

National Radiology Data Registry

GRID Sample Facility Report, Jan-Jun 2023

Public Facility
(Sample Facility ID: 100853)



nrdr.acr.org

NRDR
CTC[™]
CT COLONOGRAPHY
REGISTRY
AMERICAN COLLEGE OF RADIOLOGY

NRDR
DIR[®]
DOSE INDEX
REGISTRY
AMERICAN COLLEGE OF RADIOLOGY

NRDR
LCSR[™]
LUNG CANCER SCREENING
REGISTRY
AMERICAN COLLEGE OF RADIOLOGY

NRDR
NMD[®]
NATIONAL MAMMOGRAPHY
DATABASE
AMERICAN COLLEGE OF RADIOLOGY

This page is intentionally blank.

General Radiology Improvement Database Sample Facility Report

About This Report

The GRID Quarterly Sample Facility Report provides valuable comparative statistics, such as patient wait time and turnaround time, that can help you identify opportunities for improvement by comparing your facility's performance to peers and national benchmarks. Reports are posted quarterly, although some sites may submit their data biannually.

Summary and Detail pages are available in this report for GRID Process Measures, Outcomes Measures, and Incidents Rates for your facility to compare to each of your peer groups. Process measures are reported monthly both per facility, such as patient wait time and time from order to the exam, and per facility and per physician, such as exam reacquisition rate and report turn-around times. Outcome measures are reported per facility per month and include measures such as the rate of non-diagnostic liver biopsies and the rate of non-diagnostic lung biopsies. Annual measures are reported per facility per year and describe facility performance related to, for example, rates of wrong exams performed and the number of falls that occur in the radiology department.

Peer groups are based on your facility's characteristics. Registry columns include statistics for all GRID sites in the registry. Table cells are left blank for categories for which a facility did not provide data. Summary pages can be used along with the Details pages to measure your facility's performance and rank for this time period. Detail pages will not show data for pages which a facility did not provide data, but instead will show the Variation Over Time graph. This will help your facility focus on the measures that include data for this time period.

Facility values are based on averages and are compared to median (middle) values across GRID sites in various categories. Categories in the report are dependent on your facility's characteristics so that the appropriate peer groups can be used for site comparison to the GRID registry (All GRID Sites). The Details pages show your facility's rank compared to your peer groups in various categories. Max Rank in each group is the highest ranking possible (worst performance) for all sites within the GRID registry. Max Rank may be lower than the number of sites submitting (N) due to 'ties' in performance by sites being assigned the same ranking. For percent measures, sorting is done in descending order so as to put 100% at the top of the ranking rather than the bottom.

It is important that your GRID data is current for the most complete report to be produced for your facility. GRID data can be submitted monthly or by the GRID Form Submission. You can check your GRID Form Submission Status Report online, which shows the status and submission date of forms used to submit data to the GRID registry. These reports can help users identify missing or incomplete data submissions. To view a form submission report, select it from the list of Reports after clicking on the GRID menu link in the NRDR platform.

Some GRID exam-level measures are also available in ACR Qualified Clinical Data Registry (QCDR) used for CMS Merit-based Incentive Payment System (MIPS) program reporting by MIPS-eligible physicians.

GRID turn-around time measures and GRID 2.0 measures: These measures are described in the Exam-Level Measures report.

Simplified GRID 2.0 measures: In this simplified approach, each GRID 2.0 measure includes a list of denominator codes and numerator performance codes which are populated into an Excel or text template and uploaded to the MIPS Participation Portal using the Upload Data tab. GRID registration is not required for users opting to submit using the simplified reporting method.

General Radiology Improvement Database Sample Facility Report

Useful Links

For more information on our GRID Data Submission process please follow the link to the article here:

<https://nrdrsupport.acr.org/a/solutions/articles/11000031501>

For more information on our various GRID measures click here: <https://nrdrsupport.acr.org/a/solutions/articles/11000041536>

A video about GRID measures can be viewed here:

https://go.acr.org/NTk4LVRSQS0yNDQAAAGEIYRztBWe8pe_Mpl6UaHW-C3_Ei62-5fglUAyq5coGjo4-5Vup5bygfqGgcNyxP0Ndn0NpE=

The General Radiology Improvement Database Measures document provides a detailed description of the measures used in this report and can be viewed here: <https://nrdrsupport.acr.org/helpdesk/attachments/11082316664>

