this year. Proper protocols will be followed. Linda will do an in-depth review and look for trends. Re-training of protocols may be needed.
 - The rad should recap their own sharps exception of Breast MRI.
 - No unnecessary sharps should be left on the table.
 - The 25 gage should not be used.