

Revised MRI Guidelines Reduce Neuroradiologist Call Burden



The use of magnetic resonance imaging (MRI) has increased significantly in the paediatric population in recent years. This growth is attributed to faster imaging protocols and the desire to minimise unnecessary radiation exposure from CT scans.

However, patients may encounter barriers, predominantly the unavailability of staff and scanners, particularly during off-hours. This can result in varying standards of care within the same healthcare institution.

To decrease the call burden on paediatric neuroradiologists, Children's Hospital of Philadelphia (CHOP) developed guidelines to dictate triage for patients needing MR imaging during limited-resource hours.

The intervention seems to be effective, as the number of requests to the on-call neuroradiologist has significantly decreased, with minimal additional workload for the triage radiologist.

The triage process did not result in a significant change in the number of overnight neuro MR exams performed, suggesting that it successfully maintained the existing service expectations and did not increase the burden of exams read by the on-call neuroradiologist.

Lead author Julian Lopez-Rippe, MD, mentioned "The local development of appropriate use guidelines for neuroradiology MR exams overnight represents responsible management of imaging resources, as it reduces low-yield and untimely imaging requests".

CHOP carried out interviews, surveys, and group discussions to establish a consensus on the appropriate use of overnight MRI for neurological concerns.

The neuroradiologists concurred with the triage decision in 89% of cases. They feel that triage conducted by generalists did not lead to a change in the number of neuro MR exams performed.

Guidelines helped reduce neuroradiologist calls by 74% while adding minimal burden to the generalist radiologists. Generalist triage can sustain clinical service levels whilst lessening staff call burden.

Source: [Journal of the American College of Radiology](#)

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