Breast Imaging Orders and the Electronic Health Record: How To Help Your Providers Get It Right
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Disclosures: Nothing to Disclose
Purpose

- Appropriate ordering of breast imaging studies is complex, with nearly 70 breast imaging order options available in the Epic electronic health record (EHR) at our institution.
Purpose

• As a result, incorrect ordering of screening and diagnostic breast imaging studies is common.

• When patients are scheduled incorrectly, it creates frustration for patients and providers and impacts radiology resource allocation.

• We aim to assist providers in properly selecting breast imaging orders by creating a Breast Imaging Order Panel in the EHR.
Materials and Methods

• Collaborative stakeholders in primary care and radiology developed a Breast Imaging Order Panel in the EHR with integrated clinical decision support to optimize correct order selection for screening women at average-risk and high-risk of breast cancer and for diagnostic breast imaging for symptomatic patients.

• The panel was created by our Clinical Content Analysts with approval from radiology and primary care governing bodies.
Results

- The Breast Imaging Order Panel reduced the number of breast imaging orders in the EHR from 70 to 14.
- The panel subdivides orders based on clinical indication:
  - asymptomatic/screening
  - symptomatic/diagnostic imaging
  - implant rupture assessment
  - follow-up of abnormal imaging findings.
- Clinical decision support within each subdivision aids in selection of appropriate imaging studies.
Results

- For screening, guidelines for average-risk and high-risk patients are provided.
- Screening breast tomosynthesis is defaulted when ordering through the panel.
Results

• For symptomatic patients, recommended imaging is based on patient age, gender and laterality of symptoms.

• The need for tomosynthesis versus 2D mammogram will be determined by radiology.
Results

• For implant rupture assessment, providers can select MR breast without contrast to evaluate implant integrity or MR breast with and without contrast if malignancy assessment is also desired.
Results

• Simplified diagnostic orders can be selected for follow-up of abnormal imaging findings.

• To reduce confusion and encourage use of the panel, many breast imaging orders were removed from departmental lists.
Conclusion

• Creating a Breast Imaging Order Panel within the EHR is a way to provide clinical decision support to ordering providers.

• When developing a system-wide change that impacts operational workflows, involvement of multiple stakeholders is essential.

• Since Go-Live August 2021, we have received positive feedback, and providers are able to order breast imaging studies as needed. Order panel usage has steadily increased, with 599 orders placed via the order panel February 2022.