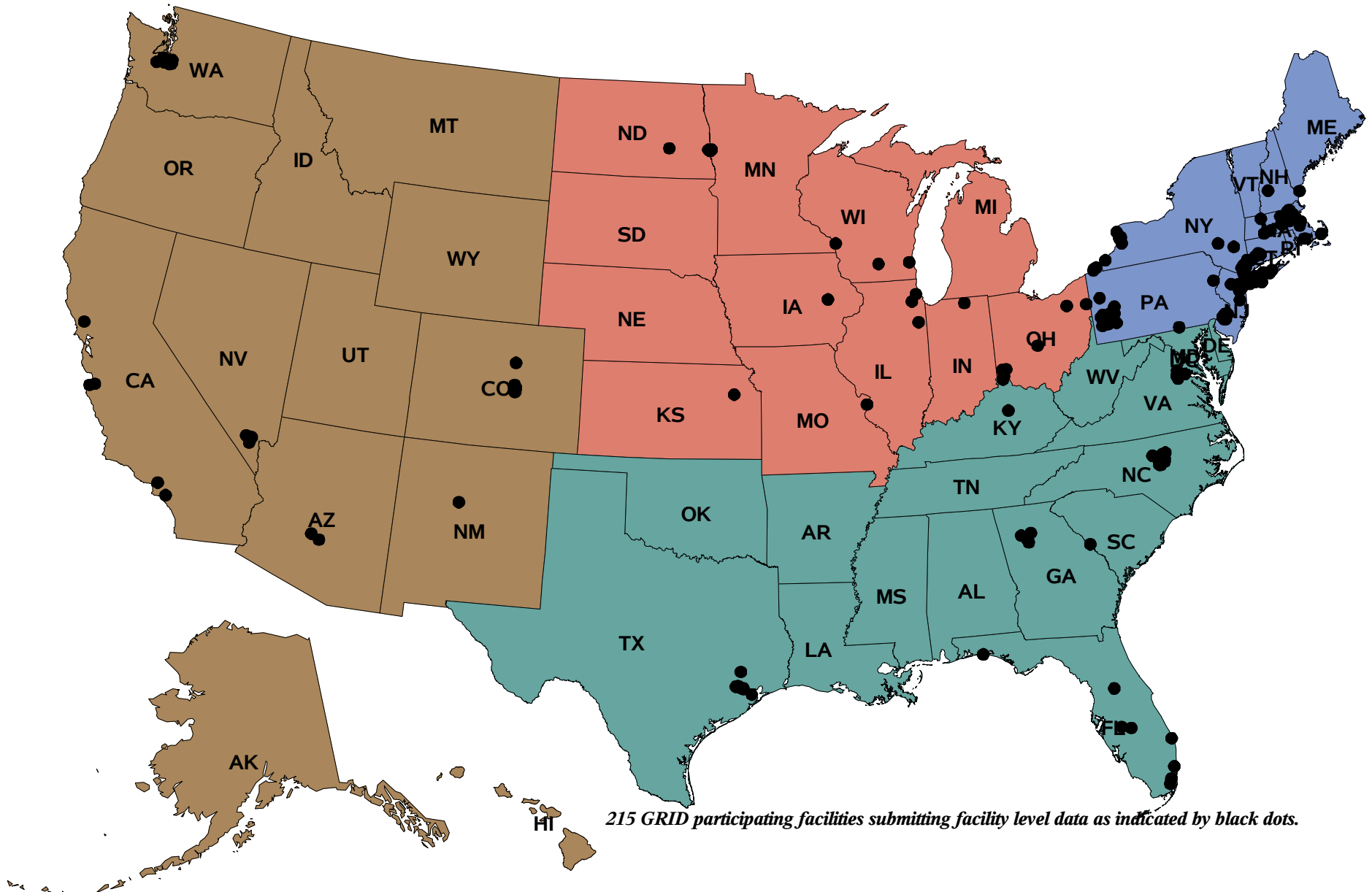
GRID Measure Definitions

MEASURE	DEFINITION
Wait time	Outpatient wait time in minutes for radiography. Wait time is defined as the time from when the patient signs in at the patient receiving area to the time patient imaging starts (the machine start time).
Stat and routine CT wait time	Time from order to exam for inpatient stat CT exams.
Digital radiography repeat rate	Percent of digital radiography images that had to be repeated and resulted in additional exposure to the patient (not including computed radiography).
TAT	Turn around time in hours. Time from when exam was completed until final report was signed.
Non-diagnostic biopsy	Percent of biopsies performed by radiologists that were non-diagnostic. Includes core biopsies and FNA.
Lung biopsies resulting in pneumothorax requiring chest tube	Percent of lung biopsies performed by radiologists resulting in pneumothorax requiring a chest tube.
Non-concordant findings - stereotactic breast biopsy	Percent of stereotactic breast biopsies performed which were non-concordant with imaging characteristics, indicating that the lesion was not adequately biopsied. Includes all incidences, regardless of whether further patient care confirmed imaging findings.
Magnet incidents	Number of magnet incidents per 100,000 exams during the previous calendar year. Includes only incidents attributable to or aggravated by the presence of a magnetic field.
Cases of NSF	Number of NSF cases per 100,000 MRI exams with contrast, or with and without contrast, during the previous calendar year.
Attended falls in radiology department	Number of attended falls per 100,000 exams that occurred in the radiology department during the previous calendar year. Includes only falls that were attended by a facility staff member.
Unattended falls in radiology department	Number of unattended falls per 100,000 exams that occurred in the radiology department during the previous calendar year. Includes all falls that occurred while a facility staff member was not present.

GRID Measure Definitions

MEASURE	DEFINITION
Deaths in the radiology department	Number of deaths per 100,000 exams that occurred in the radiology department during the previous calendar year.
Code blues in radiology department	Number of code blues per 100,000 exams that occurred in the radiology department during the previous calendar year.
Nosocomial infections in radiology department	Number of nosocomial infections per 100,000 exams that occurred in the radiology department during the previous calendar year.
Wrong exams	<p>Number of cases per 100,000 exams during the previous calendar year in which the exam conducted was not the exam requested by the referring physician. Excludes the following cases:</p> <p>The exam was changed by the radiologist based on clinical indications.</p> <p>The referring physician did not require a repeat exam that resulted in additional exposure to the patient.</p> <p>The exam was performed on the wrong patient or the wrong site.</p>
Exams on wrong patients	Number of cases per 100,000 exams during the previous calendar year in which an exam was conducted on the wrong patient.
Exams on wrong sites	Number of cases per 100,000 exams during the previous calendar year in which an exam was conducted on the wrong body part.

