

# **Dose Index Registry (DIR®) Training Webinar Series**

Monitoring Performance with the DIR CT Administrative Aggregate Report February 6, 2024

#### **Presenters and Panelists**





Maryam Bostani, PhD, DABR Diagnostic Medical Physicist, Associate Clinical Professor, University of California, Los Angeles



**Moiz Ahmad, PhD**Associate Professor of Imaging Physics, MD Anderson Cancer Center

#### **Presenters and Panelists**





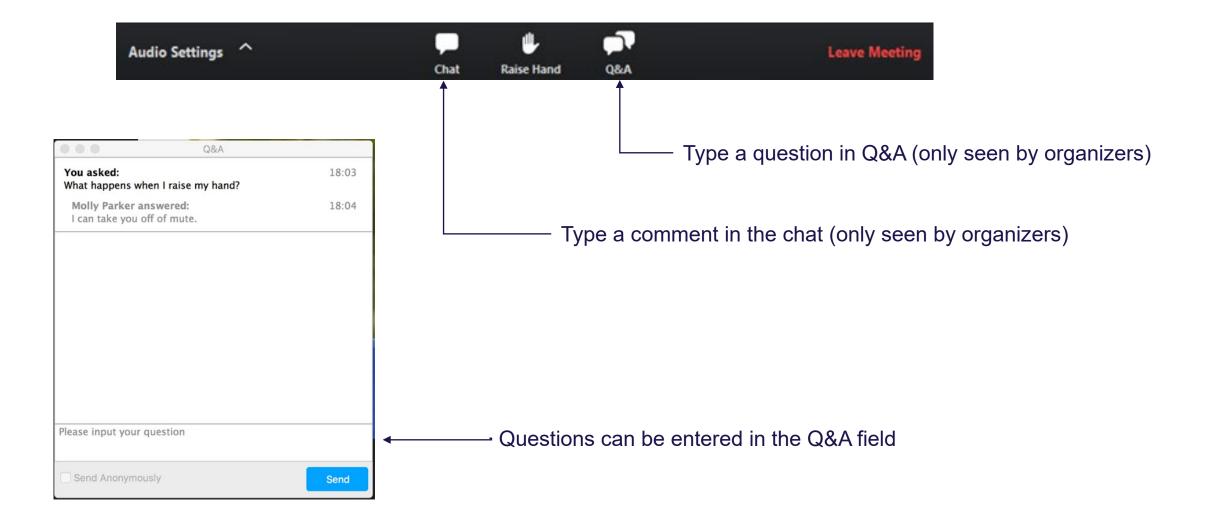
**Tom Fruscello, MBA**NRDR Tableau Report Developer, ACR



Sarah McKenney, PhD, DABR Division Chief, Radiology Physics, Associate Professor, Division of Medical Physics, Department of Radiology, UC Davis Medical Center

#### **Attendee Zoom Interface**







#### **Dose Index Registry (DIR®) Training Webinar Series**



#### This webinar is the second and final in this series:

- Jan. 31 | Dose Optimization Using the DIR CT Facility Comparison Report
- Feb. 6 | Monitoring Performance with the DIR CT Administrative Aggregate Report

#### The webinars will be recorded and distributed afterwards.

 Recordings will be posted on <a href="https://nrdrsupport.acr.org/support/solutions/articles/11000114744-dir-training-webinar-series">https://nrdrsupport.acr.org/support/solutions/articles/11000114744-dir-training-webinar-series</a>

#### **Webinar Agenda**



- 1. CT Administrative Aggregate Report Overview
  - a. Access and Navigation
  - b. New Report Structure as of December 2023
  - c. Functionality
    - a. Aggregate Comparisons, Trend Data, Short Name Lookups, Registry Statistics
- 2. CT Administrative Aggregate Report Use Cases
  - a. CT QC Program Protocol Review and Dose Optimization
  - b. Implementation of a New Protocol from Start to Finish
- 3. Recent DIR Improvements
  - a. New Modality-Specific Registry Administrator Profiles
  - b. New RPID/Text Search in Exam Name Mapping Tool
  - c. Exam Name Mapping to Trauma Cases
- 4. Q&A
- 5. Wrap-up



### **CT Administrative Aggregate Report - Overview**





# DIR CT Administrative A

te Report

December 2023

Presenter: Tom Fruscello, MBA









#### **Knowledge Base Articles**



#### https://nrdrsupport.acr.org



NRDR Support Home > Knowledge Base > NRDR - Release Notes and Announcements

#### DIR CT Report Changes 2023

Modified on: Wed, 13 Dec, 2023 at 11:32 AM

#### Introduction

This article provides an overview of DIR CT report updates and new functionality that a December 2023 to make it more intuitive for you to review your facility's performance opportunities for dose optimization. The changes also reduce the redundancy of informupdates will occur in three phases as described below.

