

Radiologist Meeting February 24, 2020 - 12:30 - 1:30 pm Tower Second Floor Conference Room Minutes

1. ACR pediatric contrast reaction cards

W. Lavy

a. Wallet size cards have been printed with the ACR recommendations when managing an acute reaction in to IV contrast material in pediatric patients. These cards are available to all and will be distributed to other departments as well.

2. Craig Carr Promotion

M. Wilson

a. Melanie announced Craig Carr's promotion to Medical Imaging Director. Congratulations Craig!

3. Changes in shielding recommendations

C. Carr

a. Some Children's Hospitals have moved away from patient shielding due to research showing that the main source of radiation dose to internal organs outside of the imaging field is scatter inside the body. However, the Ohio Department of Health (ODH) has not changed its guidance on patient shielding. In conversations with Sean Hoyt, our Certified Radiation Expert (CRE), DCH will delay implementation of any reduced shielding to remain in compliance with the ODH regulations.

4. MR protocol updates A. Lillie

a. MSK tumor or infection protocol (DWI)

5. Renal scan protocol

B. Ey

a. Recently, questions were raised regarding how we perform diuretic renograms in NM. I did hear from each of the Pediatric Urologists regarding the questions raised. They want to maintain consistency for comparison sake. They do prefer to have a 2 phase study with pre and post Lasix imaging. Occasionally, post gravity drainage images after completing the Lasix phase after the patient has been upright for 10 minutes might be beneficial. They do not believe it is necessary on a regular basis. They said they would specifically request post gravity imaging when they would like it.

6. Gastric emptying scan prep B. Ey

a. A recent journal article listed medications to avoid in gastric emptying studies. There was general agreement about the list, but there were some questions about how to communicate this list to referring physicians. One suggestion was to include this information on the CHI sheet. In the meantime, Phyllis will review the patient's medication list, but we will not try to change what the patient is receiving prior to the study.

Anne	Craig	Elizabeth	John	Aleah	Sean	Mindy	Keith	Wilma	Dawn	Andrea	Ben	April	Frank	John	Carole	Mark	Melanie
Calkins	Carr	Ey	Ey	Hildebolt	Kelleher	Knippen	Jones	Lavy	Light	Lillie	McNeely	Madden	Pianki	Roebel	Wehmeyer	Warren	Wilson

7. New Siemens CT protocols B. Ey

- a. Some recent cardiac studies have had problems with gating. Ben McNeely is working on the protocols.
- b. ENT physicians are requesting additional imaging for STEALTH Intraoperative Sinus Surgery. The study typically requested is CT Sinus/Maxillofacial (CPT 70486). For intraoperative guidance, localization points are needed including the top of the head. This will include more of the brain on the CT sinus and CT orbit studies. Since we won't know in advance which patients may ultimately need surgery, a routine CT sinuses and CT orbits will include the top of the patient's head. There are some questions about the need to interpret the additional anatomy imaged. John Ey will research any coding impacts for the additional scanning.

8. Other

- a. Melanie reported that the research contract with WPAFB (performed after hours) is continuing.
- b. April mentioned that "point of care" US equipment has been purchased for the Rheumatology Department. Discussion ensued establishing the following points:
 - i. DPI has the exclusive right to interpret and bill all diagnostic imaging performed at DCH facilities.
 - ii. "Point of care" US equipment currently is located in the ED, OR, and now in Rheumatology.
 - iii. None of the images from the current "point of care" equipment are retained in the DCH Epic or PACs systems.
 - iv. John Ey will follow-up on any DPI contract impacts.

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