*Map of GRID Active Facilities
Jan-Jun 2023*



Census Region ■ Northeast ■ Midwest ■ South ■ West

GRID Process Measures Summary

Jan-Jun 2023

	FACILITY	REGISTRY						
MEASURE	Site 100853	Volume ≥ 150,000 Sites	Region Midwest Sites	Location Suburban Sites	Category Community Hospital Sites	Non-Children's Hospital Sites	Year 2023 Sites	Year 2022 Sites
Mean radiography wait time (minutes)	20.0	14.0	8.8	14.8	13.6	12.5	12.1	11.7
Median radiography wait time (minutes)	12.0	10.2	6.0	9.3	9.3	8.3	8.2	7.8
Mean ultrasound wait time (minutes)	25.0	13.0	9.5	12.3	12.8	11.5	11.3	11.1
Median ultrasound wait time (minutes)	18.0	9.3	4.8	7.8	7.8	7.4	7.3	6.3
Mean MRI wait time (minutes)	44.0	35.0	37.3	26.0	27.6	25.3	27.8	26.5
Median MRI wait time (minutes)	35.0	27.2	29.0	19.8	20.2	19.8	21.0	20.3
Mean CT wait time (minutes)	32.0	25.2	20.5	21.1	21.6	21.9	21.8	20.5
Median CT wait time (minutes)	25.0	18.3	11.6	12.1	13.8	14.5	14.0	13.2
Mean PET wait time (minutes)	29.0	21.3	34.7	13.2	25.9	26.9	25.0	20.3
Median PET wait time (minutes)	23.0	18.2	31.7	8.0	18.2	19.2	18.2	13.2
Mean wait time for inpatient stat CT (minutes)	106.0	137.0	100.7	74.2	77.9	92.0	90.7	87.7
Median wait time for inpatient stat CT (minutes)	63.0	81.3	35.5	47.0	48.7	53.3	51.8	50.3
Mean wait time for inpatient routine CT (minutes)	328.0	437.5	372.2	292.7	260.4	288.8	279.7	284.6
Median wait time for inpatient routine CT (minutes)	181.0	241.3	131.6	132.9	122.7	131.2	131.2	135.8
Digital radiography repeat rate (Percent)	.	5.5	4.6	4.1	4.6	4.4	4.5	4.7
Mean TAT - Radiography (Hours)	.	3.7	2.4	6.7	4.3	5.1	4.8	4.0
Mean TAT - Ultrasound (Hours)	.	6.0	3.1	8.5	8.2	7.1	6.3	5.5
Mean TAT - MRI (Hours)	.	10.8	10.2	15.3	14.3	15.8	14.8	12.6
Mean TAT - CT (Hours)	.	4.3	4.0	6.0	5.0	6.0	5.8	5.5
Mean TAT - PET (Hours)	.	8.7	6.0	3.0	10.0	8.0	8.1	5.0

Facility values presented here are based on averages over Jan-Jun 2023.

Facility values are compared to median values across GRID sites in various categories.

GRID Process Measures Summary

Jan-Jun 2023

	FACILITY	REGISTRY						
MEASURE	Site 100853	Volume ≥ 150,000 Sites	Region Midwest Sites	Location Suburban Sites	Category Community Hospital Sites	Non-Children's Hospital Sites	Year 2023 Sites	Year 2022 Sites
Percent Exams Signed < 12 Hours - Radiography (Percent)	.	91.8	95.1	83.3	90.1	88.6	89.1	90.0
Percent Exams Signed < 12 Hours - Ultrasound (Percent)	.	87.7	93.1	74.9	85.2	82.8	84.2	87.5
Percent Exams Signed < 12 Hours - MRI (Percent)	.	69.1	78.1	54.3	68.1	57.5	59.3	64.7
Percent Exams Signed < 12 Hours - CT (Percent)	.	90.0	95.0	86.7	93.0	86.7	87.2	88.6
Percent Exams Signed < 12 Hours - PET (Percent)	.	76.4	88.4	90.8	85.7	84.5	82.4	76.1

Facility values presented here are based on averages over Jan-Jun 2023.

Facility values are compared to median values across GRID sites in various categories.

GRID Outcome Measures Summary ***Jan-Jun 2023***

	FACILITY	REGISTRY						
MEASURE	Site 100853	Volume ≥ 150,000 Sites	Region Midwest Sites	Location Suburban Sites	Category Community Hospital Sites	Non-Children's Hospital Sites	Year 2023 Sites	Year 2022 Sites
Non-diagnostic liver biopsy (Percent)	.	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Non-diagnostic lung biopsy (Percent)	.	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Lung biopsies resulting in pneumothorax requiring chest tube (Percent)	.	3.8	0.0	0.0	0.0	0.0	0.0	2.6
Non-concordant findings - stereotactic breast biopsy (Percent)	.	0.0	1.0	0.0	0.0	0.0	0.0	0.0

Facility values presented here are based on averages over Jan-Jun 2023.