#### Phase 1: A New CT Administrative Aggregate Report Consolidates the Consoli

- Timeline: December 20, 2023.
- User access: All NRDR user profiles have access to the report
- · Major changes:
- The CT Administrative Aggregate Report replaces the Corporate Excel Report ar provides new features, including:
  - Functionality to compare a single facility to a selected peer group and multipl
    registry
  - More flexible filter for selecting report timeframe
  - Filters to select the top 10 exams performed and comparison statistics.



Expanded filter options available in the CT Administrative Aggregate Report

o Report access: The CT Aggregate Report link is available in two locations in the NR



NRDR Support Home > Knowledge Base > NRDR - Understanding Your Reports > DIR Reports

#### DIR CT Administrative Aggregate R

Modified on: Mon, 8 Jan, 2024 at 2:42 PM

#### Report Purpose

The CT Administrative Aggregate Report enables users to analyze performance and drive improveme report provides insights about:

- How a facility's performance compares with the entire registry and with various peer groups, e
  location type, and census division
- Establishing site-specific radiation dose targets
- · Opportunities for performance improvement
- · Performance results after implementing changes.

The report is specially formatted for viewing and downloading aggregated dose performance data for report sharing.

Note: The DIR CT Administrative Aggregate Report released in December 2023 combines and replaces the CT Corporate Excel Report and CT Facility Excel Report plus adds new filters and functionality. View the video to learn what's new.

For information about other DIR CT report updates see the DIR CT Report Changes article.



# NRDR NATIONAL RADIOLOGY DAT REGISTRY AMERICAN COLLEGE OF RADIOLOGY

NRDR Support Home > Knowledge Base > NRDR - Understanding Your Reports > DIR Reports

#### DIR Available Reports

Modified on: Thu, 18 Jan, 2024 at 1:00 PM

The following types of reports are available for the DIR:

- DIR CT Published Aggregate Reports
- DIR CT Operational Reports
- DIR CT Interactive Reports
- DIR Fluoroscopy Interactive Reports
- DIR Digital Radiography Interactive Reports
- To learn about navigating DIR report filters, parameters and other features, view the Knowledge Base article or video demos.
- Click the link in the Report column to access a Knowledge Base article with more report details and examples.

#### **DIR CT Published Aggregate Reports**

Report	What does the Report Show?	Frequency	Users
DIR Executive Summary Report and QCDR Preview	Aggregated statistics for adult and pediatric exams for facility compared to the entire registry, for selected high-volume exams.  A sample Facility report is available here.  A sample Corporate report is available here.	Quarterly	All

#### How to Access

Log into the NRDR Portal and access the CT Administrative Aggregate Report in one of two ways:

#### **CT Administrative Aggregate Report**



# Combined from two previously existing reports

- Corporate Excel Report
- Facility Excel report

#### Intended Users

Administrative staff (Managers and Lead CT QC Technologists)

