Radiology Informatics and Quality: Combining to Create a Comprehensive Radiology Order Build Process
Authors

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• No Disclosures for all authors
Problem

• Little to no input from Radiology department or relevant stakeholders on exam order builds

• Hospital Finance and EMR teams routinely named and built Radiology orders

• Order naming convention was confusing and not provider, technologist, or radiologist friendly

• Radiology Order Catalog became cluttered with outdated orders that were theoretically unable to be removed/deactivated
Stakeholders

• Members include:
  • Lead Radiology Coder
  • Radiology Quality Analyst
  • Radiology Informatics
  • Radiology Supervisor and Director (specific to order type)
  • Radiology Section Chief
  • EMR Analyst
  • Hospital Finance
Goal

Create a formal and sustainable radiology order build process

Have stakeholders approve each order build request

Ensure correct naming convention, build, associated charges, and deactivated radiology orders are assessed
Process Pipeline

- Request for new or modification of Radiology Order(s) is placed via Smartsheet® Form
Process Pipeline

- Radiology Quality Analyst receives request and begins review process
- Clinical Informatics Radiology Subcommittee (if order request requires discussion), and Radiology Quality Analyst use the Logical Observation Identifiers Names and Codes (LOINC)

Modality + Part + View + Other
Process Pipeline

• Radiology Quality Analyst works with Radiology Supervisor and Radiologist Section Chief to choose standardized order name that is understandable and complies with LOINC naming conventions

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• Radiology Coder provides Current Procedural Terminology (CPT) code

• Radiology Director and Medical Director review order details for approval
Process Pipeline

• Once approved, Radiology Quality Analyst works with Hospital Finance to create Charge Description Master (CDM) code(s)

• Radiology Quality Analyst submits the CDM, CPT, and order name to the EMR Analyst to begin the build process

• Radiology Informatics works with the Radiology Section Chief to create the radiologist dictation template for the order, and assigns the order to the appropriate reading list in PACS and voice dictation software
Process Pipeline

• Once order is built in Production environment, Radiology Quality Analyst sends education to Radiologists, Technologists, and Ordering Providers

• Radiology Quality Analyst works with the EMR Analyst and Hospital finance to deactivate any orders replaced by new order
Outcomes

• Clinical
  • Standardized naming conventions promote ease of use, reducing errors and confusion among Radiology faculty and hospital staff
  • Deactivating unused orders reduces the choices available to providers, making order selection a straightforward, direct process

• Financial
  • Decreasing errors and order confusion reduces cost to the facility in part due to repeat exams
  • Ensuring the CPT and CDM codes are correct for each exam reduces billing errors/inconsistent billing to the patient
Outcomes

• Quality & Safety
  • Ensuring the ordered exams are clear and concise during the selection process by the provider reduces the need for additional tests and call back

• Regulatory
  • CPT codes are updated on a yearly basis and require updates to the back-end build of an order, which allows payors to approve submitted charges
Thank You

For questions feel free to e-mail:

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