Facility values are compared to median values across GRID sites in various categories.

Data on non-concordant findings for stereotactic breast biopsy may not be comparable across sites because the measure is not interpreted the same way by all sites.

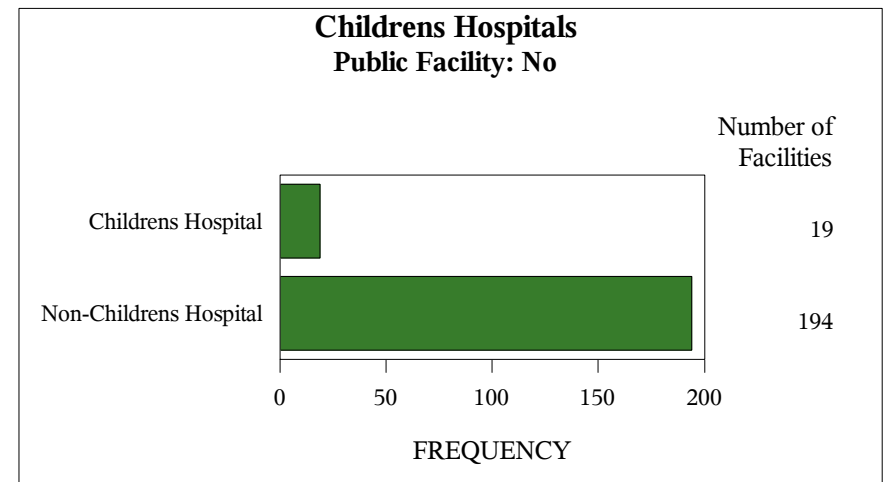
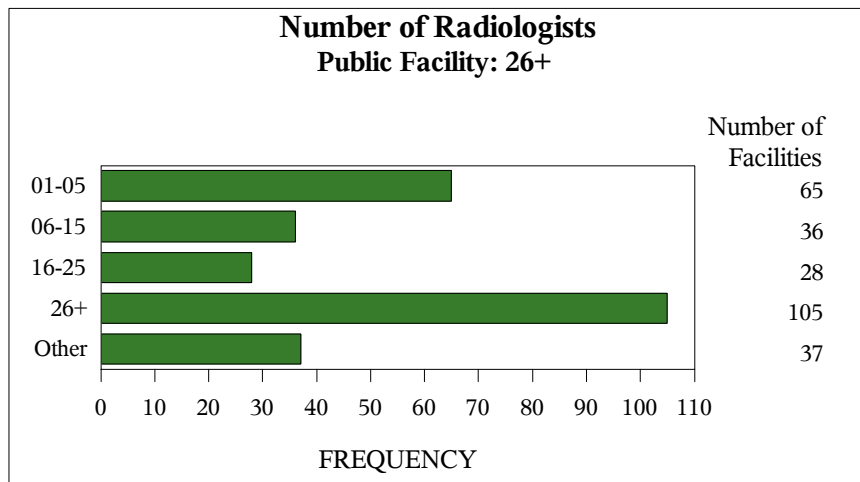
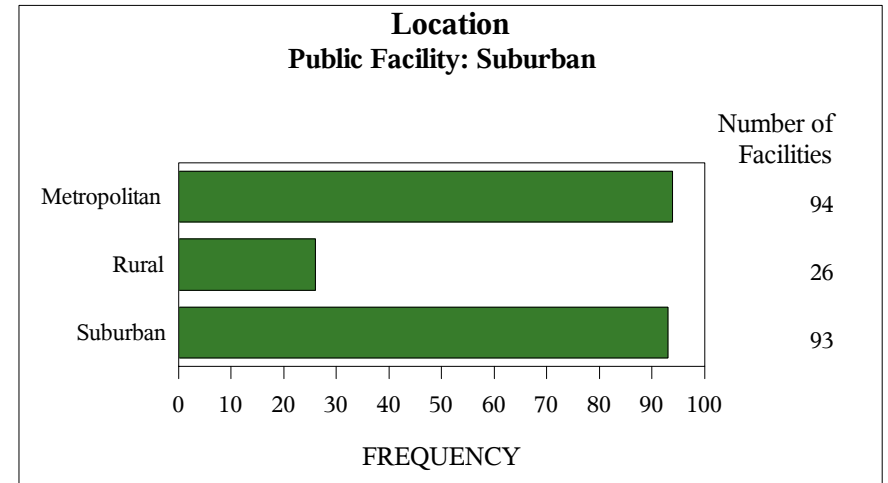
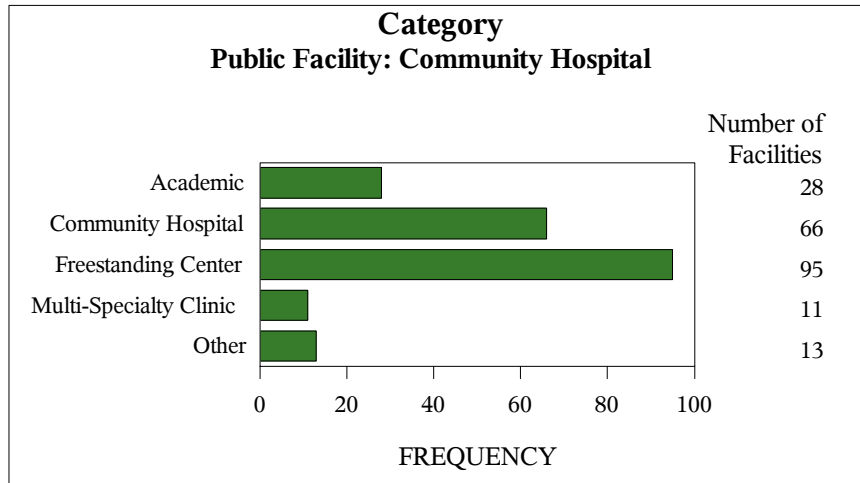
GRID Incident Rates Summary