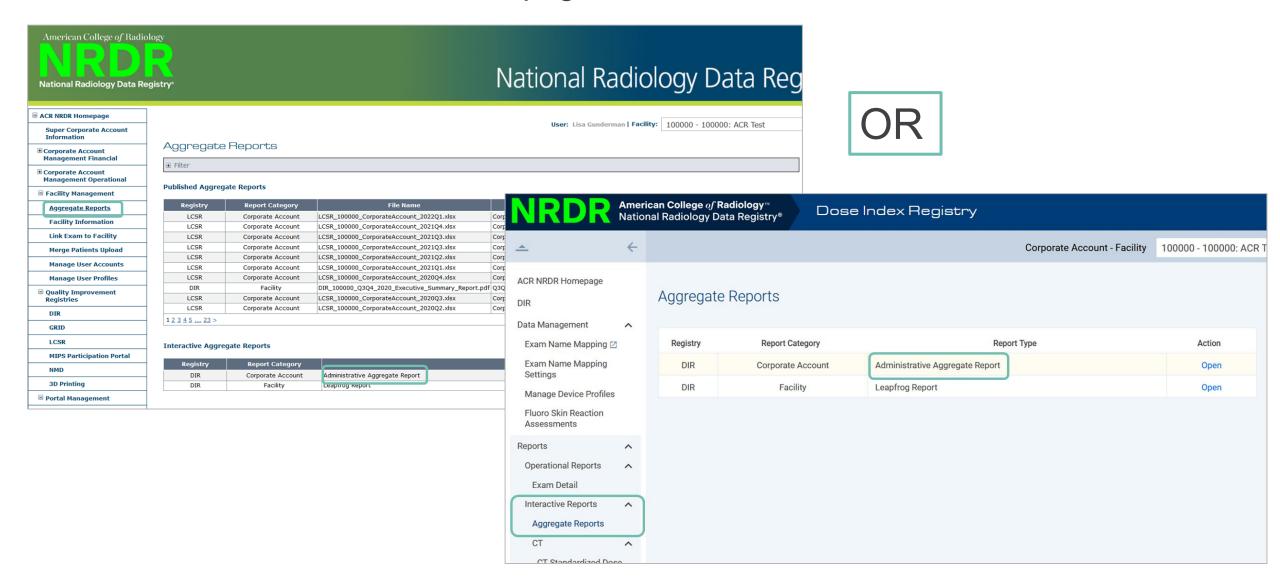
### Minimal download capabilities

Individual exams CANNOT be downloaded

#### **Navigating to the CT Administrative Aggregate Report**



Accessible via the NRDR webpage and DIR menu





As part of the CT QC program, the CT committee periodically reviews protocols and identifies dose reduction opportunities.

Opportunities are evaluated and changes are approved and implemented.

After implementation, dose is tracked over time to illustrate and present dose reduction efforts back to the committee.



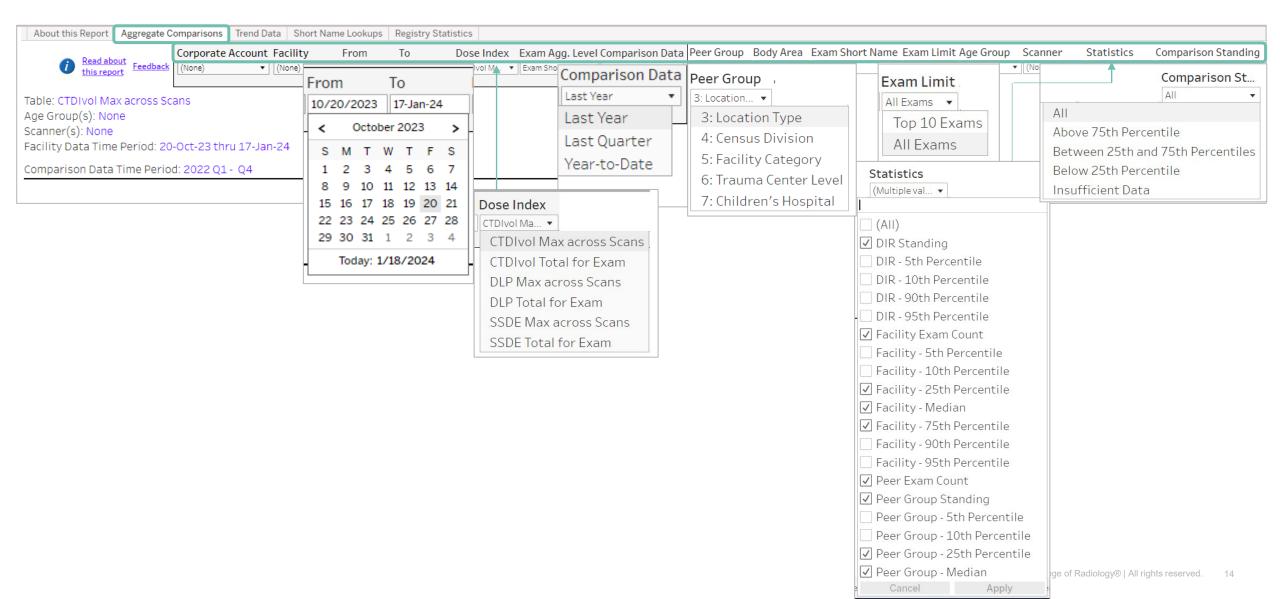
#### Part 1

One aspect of protocol review is to compare your routine CT protocols' median CTDI<sub>vol</sub> values to DIR and ACR CTAP Reference Values.



Examination	Reference Value CTDI <sub>vol</sub> (mGy)	Pass/Fail Criteria CTDI <sub>vol</sub> (mGy)
Adult Head	75	80
Adult Abdomen	25	30
Pediatric Head (1-year-old)	35	40
Pediatric Abdomen (40-50 lb.) - 16 cm phantom	15	20
Pediatric Abdomen (40-50 lb.) - 32 cm phantom	7.5	10











# **Part 1 Summary**

- Aggregate Comparison dashboard can be used to review the performance of a particular protocol and age group based on a userselected dose index.
  - Performance can be compared with the entire DIR or a selected peer group.
- Both protocols have a comparison standing of 50, i.e., median dose index is between both the DIR and peer group's 25th and 75th percentile values.
- Median dose indices for both protocols are below the ACR CTAP Reference Values of 25 and 75mGy for routine abdomen/pelvis and head, respectively.



#### Part 2

The committee frequently reviews exams above the 75th percentile as part of the CT QC Program.

