Productive Professional OF DIAGNOSTIC IMAGING



AUTOMATED BREAST CANCER RISK ASSESSMENT GENETIC TESTING ELIGIBILITY

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Upcoming Events

NCoBC Interdisciplinary Breast Center Conference March 11-16, 2022

> HIMSS 2022 March 14 – 18, 2022 Booth 1528

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The Productive Professional of Diagnostic Imaging Volume 1 | Number 2 Genetic testing is the ultimate risk identifier, factoring in multiple cancer types; for patients, their relatives and for generations to come. However, to some clinics the addition of a genetic testing service may seem to be a daunting task; PenRad is here to help. The PenRad High-Risk Breast Clinic module offers a comprehensive, straightforward, streamlined solution for patients, clinicians, and the health care system.

A PenRad high risk module offers automated breast cancer risk assessment, genetic testing eligibility, patient education, data management and more. As part of PenRad's commitment to increase patient accessibility to genetic testing, we have partnered with Natera and Myriad Genetics to bring automation to clinic workflow, facilitate data exchange and increase overall patient awareness.

Step by step overview:

- 1) PenRad identifies patients at high risk of developing breast cancer and those that qualify for genetic testing.
- 2) PenRad facilitates communication of patient eligibility, demographics, and risk information directly to client, patient, genetic testing organization and counselors.
- 3) Patient specimen obtained and shipped for testing.
- 4) Results returned directly to patient and updated in PenRad.

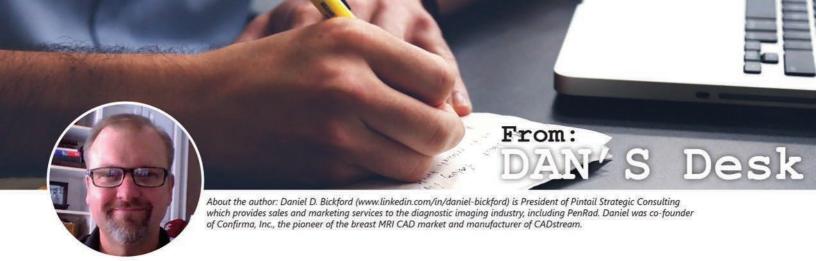
PenRad's High-Risk Breast Clinic module enhances client revenue and overall patient satisfaction.

PenRad's High-Risk Breast Clinic module provides a marketing differentiator in your community, and PenRad automation options streamline outreach. The Tyrer Cuzick algorithm automatically references a patient's breast density, patient and familial breast and ovarian cancer history and BRCA findings to calculate the breast cancer risk value. The genetic testing eligibility algorithms automatically compute eligibility based on 1st, 2nd, 3rd degree relatives with BRCA 1/2 and/or cancer histories of breast, colon, endometrial, NNN, ovarian, pancreatic, and prostate cancers.

Contact PenRad today to learn more about High Risk and Genetic testing options.

Schedule a meeting by scanning the code with your phone camera or send an email to sales@penrad.com. >>>





A REMINDER FOR LDCT LUNG CANCER SCREENING PROGRAMS TO CONTINUE SCHEDULING FOLLOW-UP EXAMS

A December 2020 study published by the Journal of the American College of Surgeons, demonstrated just how important follow up is to getting patients scheduled for their regular screening exams. During the COVID-19 pandemic lung cancer screening rates dropped by almost 75% and the rate at which patients were diagnosed with lung cancer malignancies increased by 200%. This demonstrates the necessity to follow up with patients on a routine basis, remind them often of their upcoming appointments to ensure they return for annual screenings.

Busy LDCT lung cancer programs can be overwhelmed by this task. Many programs still rely on manual tracking and notification of patients and printing and mailing reminder letters. The manual nature of this process makes it a strong candidate to be put on the back burner or be forgotten all together. Even though the thrust of the aforementioned study was focused on the need to make patients feel safe during a global pandemic, the data are still applicable regardless of why patients sometimes avoid follow screening exams. Screening centers should be concerned with the need to go the extra mile to remind patients of the necessity for annual screening exams.

Forward looking centers that have embraced LDCT lung cancer screening software and advanced automation are less likely to become fatigued with day in and day out tasks such as those required of LDCT lung cancer screening programs. LDCT lung cancer screening software program manufacturers tend to focus on optimization of workflow, reporting of results and facilitation of required upload of patient data to the national ACR database, etc. to calculate a clients return on investment, but the most significant ROI lies in two other areas: identification of incidental findings and automatically providing frequent follow up reminders for patients to keep their annual scheduled appointments.

