Patient-Centered Imaging

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Introduction

Who are the “customers” of an imaging department?
Is the “customer always right”?
Why should we be patient-centered?
Medicine’s New Trajectory

- Becoming consumer driven
- High deductible plans puts more cost on patients
- Direct marketing to patients increasing
- Self referrals increasing
- Alternative medicine, $50 billion industry
- Web empowerment
- Patient access to their medical chart online

Customer Satisfaction

- Reliability
- Responsiveness
- Assurance
- Empathy
- Tangibles

What do patients want?

- Fast & easy appointments
- Rapid results
- Reassurance
- Transparent pricing/billing
- Face time with physician
- Compassionate staff
- Great communication
- Safe, comfortable exam
### Front End – Back End

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### Front-End Experiences...
- Directions, Instructions and Parking
Scheduling
- More than 2 day backlog – lost patients!
- Open evening and weekend hours
- Accept walk-ins for noncontrast CT/XR
- Keep some room for add-on’s, emergent cases
- Online scheduling – need it now!

Backlogs – Overbooked Schedule
- Not a “good problem to have”
- Reputation suffers long term damage
- Represents a failure of management, not success
- Resulting staff stress can lead to downward spiral

Patient Comfort
- Relaxing atmosphere in lobby
- Music during exams
- Easy to follow signage
- Free Wi-Fi
- Photos on wall
- Magazines
- Lockers during exam
Reception

- Greeter during peak hours
- Give out pagers, or take cell phone #s
- Smile, eye-contact, be social
- Under-promise, over-deliver
- Say I'm sorry, thank you, use gift cards
- Offer oral contrast day before appt.

AIDET

A – Acknowledge your patient (smile, eye-contact, name)
I – Introduce yourself and your role
D – Duration of interaction, explain to patient
E – Explain purpose of visit
T – Thank patient, ask if they need anything else
Customer Contact

The Moment of Truth: Patients will decide in 7 seconds
From 11 impressions whether they
- Like You
- Dislike You
- Indifferent

Impressions

1 - Cleanliness
2 - Warmth
3 - Credibility
4 - Knowledgeable
5 - Responsive
6 - Friendly
7 - Helpful
8 - Understanding
9 - Courteous
10 - Confident
11 - Professional

Consequence of Dissatisfaction

- An average dissatisfied patient tells 25 others about the negative experience.
- For every patient who complains, 20 other dissatisfied patients don’t complain.
- Of those dissatisfied patients who don’t complain, 10 percent will return while 90 percent won’t.
- It costs 10 times more to attract new customers than it does to retain current ones.

Exam & Technologist

Radiologist

Radiologist Visibility

• Meet and greet
• Discuss results
• Radiologist as physician connection
• Give radiologists a face
Radiologists
Strengthen the patient-doctor relationship

- Introduce to patients directly
- Waiting room literature or posters
- “Our Radiologists” section on website
- Give results verbally or final report after exam
- Talk to patients on phone

Patients Want Results

- 92% want normal results given
- 87% want abnormal results given
- 96% of results are normal or non-malignant

Give Patients Results Option
Sample Patient Letter

Dear Patient:

Thank you for choosing Newport Harbor Radiology Associates. We are the radiologists who perform and interpret the procedure you had today. These are the physicians who prescribed the radiology procedures you had today. You can be assured that a board certified radiologist, one of our group's expert sub-specialists, supervised and interpreted your procedure today.

The results of your procedure are being forwarded to the physician who referred you for this procedure. If you have any questions, call the number on your patient will list or visit our website for further information.

Newport Harbor Radiology Associates is the largest provider of advanced, comprehensive imaging services, radiologic training, and research. We are dedicated to providing the highest quality and image guided treatments in all of California. To learn more, visit our website at http://www.newportradiology.com. To schedule your next appointment, call 949-375-1000. We look forward to providing imaging services for you again.

Sincerely,
Protocols

Patient Safety
- Radiation
- Contrast allergies
- Extravasation
- Bleeding
- Pregnancy
- Breast Feeding
- Renal Function
- MR contraindications

Radiation
Interpretation

Turn Around Time

Sick and Scared, and Waiting, Waiting, Waiting

“Freddie Odlum spent two terrible days waiting by the phone for her doctor to call. She had had a CT scan to investigate a suspicious mass in her lungs, and Ms. Odlum, a Los Angeles breast cancer patient, was all too aware that if the cancer had spread, her prognosis would not be good.

“But her doctor did not call [for several weeks]. ... The scan did not show cancer, but she could not forgive her doctor. ‘This internist had been my family doctor for years,’ Ms. Odlum said. ‘... I never spoke to him again.’"

Clinical Histories

The single most important and simplest way to add value to an imaging exam!

- Referring provider, during order entry
- Front desk, during registration or pre-auth
- Technologists, during the exam
- Radiologist, through EMR or phone call

Clinical History is Essential

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ABDOMINAL ULTRASOUND

DATE: <Date>.

HISTORY: <History>.

COMPARISON: <Comparison Date>.

TECHNIQUE: Real-time sonographic imaging of the abdominal organs and vascular structures, including color flow imaging, was performed by the sonographer. Multiple representative static images were saved for review.

FINDINGS:

- Liver: Normal in size and echotexture. No masses or fatty infiltration.
- Gallbladder: Normal. No stones, wall thickening or sonographic Murphy's sign.
- Biliary System: Common bile duct measures <value> mm. Normal for age. No stones, masses, or intra or extrahepatic ductal dilatation.
- Pancreas: Normal. No mass or ductal dilatation evident.
- Right Kidney: <value> cm longitudinally. Normal. No masses, stones or hydronephrosis.
- Left Kidney: <value> cm longitudinally. Normal. No masses, stones or hydronephrosis.
- Spleen: <value> cm longitudinally. Normal in size and echotexture.
- Aorta and IVC: Normal. No aneurysms.
- Free Fluid: None.
- Other: None.

IMPRESSION: Normal.

Report faxed to the ordering provider.

RADIA

Reporting

- Use voice-recognition dictation
- Use structured templates for speed and accuracy
- Reports in real time while patient waits
- Burn CD of exam/report before patient leaves
- Radiologist may discuss findings with patient
Communication

- Front desk – monitor calls and interactions
- Techs – patient and radiologist feedback
- Radiologists – ACR Radpeer or internal reviews
- Equipment – radiologist and techs
- Overall – patient and provider survey forms

Quality Assurance

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Quality Assurance
Patient Surveys

Swedish Radia Patient Survey

We are glad to be able to help you with your health concerns today. Your imaging exam is now being read by our radiologist and results will be communicated to your physician. Please give us feedback on our service and drop in the survey box by the front desk. Please let us know if we can improve in any way. Thank you!

Exam: _________________________
Date: _______________

(WORST)         Please Rate Us          (BEST)
Scheduling: ____________________ 1          2          3          4          5
Check In: ______________________ 1          2          3          4          5
Technologist: ___________________ 1          2          3          4          5
Wait Time: 1 2          3          4          5
Facility: 1 2          3          4          5
Overall Experience: 1 2          3          4          5
Comments: ___________________________________________________________
____________________________________________________________________

Future Goals

- Web scheduling and registration
- Both results and consultation online
- Same day service all exams
- Leave department with results
- Patients shop online for best price/service
In Conclusion

Remember who the customer is.
Ensure a strong future for your imaging department by practicing...

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