Based on this review, the committee decides if dose reduction opportunities are feasible.



7,88	regate Comparisons Trend Data Short	-	egistry Statist		F		D-+- D-	ou Cuour T	Dody Augs C	vam Chart N	ame Evers	Limit No. C	MOUID C	ones Ct-	tistics	Comparison St
Read about this report	Corporate Account Facility				Exam Agg. Le			Location •				E ▼ Adult (				Above 75th Percen
ble: CTDIvol Max acr	ross Scans	111														
e Group(s): Adult (C anner(s): All	over 18)															
	iod: 01-Mar-21 thru 21-Jan-24															
omparison Data Time	e Period: 2022 Q1 - Q4															
									Pe	er Group = Lo	ocation type	e Metropolit	tan (> 100,0	00)		
Body Area	Exam Short Name	Age Group	DIR Exam Count	DIR - 25th Percentile		DIR - 75th Percentile	DIR Standing	Facility Exam Count	Facility - 25th Percentile	Facility - Median	Facility - 75th Percentile	Peer Exam Count	Peer Group Standing	Peer Group - 25th Percentile	Peer Group - Median	Peer Group - 75th Percentile
BDOMEN	CT ABDOMEN BIOPSY GUIDANCE W	Adult (Over 18)	650	8.	6 12.8	15.4	75	1,042	12.6	19.4	25.2	650	75	8.6	12.8	15.4
ABDOMEN PELVIS	CT ABDOMEN PELVIS ENTERO W IVC.	. Adult (Over 18)	14,206	8	2 10.1	12.9	75	465	10.6	13.8	18.2	8,800	50	8.2	10.9	14.1
CERVICAL SPINE	CT C SPINE WO IVCON	Adult (Over 18)	820,617	15.	8 20.2	28.6	75	9,658	43.9	49.4	54.5	421,399	75	15.1	19.4	27.4
HEST	CT CHEST	Adult (Over 18)	268,282	2.	2 3.3	8.9	75	5,285	10.4	13.5	17.3	123,723	75	2.2	3.1	9.7
	CT CHEST HEART ANGIO WO THEN	Adult (Over 18)	71,618	11.	3 24.3	40.8	75	1,386	36.5	62.9	79.2	35,809	75	15.5	27.2	43.2
	CT CHEST LUNG BIOPSY GUIDANCE	Adult (Over 18)	7,909	8.	9 12.8	18.7	75	920	6.8	21.0	25.1	5,982	75	8.8	12.5	16.1
	CT CHEST W IVCON	Adult (Over 18)	741,751	7.	3 9.4	12.0	75	18,899	10.5	13.5	17.3	414,103	75	7.3	9.6	11.8
	CT CHEST WO IVCON	Adult (Over 18)	1,624,217	5.4	4 7.9	10.6	75	18,762	11.2	14.3	18.2	807,447	75	5.5	8.0	10.7
ACE	CT FACE WO IVCON	Adult (Over 18)	123,601	14.	3 25.2	37.4	75	2,436	40.3	50.2	57.7	62,880	75	15.1	25.9	38.6
IECK	CT NECK W IVCON	Adult (Over 18)	257 477	10.	1 12.9	16.5	75	3,679	16.0	17.5	100	144,652	75	10.4	13.5	16.9



# **Part 2 Summary**

The Aggregate Comparison dashboard can be used to identify opportunities for performance improvement using the Exam Limit filter and Comparison Standing filter (above 95<sup>th</sup> percentile will be added).

Chest Wo and Chest W were identified as high-volume protocols that can be presented to the committee as dose optimization opportunities.



#### Part 3

High-dose exams and dose reduction opportunities were identified.

