

Seamless Access to Prior Studies Ensures Radiologist Productivity and Clinical Integrity

Efficient and seamless radiology workflows are paramount to ensuring radiologists can maximize their productivity and contribute fully to clinical quality improvements. The radiology staff at SwedishAmerican Hospital, a 333 bed acute care facility in Rockford, IL. were caught off guard by such issues when historical comparison studies from a legacy PACS were not being efficiently retrieved and presented to the radiologist on their new PACS. “We invested a significant effort to migrate all studies from our now decommissioned Emageon PACS to our new vendor neutral archive (VNA) to ensure all new and legacy studies would be available to those who need them, and be stored in a single location”, points out Patti Keller, PACS/RIS Administrator at SwedishAmerican Health System. “Subtle differences in exam description and body part mapping, between the two PACS, were limiting available prior studies from being properly identified, retrieved and presented with new exams, per the radiologists hanging protocols.”

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SwedishAmerican generates over 200,000 annual studies from two hospitals and six outpatient facilities, all of which are read by nine radiologists from Radiology Consultants of Rockford (RCR). This includes screening mammograms and specialized exams performed at the cancer center. After 9pm, all emergency department studies are sent to Nightshift Radiology for preliminary reading, and are approved and finalized in the morning by an RCR radiologist. Dr. Mark Traill, RCR Radiologist, and medical director of magnetic resonance imaging at SwedishAmerican Hospital points out that “Screening mammograms and pre/post contrast oncology studies that typically include chest/abdomen/pelvis comparisons where initially affected the most.”

Laurel Bridge Software’s enterprise imaging workflow solution was implemented to perform advanced searches and retrieval of legacy imaging studies from their PACS and VNA, when triggered by a new exam order. This has not only automated the process of fetching “relevant” prior studies but has also provides a simple mechanism for normalizing study descriptions when needed to ensure all studies stored on the PACS and VNA ultimately have a consistent study description; a requirement in their PACS environment to properly present prior patient studies.



“Dr. Traill and his colleagues are now confident that all available prior exams are presented on PACS despite the fact they read in different locations throughout the week. “We are specialized by modality yet we all rotate through the local cancer center each week, and every morning we have to finalize the previous nights Emergency Department studies that were initially read by our teleradiology partner. These challenges are common to every successful radiology practice these days, and their rapidly evolving imaging workflows must be supported by their PACS”. Patti Keller points out, “Since implementing Laurel Bridge’s Navigator solution, we have experienced a consistently low number of IT support calls from radiologists requesting help with retrieval or presentation of prior studies. This has enabled the IT support team to focus on helping the hospital implement new initiatives and upgrades that support SwedishAmerican Hospital’s efforts to improve the care we deliver. The IT staff works closely with the radiologists to ensure our expertise and technology support our organizations constantly evolving clinical workflow needs.”

“Our efforts to constantly improve the quality of clinical service mandates that we have access to all clinically-relevant prior patient exams.”

***Dr. Mark Traill
Radiologist
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