

RSNA16: Back to Basics for Radiology, Says RSNA President



Value-based healthcare, a team-based approach and continued innovation in radiology are driving the focus on looking beyond imaging to push radiology forward, said Richard L. Baron, president of the Radiological Society of North America (RSNA), speaking at the annual scientific meeting in Chicago this week. It is not a change of culture that is required, but more a back to basics approach, he added.

On innovation, Baron acknowledged the unprecedented burst of new technologies in radiology. However, this trend is plateauing, and other specialties are catching up and interpreting their own imaging studies, he warned.

A team approach is important, said Baron, so that radiologists are not isolated from referring clinicians. Not least, radiologists need to focus on patients.

The ripple of change provided by the change to value-based healthcare is pushing radiologists to look beyond the relative value unit. The best radiologists have learned to combine science and art, but most only focus on the image. Non-reimbursable activities, such as learning and teaching are not considered core activities. But that's a flawed business model, said Baron. Imagine if pilots were employed on a per flight basis, would passengers have the confidence that they were at the top of their game?

Taking the time to develop stronger clinical knowledge will lead to meaningful clinical consultations with referring physicians. Radiologists should spend time learning from referring physicians about new clinical aspects while teaching them about imaging in return.

Return to Basics

Radiologists must return to the basics, urged Baron, and focus on what referring physicians want, answer key questions and provide solutions. Personal history should be incorporated into reports, and radiologists should focus on providing solutions. In urban settings, radiology practices should mirror the referring subspecialties and provide subspecialty care.

Radiologists need to become once again renaissance physicians, becoming familiar with new drugs, new surgical procedures and treatments.

Baron noted the narrow focus of radiology research. Radiologists need to look beyond radiology journals and the radiology community to ensure that they contribute to general medical and scientific journals and communities. Their research needs to be impactful and broadly visible. Basic feasibility studies are important, but research needs to also consider the impact of technology, and look at community deployment as well as patient outcomes. Results need to be reproducible, and studies should be multi-centre.

Patient-Centred Care

The radiology community should make virtually all clinical practice decisions on what is optimal for the patient, rather than what is more efficient, lucrative or convenient for radiologists, said Baron. The radiology report should strive to solve a problem rather than just describe findings. The key to success is to do what is best for each patient.

"We cannot presume we can control the future of medical imaging", concluded Baron. "We need to strive to do what is best for each individual patient at all times and develop clinically relevant research focusing on patient outcomes."

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