

THE IMPACT OF PULMONARY NODULE REPORTING RADIOGRAPHERS ON PRIMARY REPORTS AND THE MDT PATHWAY

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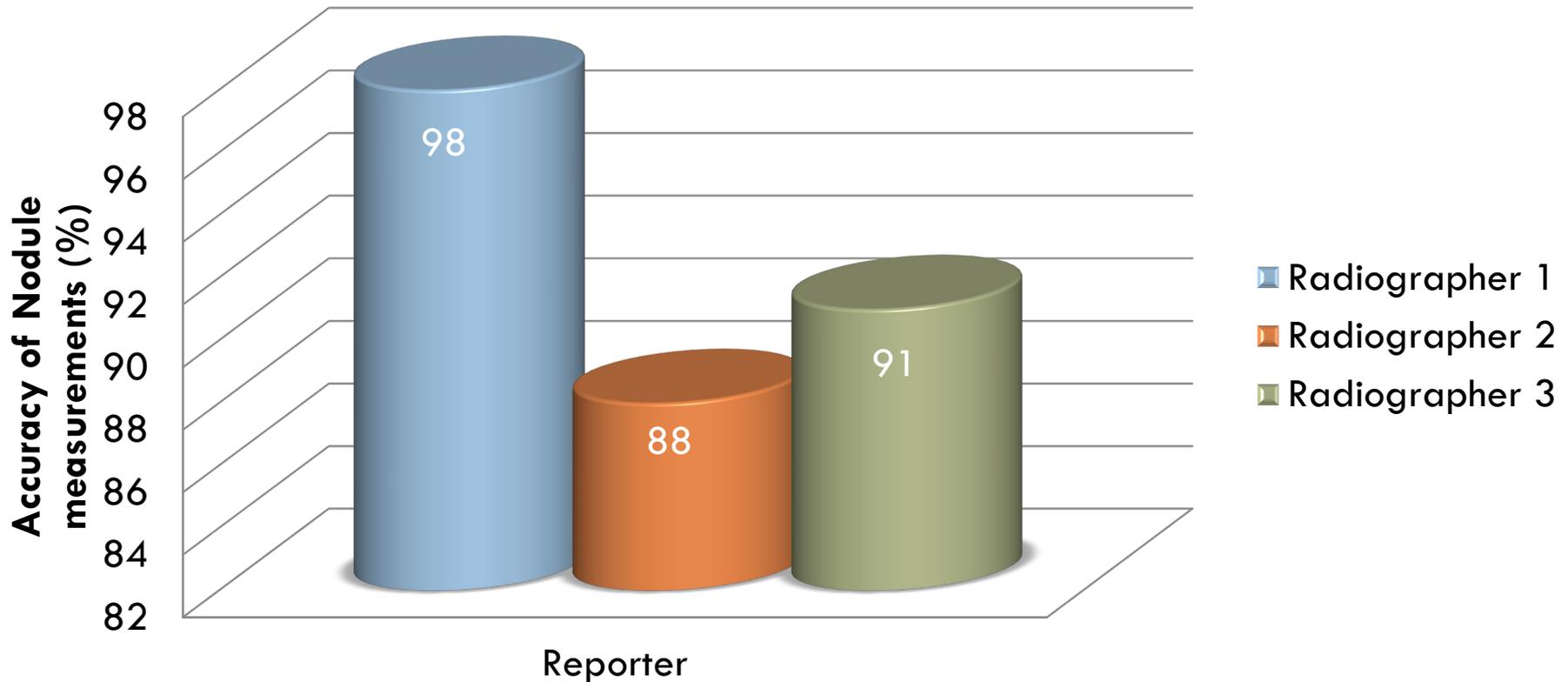


Reporting

- Shadowing
- Volumetry, software and segmentation
- Template report
 - Volume(where possible)
 - Volume doubling time (VDT)
 - Extra Nodular findings
 - Recommendations



