

Radiologists—3 Vital Areas Oncologists Want You to Improve



We asked 50 oncologists how they perceive the service from radiology and how they would rate different changes. Better communication stands out as key in taking cancer care to the next level.

As the number and complexity of cancer cases increase, radiology spends more and more time providing service to oncologists. It is therefore vital that oncologists, an increasingly important group of referring physicians, receive support from radiology. Increasing efficiency in reading cancer cases, delivering timely and actionable reports, and professional participation at multi-disciplinary team meetings are all factors that are crucial to improving cancer care. But what is most important according to oncologists?

Overall perception of radiology services

Oncologists are in general satisfied with the service they receive from radiology.

Respondents were asked to rate on a scale of 1–10 the overall service received from radiology. Categorizing the responses in three categories in line with the Net Promoter Score® methodology (Detractors, Neutral and Promoters) shows that there is a 30% excess of promoters in the group of respondents.

The free text responses provided to clarify why they are satisfied can be summarized into the following categories:

- Fast response, short lead times, radiology perceived as efficient
- Good communication
- High service level
- · High competence in radiology

Among those not so satisfied, two reasons stand out; vague reports and recommendations, and long response times. Clearly, response time is an important issue, and depending on the radiology service used—either a source for satisfaction or complaint.

How to improve the service to oncologists?

When asked which changes would most improve the value of the service provided by radiology, the oncologists in the survey rated the following improvements the highest:

- Rich reports that include images with measurements, annotations, etc.
- Delivering a summary report for complex cases with multiple imaging exams
- Imaged-based lesion tracking to show serial growth/treatment response

30% of the respondents stated that simply providing direct contact details to the reporting radiologists to enable easy discussions of findings would have a big impact on improving communication with radiology.

How to improve communication between radiology and oncologists?

Overall, oncologists don't experience problems communicating with radiology that often, but when they do, they seem to have fewer problems with in-house radiology services than with external resources. Almost 40% of the respondents state they never experience problems with in-

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house radiology services compared with 24% when the respondents deal with external radiology services. However, more than 30% do experience communication problems as often as weekly or even daily—both with in-house as well as with external radiology services.

Respondents were asked which improvements they felt would have the biggest positive impact on communication. It's interesting to note that nearly 30% of the respondents stated that simply providing direct contact details to the reporting radiologists to enable easy discussions of findings would have a big impact on improving communication with radiology.

Slightly more than half of the respondents stated "non-attendance of key staff members" as a challenge to the meeting.

What do oncologists feel are the biggest challenges during multi-disciplinary team meetings?

Apart from the radiology report, the participation at multi-disciplinary team meetings is a key component of the service radiology provides to oncologists and the rest of the care team. In the survey, respondents were asked what they felt were the three main challenges with these meetings. Slightly more than half of the respondents stated "non-attendance of key staff members" as a challenge to the meeting. One in three stated "incomplete data set to facilitate discussion" was a main challenge. One in four felt that one of the top three challenges is that they have too many cases to discuss.

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