

# Radiology Extern Handbook

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## Overall Workflow and Responsibilities

When someone orders imaging in the hospital after hours, it needs to be protocolled by the Radiology resident on call before the technicians can perform the study. You will hold the on-call pager (3205) and screen new imaging requests for certain criteria before letting the resident know which studies need to be done. You will also respond to basic questions from hospital staff so that the resident can read the studies that have already been performed.

- Shifts are from 5 PM - 8 PM on weekdays and 10 AM - 4 PM on holidays that fall on weekdays. No weekends.
- Report to the Radiology reading room in the ED, room 1012-G. You may need to badge in for access.

### At the beginning of your shift:

- Use Smartweb to identify the senior resident on for your shift. If you can't find the resident in the reading room, send a page. The senior resident is responsible for finding the 3205 pager for you.
- Get the on-call pager from the senior Radiology resident
- Log in to Voalte: [voalte.healthcare.uiowa.edu](http://voalte.healthcare.uiowa.edu)
  - Username: short
  - Password: 11111
- Open Smart Web for paging: [smartweb.healthcare.uiowa.edu](http://smartweb.healthcare.uiowa.edu)
- Open Epic to look up patients
- The ED context can be helpful to find patients that only specify imaging for "ED Bed #" - otherwise, use the General Radiology context

### During your shift:

- Your main priorities during the shift are assisting your resident with the workflow of protocoling studies. As they are reading studies, imaging requests will come through a variety of channels: Pager, Voalte, Phone Calls.
- Your job is to take down the necessary information about each individual protocol while the resident is reading studies.
- If the resident is in between studies (the PACS screen is black), that is usually a good time to unload your list of protocols. This allows residents to read without too many interruptions.
- If a protocol is urgent (e.g., trauma, stroke, Cauda Equina, ruptured AAA, etc.) you should interrupt the resident to get this study protocolled. This includes urgent Store and Interprets.
- Answer phone calls as they come and direct to the appropriate channel. It is okay to interrupt the resident for a call.
- Other responsibilities:

- Answer any other pages promptly.
- Paging/calling providers for residents.
  - If it is an ED provider, you can page them but they typically utilize Voalte. So if you haven't heard back after a while, try to Voalte them.

**End of your shift:**

- Log out of Epic and Voalte. Most days, a radiology coordinator comes on at 8pm. Sign-off to them anything that they may need to follow-up on.
- Throw any papers with patient info into the confidential bin.

**Incoming Calls/Pages/Voaltes**

<b>Who is calling/What are they calling about?</b>	<b>Steps to Take</b>
Ultrasound Tech	Needs to talk to resident usually.
CT Tech	<p>If requesting protocol, get patient information and pass on to resident.</p> <p>If requesting resident to look at images on scanner/Epic, send resident to scanner or give patient MRN and transfer phone to them.</p> <p>If asking about extending field or scan, either repeat question to resident or transfer phone to them.</p>
MRI Tech	<p>If requesting protocol, get patient information and pass on to resident.</p> <p>If question about MRI protocol that's already been done, transfer phone call to resident.</p> <p>MRI calls and requests order for glucagon – get patient MRN and pass it on to resident. They will place order for it.</p> <p>Other example: MRI tech calls and says patient has been moving a lot, asks to have resident take a look at images to see if they are usable before giving contrast.</p>

	--> Get patient MRN & name, place tech on hold. Ask resident to look at images. Resident will tell you either yes, give contrast or no, don't give. Relay that information to MRI tech on hold.
Provider asking for a read on an in-house study	-Search by MRN in "Study History" -Find out if they need emergent read and/or what are they looking for? -Place on hold while you ask resident if they have time to look at study/if they want to speak to the provider. -If residents are busy, get doctors callback number.
Provider asking for a read on an EXTERNAL study	If it's a TRAUMA, assign to pool 120. Usually resident will want to look at study before they talk with trauma team but can always ask resident if they have time to talk now.  If non-urgent/non-trauma, assign to pool 120. Get callback number/name of provider and let them know the resident will call them back as soon as they are able to.
Provider asking for a FINAL read on a study	-Search by MRN in "Study History" -Locate study and find out the division (Chest/Body/Neuro/MSK/etc) -Open QGenda and locate staff pager on-call -Give pager# to provider requesting the final read, they will need to page for request.
Provider asking about what study to order	Ask them what they are looking for, place on hold and repeat question to resident.  Resident will either tell you what study to have them order or ask you to transfer call to them.
ATC or Call Center asking to find out if external images are stuck in the cloud	-Refer them to Image Management (62345), the radiology coordinators can do this but externs don't have access to Life Image.
Tech calls with a retained object film	Get following information: - Name & MRN - What are they looking for? - Which OR? - Contact number