Jan-Jun 2023

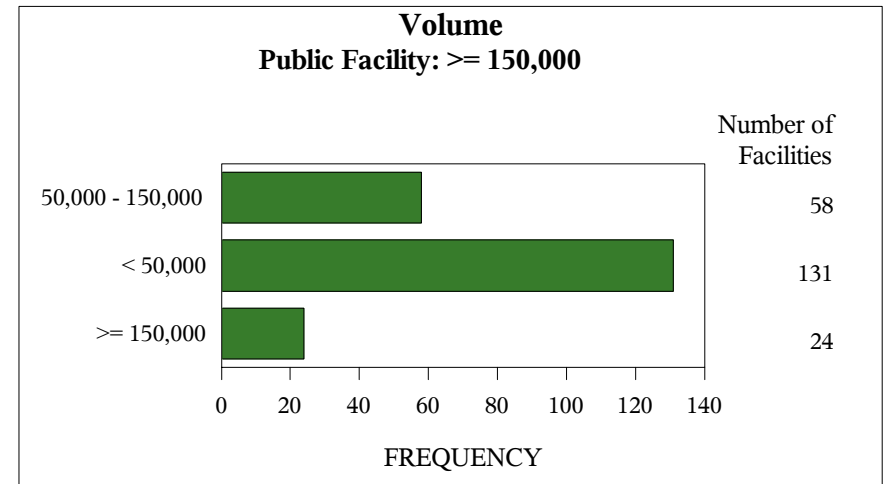
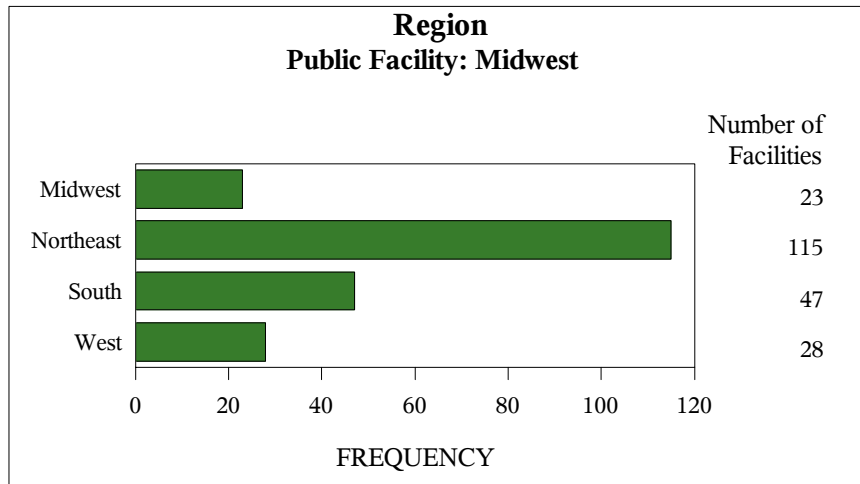
	FACILITY	REGISTRY					
MEASURE	Site 100853	Volume ≥ 150,000 Sites	Region Midwest Sites	Location Suburban Sites	Category Community Hospital Sites	Non-Children's Hospital Sites	Year 2023 Sites
Magnet incidents per 100,000 exams	0.0	3.1	0.0	0.0	0.0	0.0	0.0
Cases of NSF per 100,000 exams	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Attended falls in radiology department per 100,000 exams	1.0	1.8	0.0	0.0	0.0	0.0	0.0
Unattended falls in radiology department per 100,000 exams	0.0	0.8	0.0	0.0	0.0	0.0	0.0
Deaths in the radiology department per 100,000 exams	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Code blues in radiology department per 100,000 exams	.	1.0	0.0	0.0	0.0	0.0	0.0
Nosocomial infections in radiology department per 100,000 exams	.	0.0	0.0	0.0	0.0	0.0	0.0
Wrong exams per 100,000 exams	.	1.9	0.0	0.0	0.0	0.0	0.0
Exams on wrong patients per 100,000 exams	.	0.9	0.0	0.0	0.0	0.0	0.0
Exams on wrong sites per 100,000 exams	.	0.3	0.0	0.0	0.0	0.0	0.0

*Values shown as "per 100,000 exams" apply to the previous year.
Facility values are compared to median values across GRID sites in various categories.*

