



# Radiology Performance Standards

Performance Metric	Best Practice
<b>Final Reports</b>	
<ul style="list-style-type: none"> <li>100% final reports (no preliminary reads)</li> </ul>	<ul style="list-style-type: none"> <li>Standardized and checklist-driven reporting technology</li> </ul>
<b>Turnaround Time</b>	
<p>Emergency Department:</p> <ul style="list-style-type: none"> <li>Stroke Protocol &lt;20 minutes</li> <li>STAT &lt;30 minutes</li> </ul> <p>Inpatient:</p> <ul style="list-style-type: none"> <li>STAT &lt;30 minutes</li> <li>Expedited &lt;4 hours</li> <li>Routine &lt;18 hours</li> </ul> <p>Outpatient:</p> <ul style="list-style-type: none"> <li>Expedited &lt;4 hours</li> <li>Routine &lt;24 hours</li> </ul>	<ul style="list-style-type: none"> <li>Voice recognition technology</li> <li>All reports self-edited by radiologists</li> </ul>
<b>Communication</b>	
<ul style="list-style-type: none"> <li>Consultations 24x7: &lt;60 minutes</li> <li>Critical finding communication: &lt;60 minutes</li> </ul>	<ul style="list-style-type: none"> <li>Videoconferencing with full image review capabilities</li> <li>Automated tracking of critical findings</li> <li>Mobile device delivery of critical findings</li> </ul>
<b>Specialization</b>	
<p>100% subspecialist reads for:</p> <ul style="list-style-type: none"> <li>MR (Neuro, MSK, or Body fellowship, CAQ or proven expertise*)</li> <li>PET (Nuclear Medicine fellowship, CAQ or proven expertise*)</li> <li>Pediatric (Fellowship, CAQ or proven expertise*)</li> <li>Women's Imaging (Mammography MQSA certification and fellowship or proven expertise*)</li> </ul>	<ul style="list-style-type: none"> <li>Contractual availability of all key radiology subspecialties</li> <li>Workflow-routing capabilities to ensure the right subspecialty reads</li> </ul>
<b>Diagnostic Accuracy</b>	
<ul style="list-style-type: none"> <li>&gt;1% prospective double-blind peer review</li> <li>&lt;2% clinically-significant error rate (<i>non-mammography</i>)</li> </ul>	<ul style="list-style-type: none"> <li>Statistically valid sampling methodology across all modalities</li> <li>Integration of peer review results into OPPE</li> <li>Concurrence review of high risk examinations</li> </ul>
<b>Utilization</b>	
<ul style="list-style-type: none"> <li>&lt;10% follow-up imaging rate (<i>non-mammography</i>)</li> <li>8-14% mammography recall rate</li> </ul>	<ul style="list-style-type: none"> <li>Quarterly analysis and reporting of utilization data by physician, site of care, and modality</li> </ul>

\*Proven expertise is determined by radiologist QA scores and study volume in area of expertise.