

Dept. Procedure Title:	Reporting of Critical and Unexpected Exam Results Procedure - Radiology	Procedure ID:	11761
Keywords	Not Set		
Department:	Radiology		

I. Purpose of Procedure

The purpose of this procedure is to define Critical Results and Unexpected Findings and to describe the process to track these findings.

II. Procedure Scope

This procedure applies to all D-H Lebanon Radiology, including Outreach Sites, Providers, Staff, and Administrative Personnel.

III. Definitions

Critical Results: Findings/results in imaging exams that require immediate or urgent communication with the provider. These findings reflect conditions that are life threatening (e.g. tension pneumothorax) or conditions that require immediate change of management (e.g. retained surgical objects). A few of these conditions are selected for auditing and tracking purpose (listed below). **This list does not represent all the urgent communications that our radiologists complete daily.** The radiologists are reminded to communicate any urgent conditions, outside of this list, that may alter care.

Unexpected Findings: Findings/results in imaging exams that the interpreting radiologist reasonably believes may be seriously adverse to the patient's health and may not require immediate attention but, if not acted on, may worsen over time and possibly result in an adverse patient outcome (e.g. lung nodule on pre-employment CXR).

IV. Equipment N/A

V. Procedure

All Critical Results and all exams tagged as Unexpected Findings are to be communicated by the Radiologist, designated Radiology Resident, or an Administrative Assistant in a timely fashion. This communication is tracked and documented in eDH.

Critical Results

A. Communication of Critical Results

1. Verbal notification must be provided within 1 hour of completion of imaging review, to the Provider/Service by the Radiologist, designated Radiology Resident, or an Administrative Assistant. When verbally reporting a Critical Result, the Radiologist verifies that the ordering Provider/Service understands the results being communicated.
 - Verify the patient's full name and MRN when communicating critical result.

2. Document the communication of urgent findings *not* on the audited Critical Results list within the Radiologists report in the following format:
“I Radiologist or Resident name discussed these results with ordering provider or designated clinical representative name on date at time and verified that (s)he understood these results.”
3. Document the communication of urgent findings on the audited Critical Results list within the Radiologists report in the following format:
“I Radiologist or Resident name discussed these critical results with ordering provider or designated clinical representative name on date at time and verified that (s)he understood these results.”

B. Critical Results Tracking Mechanisms

1. The Audited Critical Results list is included in the table below
2. The following data elements are used to track Critical Result Policy Compliance:
 - a. Exam complete date and time
 - b. The date and time the report was finalized with report containing all the communication elements listed above in Section A, #3.
3. The following time metrics dictate whether or not the specific Critical Result meets the Critical Result Policy Compliance:
 - a. Date and time the Critical Result report was finalized **minus** exam complete date and time.
4. Any Critical Results metrics from #2 that are over an hour will be researched manually.

The list below does not reflect all of non-routine communications that D-H radiologists complete daily.