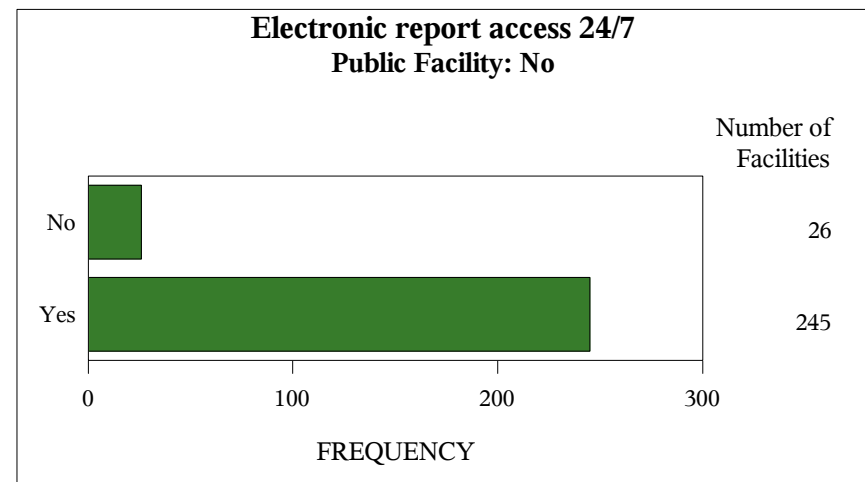
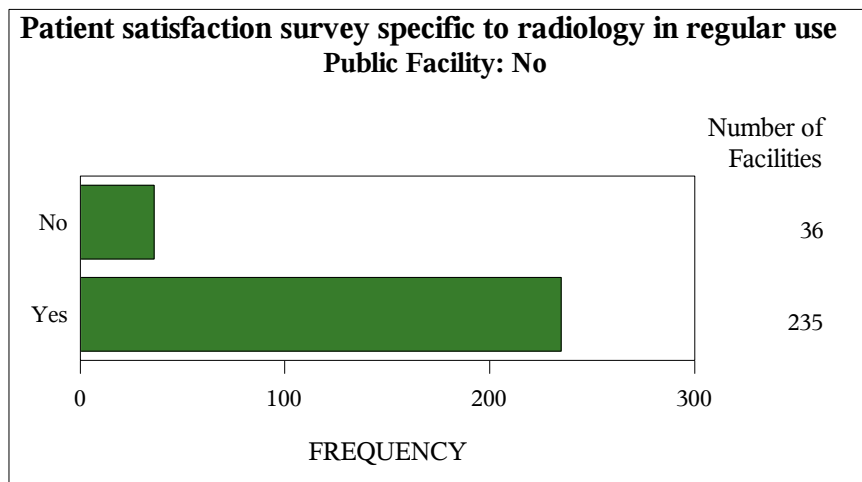
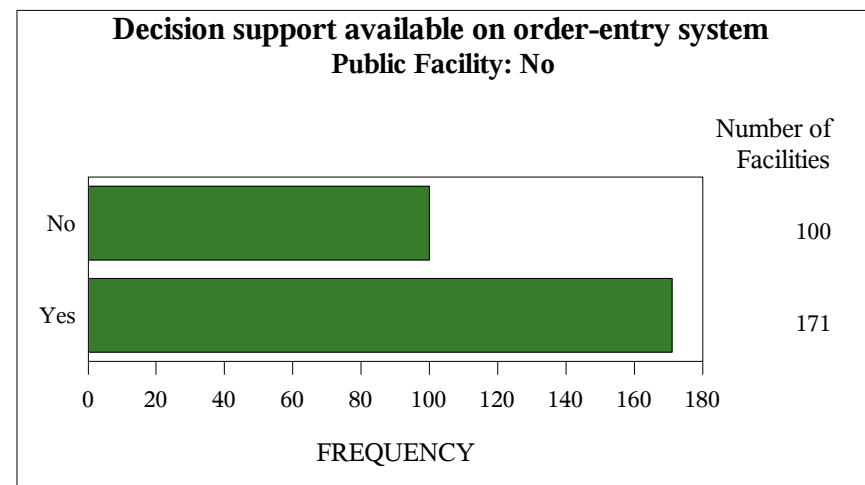
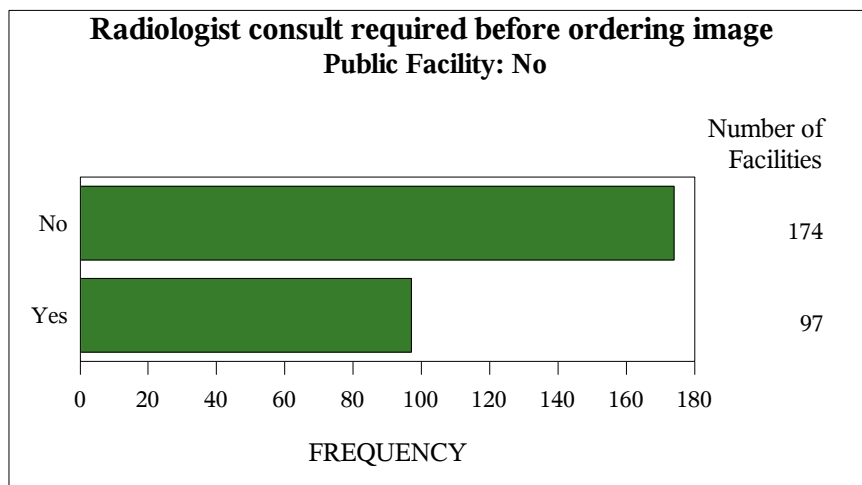
GRID Facility Characteristics