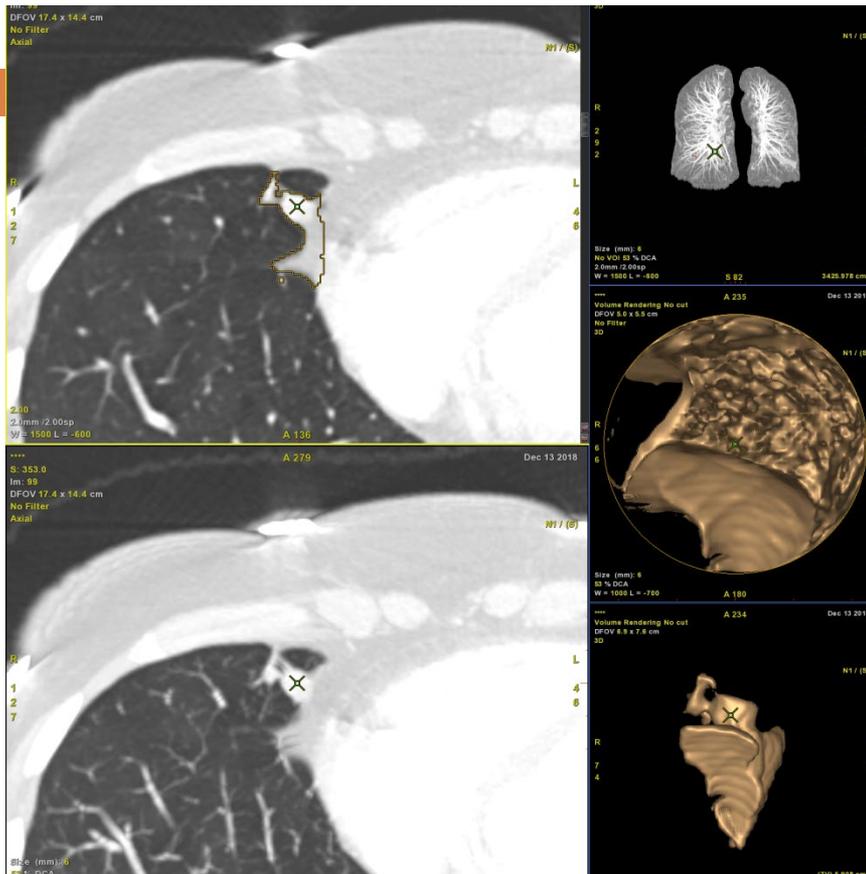
Volumetric/diameter accuracy 2017- Present*



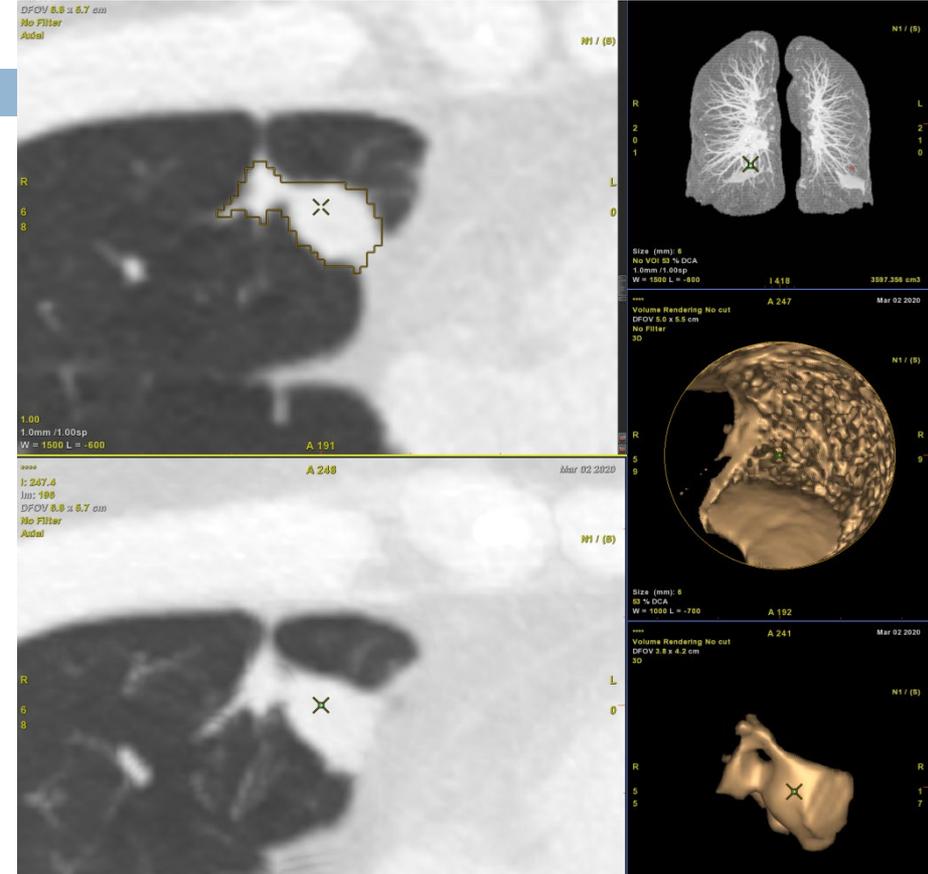
*Radiographers started role at different times, hence variation in confidence levels by verifying Radiologist



Adjusting volumetry parameters to gain reliable segmentation



Poor segmentation –
pleura and pericardial fat
captured on volumetry



Good segmentation –
Juxta pleura setting used to
achieve optimal volumetry



Reporting times pre & post implementing radiographer reporting

	Average time to report/verify
Radiologist reporting alone	19 minutes
With Radiographers primary report	9 minutes

On average the Radiographer reporting times are typically around 10-20 minutes



Pulmonary Nodule MDT

Follow up cases

Incidental cases

Addenda

Increase in MDT cases

Radiographer lead



CT follow up referrals

Respiratory physicians

Radiographers

Labour intensive requesting

Redeployment



Summary

Reduced workload

MDT

CT requesting

Better patient outcomes

