

Qualified Clinical Data Registry (QCDR) Measures Supported 2021

! = High priority measure.

QCDR Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
ACRad 15 !	Report Turnaround Time: Radiography	Mean Radiography RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 16 !	Report Turnaround Time: Ultrasound (Excluding Breast US)	Mean Ultrasound RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 17 !	Report Turnaround Time: MRI	Mean MRI RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 18 !	Report Turnaround Time: CT	Mean CT RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 19 !	Report Turnaround Time: PET	Mean PET RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 25 !	Report Turnaround Time: Mammography	Mean mammography report turnaround time (RTAT)	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 34 !	Multi-strata weighted average for 3 CT Exam Types: Overall Percent of CT exams for which Dose Length Product is at or below the size-specific diagnostic reference level (for CT Abdomen-pelvis with contrast/single phase scan, CT Chest without contrast/single phase scan and CT Head/Brain without contrast/single phase scan)	Weighted average of 3 former QCDR measures, ACRad 31, ACRad 32, ACRad 33. Weighted average percent of CT Abdomen-Pelvis, CT Chest, and CT Head/Brain exams with contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level.	Patient Safety	Outcome	Dose Index Registry	

Qualified Clinical Data Registry (QCDR) Measures Supported 2021

! = High priority measure.

QCDR Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
ACRad 36 !	Incidental Coronary Artery Calcification Reported on Chest CT	Percentage of final reports for male patients aged 18 years through 50 and female patients aged 18 through 65 years undergoing noncardiac noncontrast chest CT exams or with and without contrast chest CT exams that note presence or absence of coronary artery calcification or not evaluable	Communication and Care Coordination	Process	General Radiology Improvement Database	
ACRad 37 !	Interpretation of CT Pulmonary Angiography (CTPA) for Pulmonary Embolism	Percentage of final reports for patients aged 18 years and older undergoing CT pulmonary angiography (CTPA) with a finding of PE that specify the branching order level of the most proximal level of embolus (i.e. main, lobar, interlobar, segmental, subsegmental)	Communication and Care Coordination	Process	General Radiology Improvement Database	
ACRad 38 !	Use of Low Dose Cranial CT or MRI Examinations for Patients with Ventricular Shunts	Percentage of patients aged less than 18 years with a ventricular shunt undergoing cranial imaging exams to evaluate for ventricular shunt malfunction undergoing either low dose cranial CT exams or MRI	Patient Safety	Process	General Radiology Improvement Database	
ACRad 39 !	Use of Low Dose CT Studies for Adults with Suspicion of Urolithiasis or Nephrolithiasis	Percentage of patients aged 18 years and older with a diagnosis of urolithiasis or nephrolithiasis undergoing CT imaging exams of the abdomen or pelvis to evaluate for urologic stones undergoing	Patient Safety	Process	General Radiology Improvement Database	

Qualified Clinical Data Registry (QCDR) Measures Supported 2021

! = High priority measure.

QCDR Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
		only low-dose CT exams of the abdomen or pelvis without intravenous contrast				
ACRad 40 !	Use of Structured Reporting in Prostate MRI	Percentage of final reports for male patients aged 18 years and older undergoing prostate MRI for prostate cancer screening or surveillance that include reference to a validated scoring system such as Prostate Imaging Reporting and Data System (PI-RADS)	Communication and Care Coordination	Process	General Radiology Improvement Database	
ACRad 41 !	Use of Quantitative Criteria for Oncologic FDG PET Imaging	Percentage of final reports for all patients, regardless of age, undergoing non-CNS oncologic FDG PET studies that include at a minimum: a) Serum glucose (eg, finger stick at time of injection) b) Uptake time (interval from injection to initiation of imaging) c) One reference background (eg, volumetric normal liver or mediastinal blood pool) SUV measurement, along with description of the SUV measurement type (eg, SUVmax) and normalization method (eg, BMI) d) At least one lesional SUV measurement OR diagnosis of "no disease-specific abnormal uptake"	Communication and Care Coordination	Process	General Radiology Improvement Database	

Qualified Clinical Data Registry (QCDR) Measures Supported 2021

! = High priority measure.

QCDR Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
ACRad 42 !	Surveillance Imaging for Liver Nodules <10mm in Patients at Risk for Hepatocellular Carcinoma (HCC)	Percentage of final ultrasound reports with findings of liver nodules < 10 mm for patients aged 18 years and older with a diagnosis of hepatitis B or cirrhosis undergoing screening and/or surveillance imaging for hepatocellular carcinoma with a specific recommendation for follow-up ultrasound imaging in 3-6 months based on radiological findings	Efficiency and Cost Reduction	Process	General Radiology Improvement Database	