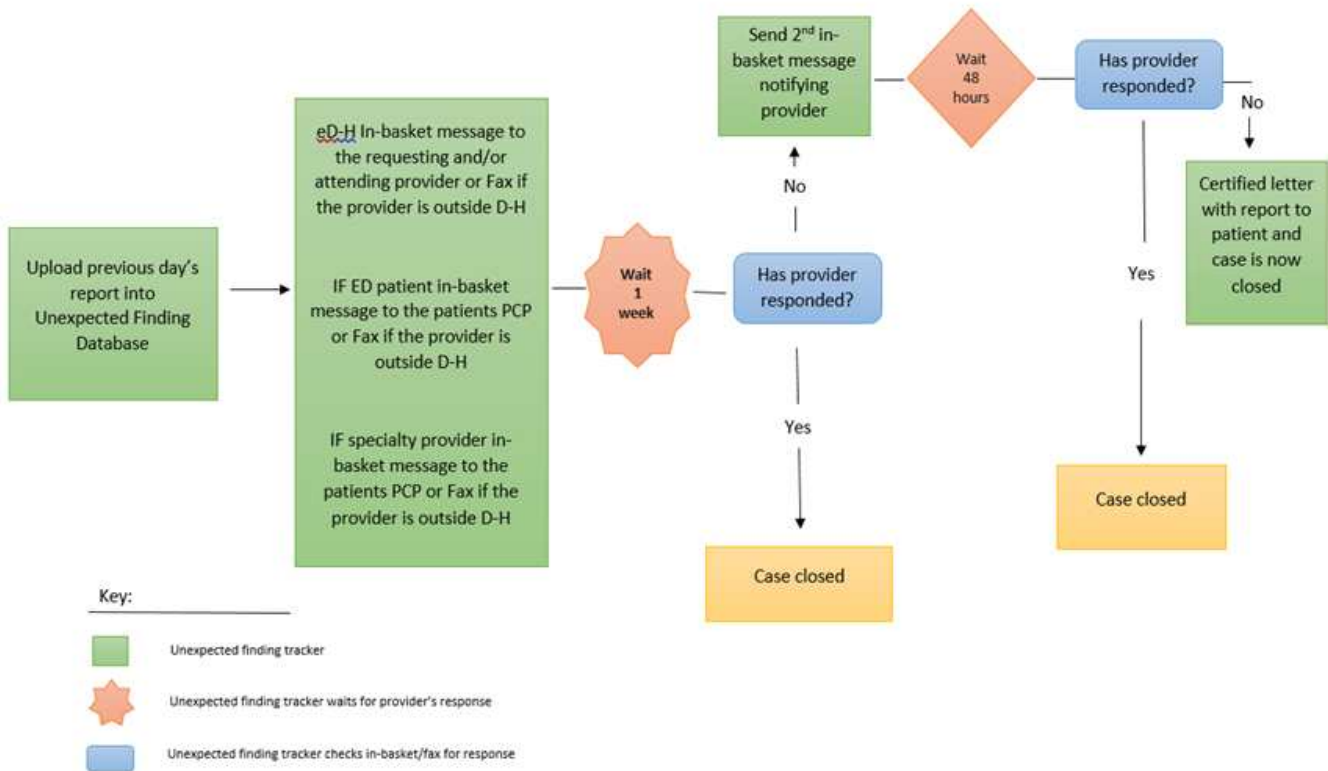
<u>Audited Critical Results</u>	Exam Modality	Length of time between opening of exam to notification time
Retained Surgical Foreign Body	CT, X-Ray	Documented communication less than one hour
Cord Compression	MR	Documented communication less than one hour
Acute aortic dissection or injury	CT	Documented communication less than one hour
Acute aortic aneurysm rupture	CT	Documented communication less than one hour
Active intra-abdominal hemorrhage	CT	Documented communication less than one hour
Large and/or Central Pulmonary Embolism	CT	Documented communication less than one hour
Unexpected free air in the abdomen	CT, X-Ray	Documented communication less than one hour
Tension Pneumothorax	CT, X-Ray	Documented communication

		less than one hour
Ectopic pregnancy	U/S	Documented communication less than one hour 1 hour
Testicular/Ovarian Torsion	U/S	Documented communication less than one hour 1 hour

C. Communication of Unexpected Findings

The process of communicating Unexpected Findings is outlined in the process map on Figure 1.

Figure 1 Process diagram for communicating Unexpected Finding



VI. References

Larson et al. *J Am Coll Radiol* 2014;11:552-558.

Responsible Owner:	Department of Radiology	Contact(s): email	Christine Kvinlaug
Approved By:	Office of Policy Support - All Other Documents; Kvinlaug, Christine	Version #	2
Current Approval Date:	10/26/2017	Old Document ID:	RAD.0038
Date Procedure to go into Effect:	10/26/2017		
Related Policies &	Reporting of Critical and Unexpected Exam Results Policy- Radiology		

Procedures:	Reporting Of Critical and Unexpected Exams Results Job Aid - Radiology
Related Job Aids:	