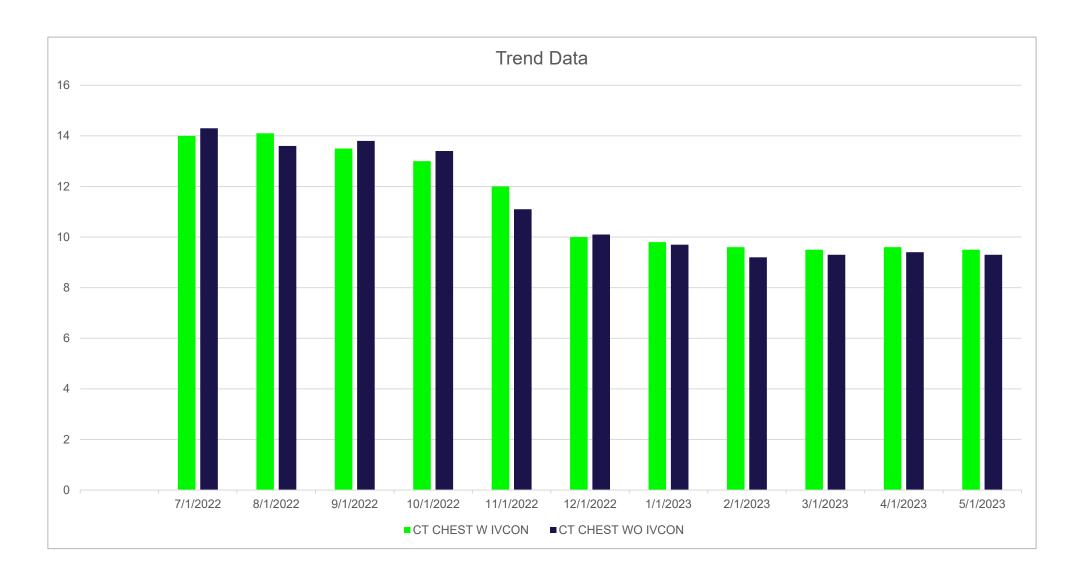
The committee approved protocol changes and a new protocol was implemented.

The committee is now asked to present data on its dose optimization efforts.















# **Part 3 Summary**

The Trend Data dashboard can be used to monitor performance over time after implementing changes.

Data can be downloaded for users to create their own trend charts.

Changes to Chest Wo and Chest W protocols resulted in the facility's DIR Standing going down to 50 from 75.



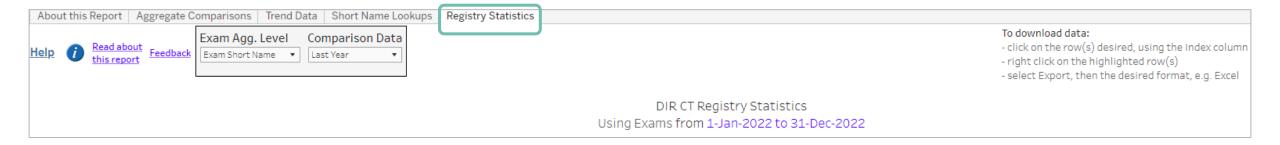
#### Part 1

Your institution has a new Liver Transplant program.

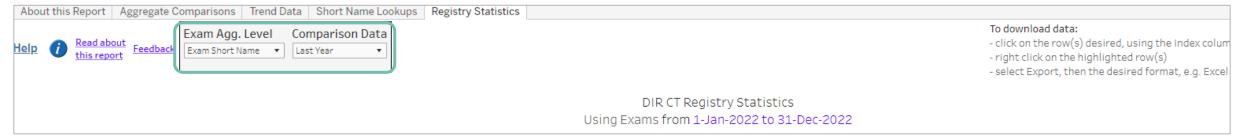
The leading physician has asked Radiology to create a CT multiphase liver protocol.

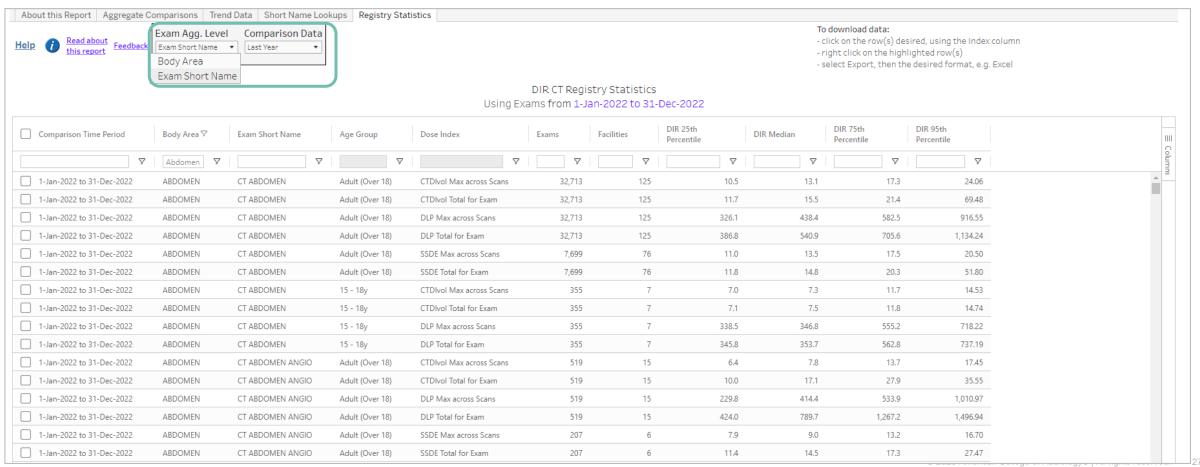
The CT QC Committee wants to know if ACR DIR has any dose index data on this protocol to help implement it at their facility.