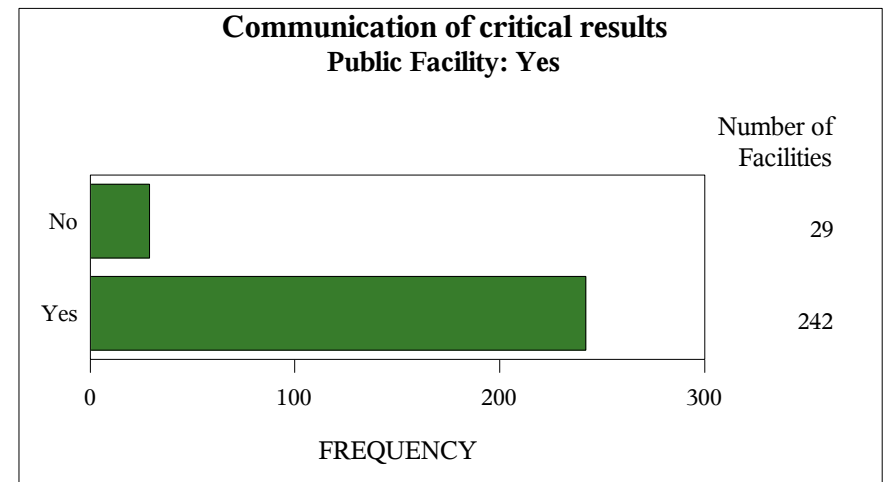
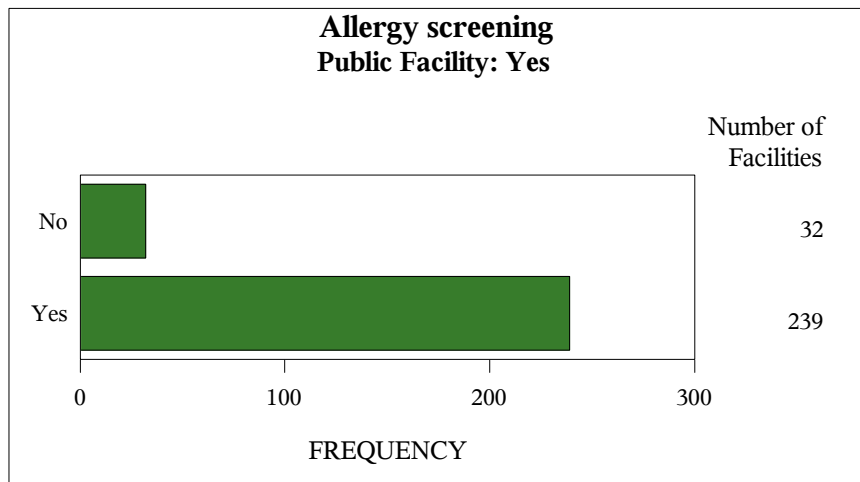
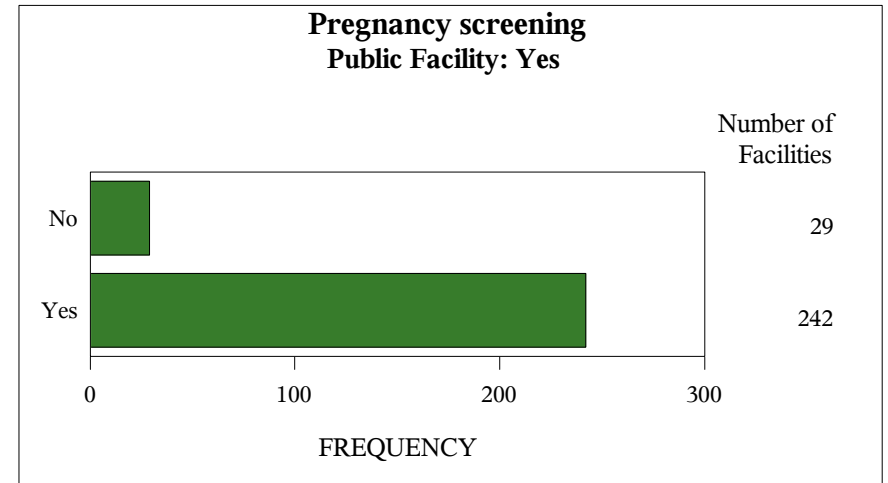
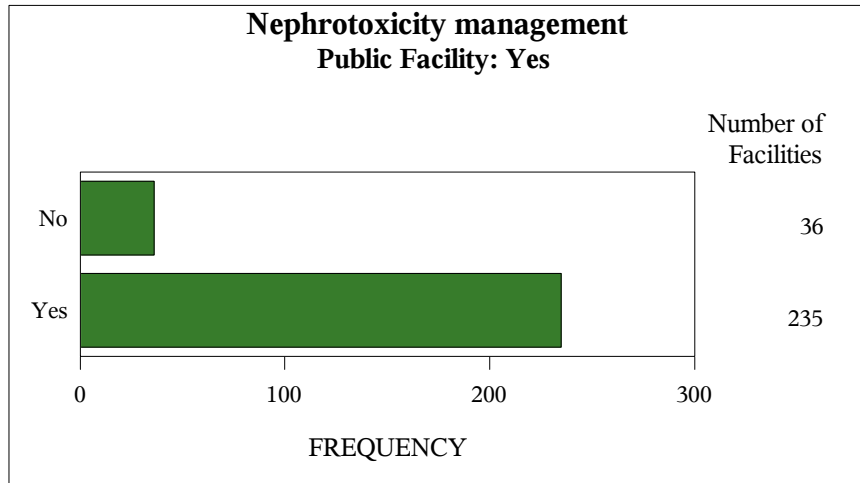
GRID Facility Characteristics (Continued)



