

Memorandum

To: Mary K. Greene, M.D.
Anne L. Calkins, M.D.
Barbara Wolfson, M.D.
Dawn Light, M.D.
Mark Warren, DO.
Mark J. Halsted, MD



From: Elizabeth H. Ey, M.D.

Date: July 24, 2011

Re: Updates

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- **MR/CT/Sedation area** – I continue to remind the staff in the MR/CT area to keep their conversations focused on patient care while they are working. I believe they are doing better. They still need reminding from time to time. If things sound loud in the background when you are on the phone to those areas, please remind them to stay focused and keep the noise level down. Patient safety is very important.
 - **CT and MR protocols** – I believe the majority of the CT and MR protocols are being evaluated and entered in Epic in advance of the scheduled study. When you are giving a protocol for a brain MRI, be sure to take into account the patient's age to choose the correct protocol. Also, follow up brain tumor MR with contrast should follow the MX19 protocol (not the MX9) in order to be compliant with COG guidelines. After hours, we may still have a few protocols to enter for add on cases and for cases which were waiting for the actual prescription. Thanks for your patience.
 - **Cisco Phones** – The Cisco representatives are reevaluating the position and strength of the access points for the cordless phones. Whenever you encounter a problem with the cordless phones, please send Idamae an email detailing the time, place, and explanation of problem as well as which phone lines/hand sets were involved. Idamae and the Cisco representatives have recommended that we **turn off the cordless phones when putting them on the charging station**. This should help reduce the number of phones in the area that are competing for signal.
 - **Dr. Stephen Wolf** is now fully licensed and credentialed. He has begun seeing patients in the Pulmonary Department.
 - **Outside Reads** – You may be able to avoid missing important information if you look at the reports of the Outside Reads to see if the study might be important for comparison to your current study. Although the actual outside study name is not listed in PACS, the type modality of the outside images is indicated in the Modality column. I asked Idamae about actually using the correct name of the study, e.g. CT Head-Outside reading, in PACS. She did not think that was a reasonable option. She would have to duplicate the list of types of Procedures used in PACS and indicate half as Outside Read.
 - **New MR Protocol** – We have recently added an MR protocol to evaluate infant hips in spica cast after closed reduction. The protocol is without and with IV contrast (if the patient is safe to have contrast) and does not require sedation. It should take about 15 minutes to complete and hopefully can be fit into the schedule when the infant is safe to come to MR after anesthesia during hip reduction. The journal reference is: **Pediatr Radiol (2011) 41:525-529** It is intended for children 1 year of age or less. These children are usually small enough to fit in the bore even in a spica cast and the spica is made without the metal bar. The advantage of MR for this indication is that there is no radiation exposure as in CT and the position of the femoral heads with respect to the acetabulum and labrum is better demonstrated. The contrast allows evaluation of the blood supply to the femoral heads. If there is diminished enhancement of one of the femoral heads, the cast can be reapplied with less hip abduction in order to avoid AVN. If there is too much patient motion, the authors recommend not giving the contrast.
 - **Security** – We have had some thefts in the department during second and third shifts. It may be related to having fewer staff in the tech area now that the ED x-ray room is running. Joanne is looking into additional locks and security measures. If you see someone in the department (outside the waiting areas) who is not accompanied by a CMC staff member, off to help them find their way or family member. Report any suspicious activity to Security right away. Please do not leave the outside doors to the Cath Lab unlocked, especially when no staff member is working in there.
 - **Next radiologist meeting** – Monday, July 25 at 12:30 pm in the **Radiology Conference room**. If you have an agenda item to discuss, please forward it to me in an e-mail. Lunch will be provided.