Typically patients that qualify for LDCT lung cancer screening have a higher than normal occurrence of incidental findings due to their advanced age and length of time they have been smoking cigarettes.

Incidental findings lead to additional imaging exams which leads to increased revenue for the imaging center (and quite often better outcomes for the patient). Automatic, frequently reminders to patients about of the importance of returning for their annual appointment (and reminding them of when that appointment is scheduled) leads to a higher frequency of patients returning and a greater rate of disease detection at an earlier stage.

In a recent review of available software products available for LDCT lung cancer screening programs I encountered PenRad Technologies (www.penrad.com). PenRad's PenLung program claims to be fit for any sized LDCT lung cancer screening program and at first glance it automates much of the reporting and workflow challenges associated with this screening paradigm. The thing that jumped off the page for me is PenLung's ability to automatically remind patients at pre-set intervals, via email or printed letter multiple times per year, in advance of the patients scheduled appointment. This functionality alone must be a benefit to ensuring patients return for their annual exam.

What's more, PenRad's product can allow patients to complete or update a health history form from the comfort of their own home not only facilitating the check in process but also keeping the waiting rooms empty and instilling a sense of "safe". Instilling a sense of safety by keeping waiting rooms empty, especially during a pandemic as the authors indicated is a key component of making sure patients are comfortable and more likely to return for their annual screening exam. It is clear to me the addition of automated software packages to a busy LDCT lung cancer screening program is beneficial from multiple perspectives, workflow, overall return on investment and optimization of patient care. PenLung will help in the continued fight for early detection and establishment of a beachhead against lung cancer and support early detection and better outcomes.

PenLung offers diagnostic imaging centers a comprehensive unified lung screening and tracking software solution to manage patients participating in lung screening programs. Learn more: www.penlung.com

PenNews

INDUSTRY NEWS FOR YOU

Updated lung cancer screening guidelines could spell 54% surge in LDCT imaging eligibility

(Radiology Business Oct. 13, 2021)

"New lung cancer guidelines could spell a nearly 54% surge in eligibility for low-dose CT screening, with marked gains in minority populations, experts charged Tuesday in JAMA Network Open.

The influential U.S. Preventive Services Task Force just recently lowered the recommended starting age from 55 down to 50, among other changes, drawing praise from radiologists. Coupled with dropping the smoking history from 30 to 20 pack-years, Kaiser Permanente researchers believe these modifications could produce a 30% uptick in lung cancer diagnoses when compared with previous recommendations."

Full article online

Read the full article by scanning the code with your phone camera or visit: https://www.radiologybusiness.com/ >>>



PenTips

FROM THE PRESIDENT OF PENRAD

TOPIC: MACROS SYSTEM

The macro system allows the ability to store and create unlimited custom macros by radiologist for all imaging and procedures exams, plus the ability to create abnormality macros. This expands default pre-select system.

This feature eliminates the selection of individual specifiers for report generation to a single click for various abnormalities and procedure techniques, thus automating report generation by selecting a macro.

Create macros for:

- Various common imaging abnormality types for MG, US, NM and MRI.
- Various biopsies vacuum and manual devices, for us, stereo, nm, and skin punch.
- · Locs for wires, hooks, markers, and seeds.
- · Aspirations, FNA, and ductograms.
- MRI image sequences, techniques for implant, fat suppressed, etc., and injection info.
- NM (BSGI) for image views, and injection information.

Have a tip to share about a PenRad product?

Submit your tip by scanning the code with your phone camera or send an email to sales@penrad.com. >>>

PENRAD USER QUESTION

Q: What are Forms Macro Packets?

A: A macro packet can contain up to 6 separate forms and each of the forms within a macro has timing logic with it.

Logic allows a form to be included or excluded automatically based on the time duration of the previous.

For example refresh; HIPAA annually, consent after 60 days, email after 6 months, history sheet each visit.

Have a question? Let us know!

Submit a question by scanning the code with your phone camera or send an email to sales@penrad.com. >>>











PENRAD GENETIC TESTING PARTNERSHIPS



The mission and purpose at Myriad Genetics is to advance health and wellbeing for all, empowering every individual by revealing the answers inside each of us.

It is more relevant than ever, and we are committed to fulfilling it – working together to uncover new opportunities, make health more precise and personal, and push the frontiers of what's possible.



510.826.3572 | www.natera.com

Empower is a genetic test for those who want to know more about their risk of developing cancer, why it might be common in their family, or want to inform treatment options following a cancer diagnosis.

Empower tests up to 53 genes associated with risk for common hereditary cancers using blood or saliva samples. Breast STAT panel results arrive in 5-7 days, with a full report in 2 weeks.