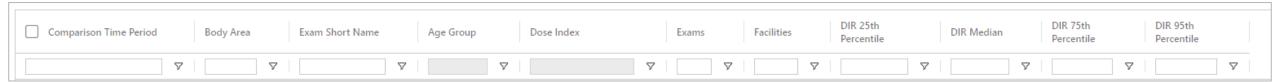


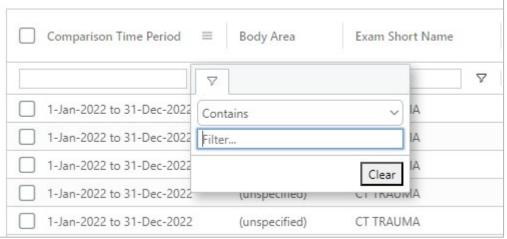


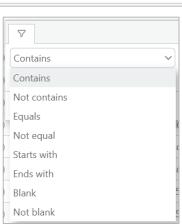


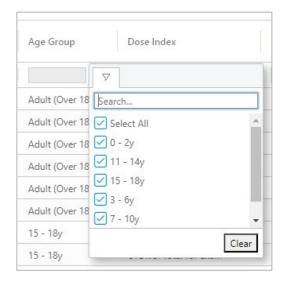


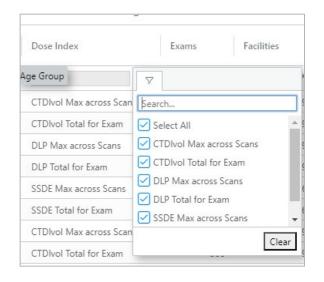




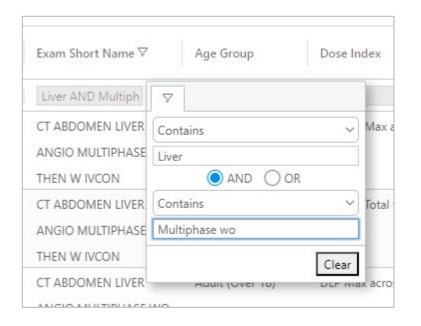


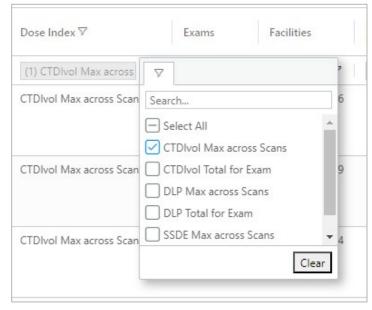


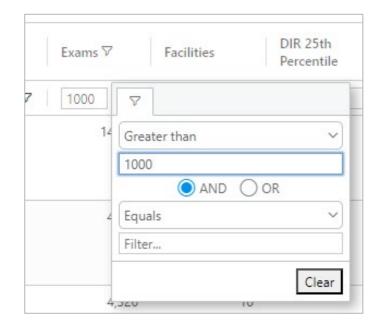




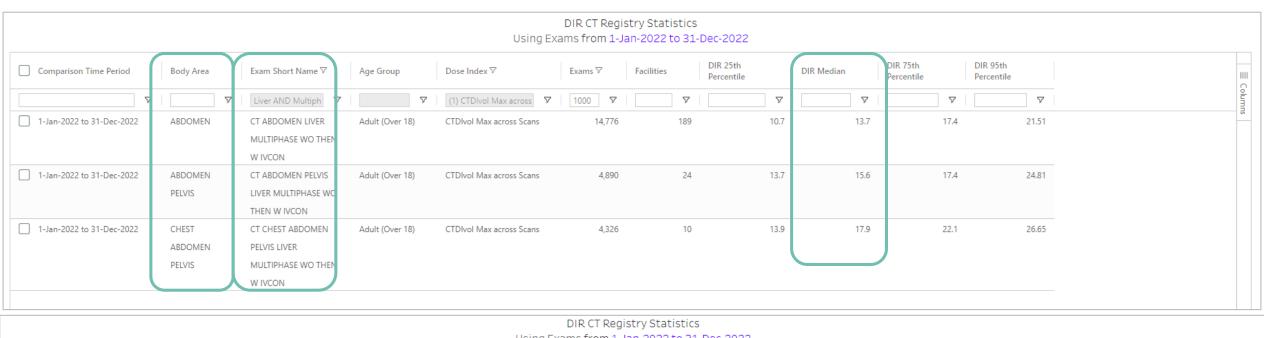












#### Using Exams from 1-Jan-2022 to 31-Dec-2022 DIR 25th DIR 75th DIR 95th Comparison Time Period DIR Median Body Area Age Group Facilities Percentile Percentile Percentile Liver AND Multiph 1000 $\nabla$ $\nabla$ $\nabla$ $\nabla$ $\nabla$ (1) DLP Total for Exam 1-Jan-2022 to 31-Dec-2022 ABDOMEN CT ABDOMEN LIVER Adult (Over 18) DLP Total for Exam 14,776 189 956.1 1.448.4 1,882,1 2,655.06 MULTIPHASE WO THEN W IVCON 1-Jan-2022 to 31-Dec-2022 4,890 1,334.6 ABDOMEN CT ABDOMEN PELVIS Adult (Over 18) DLP Total for Exam 24 1,812.8 2,448.8 3,070.72 **PELVIS** LIVER MULTIPHASE WO THEN W IVCON 1-Jan-2022 to 31-Dec-2022 CHEST CT CHEST ABDOMEN Adult (Over 18) DLP Total for Exam 4,326 10 1,626.8 2,102.2 2,445.7 3,325.25 ABDOMEN PELVIS LIVER PELVIS MULTIPHASE WO THEN W IVCON



# **Part 1 Summary**

The Registry Statistics dashboard provides facilities with dose index target values for new CT protocols.