	Alert residents of a retained object film and provide MRN
Requesting IR procedure	Give them IR on call fellow pager number and let them know it will have to be arranged with them.
Requesting Nuclear Medicine scans	Check Qgenda to find out who is covering. <ul style="list-style-type: none"> <li>- If listed as X-ray, then overnight rad residents are responsible for making this call</li> <li>- All other times, requesting physician is to page Nuc Mec Resident on Call</li> </ul>
Requesting Vascular Ultrasound	Not done by overnight Ultrasound Techs. If URGENT, the requesting physician can page vascular resident (3700), otherwise wait until morning.

**Outgoing Calls/Voaltes/Pages**

<b>What needs done?</b>	<b>Steps to Take</b>
Need to request images for patient that is being transferred from outside hospital	Call outside hospital and tell them you're looking for any recent imaging that the patient has had done. If it's a hospital on our list of LifeImage Sharing sites, ask if they would push the images. If not on our list, request they burn a CD and send the images with the patient.
Resident requests you call an ordering physician so they can discuss a protocol/results	Go to study history and find the listed ordering physician. Contact them by either phone, Voalte, or page.  If ED patient, it is better to get ahold of ED providers via Voalte rather than paging. If no response from provider after Voalte message, call main ED at 6-2233 and ask to speak to resident taking care of patient.  If floor patient, open their chart to see what unit they're on. Call inpatient unit and get contact info on the physician taking care of the patient.
General Page format	"Patient Name, MRN. Please call radiology 4-6419. – Your name *3205"

	OR "Please call radiology *extension #*"
Requesting change of order	"Patient Name, MRN. Please change order (example) CT abd w con to CT abd/pelv w/o con. –Your name, radiology 4-6419"

**Retained Object OR**

1. An automatic page will be sent to 3205. Page will include the order name and the MRN.
2. E.g., ABDOMEN IMAGE OR RETAINED OBJECT; MRN: 00002222
3. Page the faculty on-call and tell them that an order has been placed for [insert order]. Give the resident a heads up as well.

Order	Section to page
ABDOMEN IMAGE OR RETAINED OBJECT	Body
ABDOMEN IMAGE OR BMI SCREEN	Body
CHEST IMAGE OR RETAINED OBJECT	Chest
SKULL IMAGE OR RETAINED OBJECT	Neuro
SPINE IMAGE OR RETAINED OBJECT	Neuro / MSK
NECK IMAGE OR RETAINED OBJECT	Neuro
EXTREMITY IMAGE OR RETAINED OBJECT	MSK
IMG4636 PELVIS IMAGE OR RETAINED OBJECT	MSK

4. Once tech calls to say the image is in, let the resident know and page faculty on-call to call the line to the resident.
5. Let the resident know ASAP. They need to note on their report the time the tech called.

**VA Study Requests**

Please take the patient’s information and study request information just like you would for UIHC patients. Give this information to the resident and they will take care of the protocol if needed. They may have you call the VA CT tech and you do this by calling 158-0 and telling them you need to be connected to the CT tech.

Ultrasound and nuclear medicine are not available at the VA at night or on weekends. If one of these studies is needed, the patient will need to be transferred to UIHC and admitted to the ETC or an inpatient service. Once the patient is admitted at UIHC, the admitting service can call us and request a study.

## **Resources**

### **Radiology Film Management:**

The Radiology front desk (63350) is staffed from 7:00 – 21:00 on weekdays and from 7:00 – 17:30 on weekends. This person can help referring clinicians load outside CDs (though most clinicians already know how to do this). They can also move studies to our PACS. If you get a request for a read on an outside study that comes in during the time that a film room person is here, confirm that the ordering clinician has uploaded the study. Then call the file room employee to request an accession number.

### **ACR Appropriateness Criteria:**

Website detailing what studies are indicated for a variety of studies. Google ACR appropriateness criteria to find. This can further your discussion with providers. (e.g., why did you order this study as compared to this study. Don't be critical- this is just a discussion to order the appropriate imaging. A lot of times there is a specific reason they ordered the study they wanted.

### **Operator:**

Dial 0 on the phone. This is very helpful for calling floors to get into contact with providers you can't contact with pages, Voalte, or phone

### **Important Numbers:**

CT- 46536; pager 3345

MRI - 62236

Ultrasound- 62040; pager 6383

IR - pager 5390

There is also a book of important phone numbers on the extern desk.