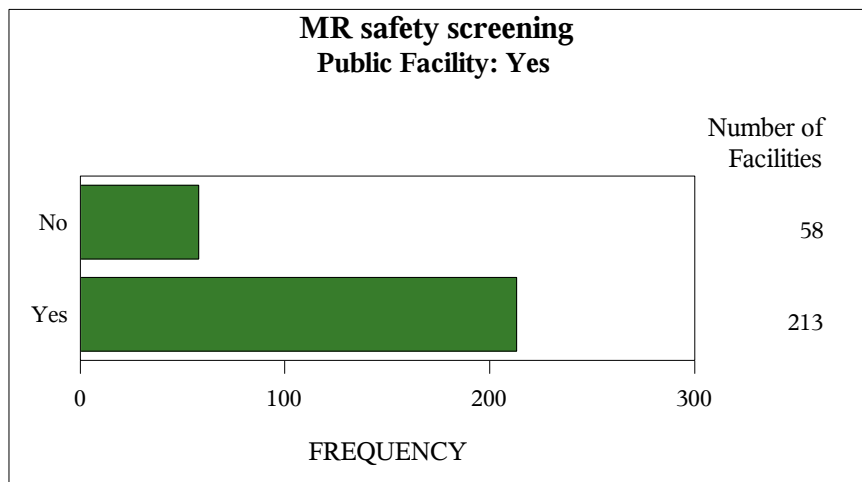
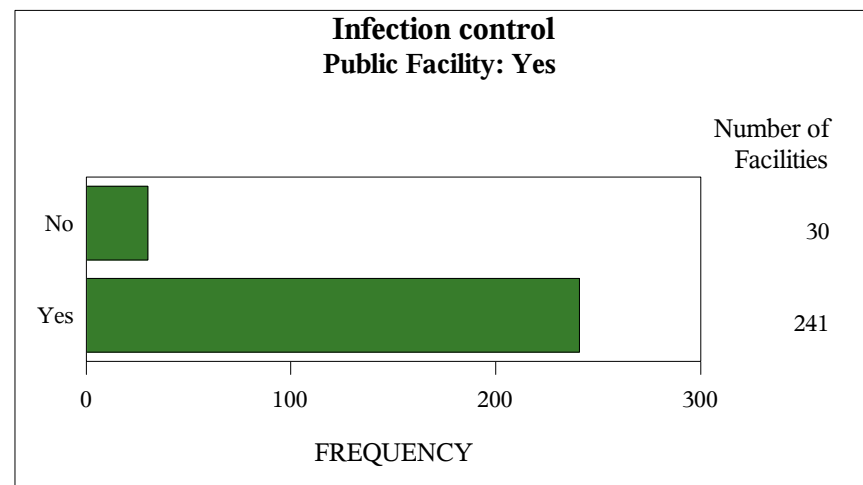
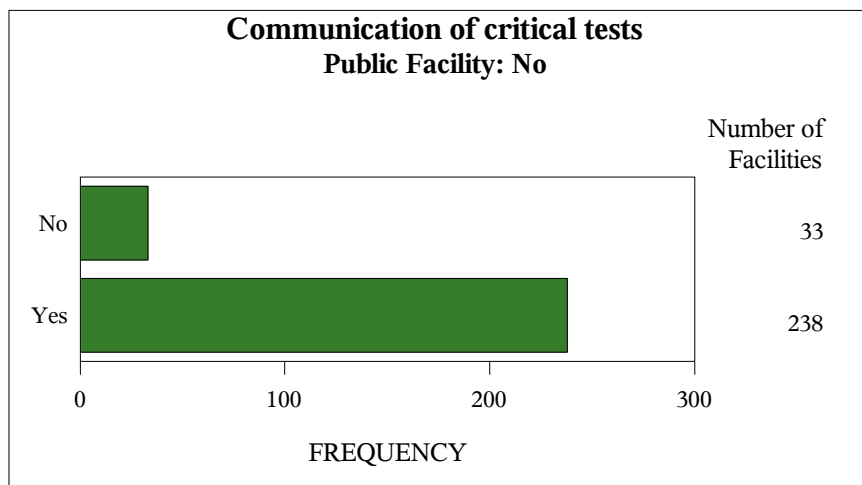
GRID Structural Measures



GRID Protocols



GRID Protocols (Continued)



Promote your participation in NRDR™!
Download your marketing toolkit today.

acr.org/GRIDtoolkit

CONTACT US

1.800.227.5463, ext. 3535

nrdre@acr.org | nrdre.acr.org