These target values can be used as a starting point to craft new protocols and modify them as needed.



#### Part 2

Based on clinical requirements and ACR DIR data, the CT QC Committee created and implemented a multiphase liver CT protocol.

A few months after implementation, the committee wants to ensure mapping of this new protocol to the appropriate RPID.

Facility 1

RPID401

RPID406

**RPID1091** 

POSTOP WO & W IVCON

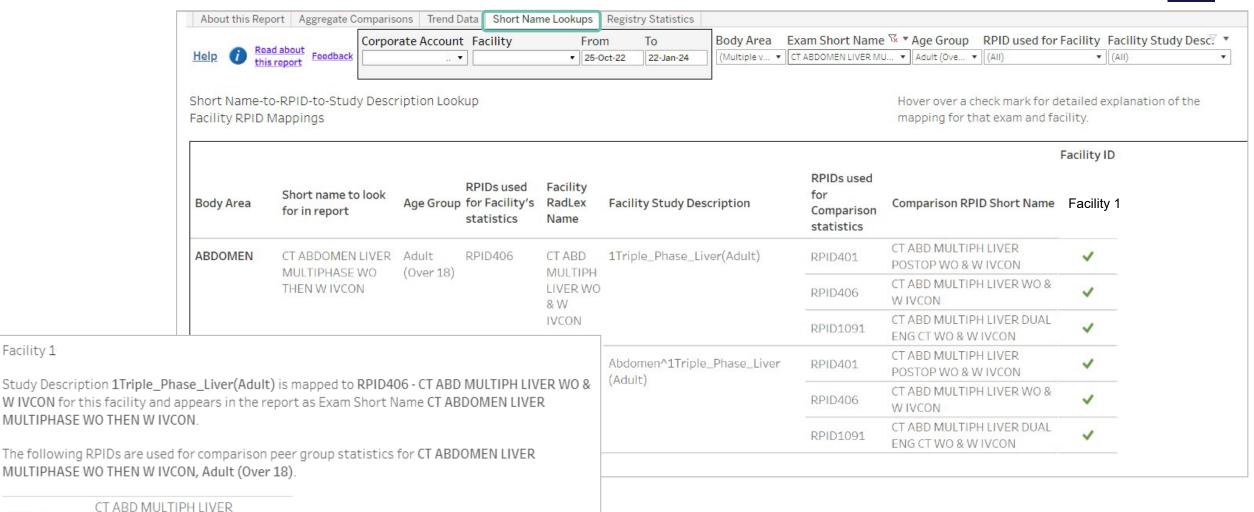
ENG CT WO & W IVCON

WIVCON

CT ABD MULTIPH LIVER WO &

CT ABD MULTIPH LIVER DUAL







# **Part 2 Summary**

Mapping can be verified using the Short Name Lookups dashboard.

For a selected Facility Study Description, the RPID used to map to the study can be verified.

For multi-facility accounts, it can be verified if mapping is consistent across facilities.



#### Part 3

A year after the implementation of the multiphase liver protocol, the CT QC Committee wants to review dose indices and compare their facility's performance with the DIR.







# **Part 3 Summary**

The Aggregate Comparison dashboard can be used to evaluate performance.

As compared to DIR and the selected peer group, the facility's standing for the newly implemented multiphase liver is at 50, i.e., median dose index is between both the DIR and Peer Group's 25th and 75th percentiles values.



# **New Modality-Specific Registry Administrator Profiles**

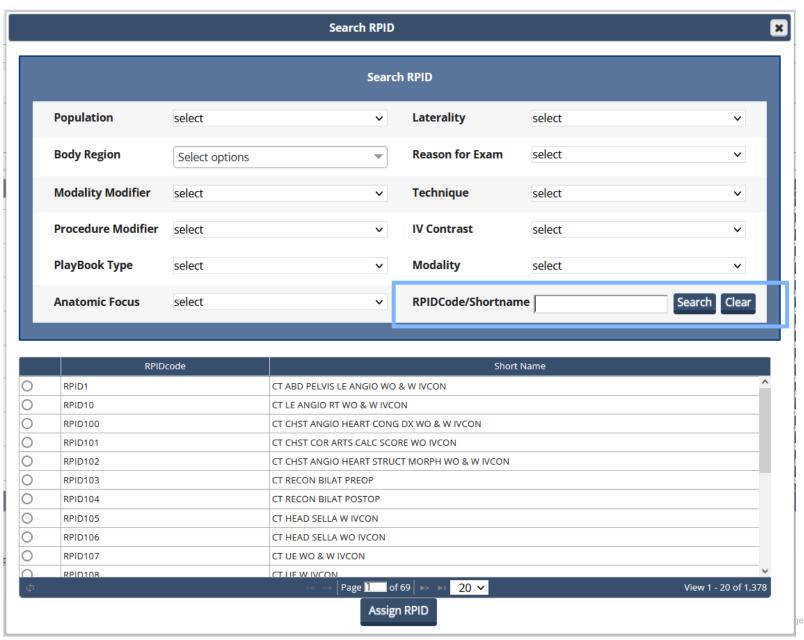


TIN/NPI Summary Report	Add New User	View History	
☐ Facility Management			
Aggregate Reports	User Account	New User	]
Facility Information	Status	Active	
Link Exam to Facility	User Type 🖓	Registry Administrator	Step 1: select "Registry Administrator" for User
Merge Patients Upload	First Name		Type
Manage User Accounts	Last Name		,
Manage User Profiles	Facility ID	100853 ▼	
Quality Improvement Registries	E-mail		
СТС	Office phone		
DIR		■ NRDR	
GRID		3D Printing	
LCSR		Assess-AI	
MIPS Participation Portal		□ cdsr □ ctc	
NMD	Registries	□ DIR ◆	Step 2: select "DIR"
3D Printing		GRID	for Registries
■ Portal Management		□LCSR	
Account Balance Report		□ LI-RADS	
Aggregate Reports Upload		MIPS	
Aggregate Reports Backend		NMD	
Upload History  Application Completed		✓ CT	Step 3: select
Worklist	DIR Modality	☐ Fluoro ☐ DR	desired DIR
Broadcast Message		□ NM	Modalities
Comments			
Data Upload Applications	Add	Cancel	



### **New RPID/Text Search in Exam Name Mapping Tool**





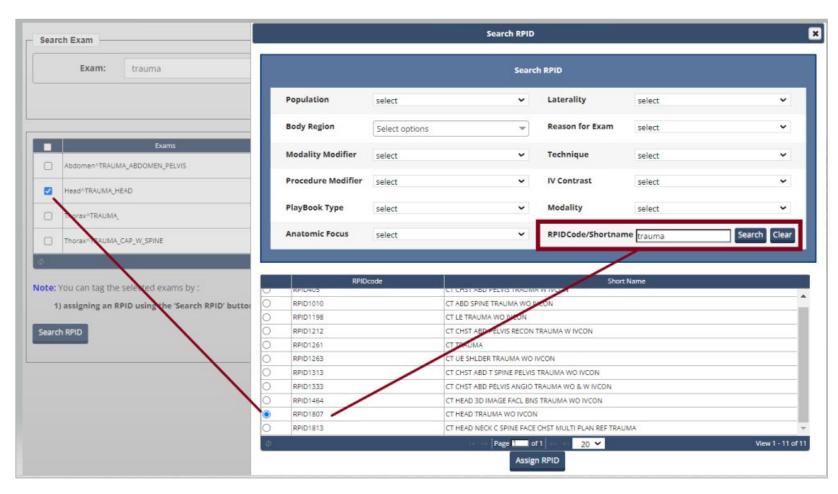


#### **Exam Name Mapping to Trauma Cases**



The highest-level trauma IDs are below. The complete list of trauma IDs is available in the NRDR Knowledge Base Mapping Guide.

- Radlex Playbook ID: RPID1261 – Short Name: CT Trauma
- ACR Common ID: 4012963 Name: RAD, trauma series, unspecified





#### Q&A





#### **Webinar Recordings and Slides**



View recordings and slides for the Jan 31 and Feb 6 webinars here:



https://nrdrsupport.acr.org/support/solutions/articles/ 11000114744-dir-training-webinar-series



The Jan 31 webinar is available on demand now. Today's webinar will be available later this week.

### **NRDR Help Desk**





> Email: NRDRSupport@acr.org

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