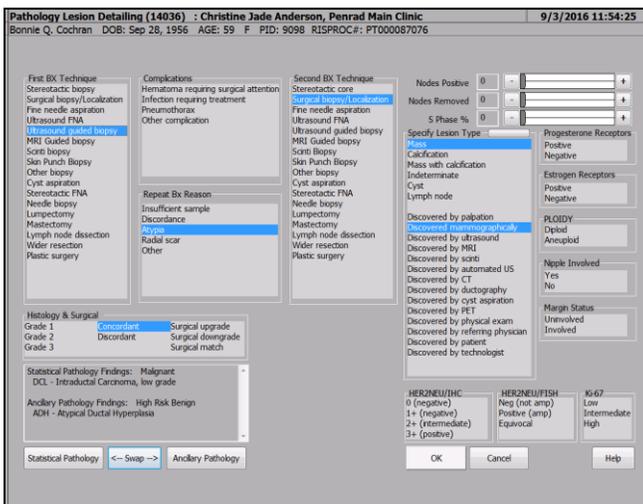


Biopsy Audit for ACR

To facilitate additional components for the ACR audit for stereotactic and ultrasound guided biopsies, fields were added to main and abnormality detail pathology screens.

Administrative report 4KK provides data for submission. Report also includes itemized results for other biopsy types with anticipation audit parameters will expand.

On the main pathology exam screen, buttons were added to capture Initial Biopsy(s) Physician and Secondary/Repeat Biopsy(s) Physician. This also facilitates facilities where biopsies are provided by other parties, and/or the capture of surgical facility.



If the radiologist performs biopsy using PenRad exam system, initial physician is automatically selected. If repeat biopsy was required, and provided by radiologist, this can be documented via selection of radiologist by the Secondary/Repeat Biopsy(s) Physician.

The pathology detail screen has added selectors to indicate required reason for repeat biopsy, and capture of major complication if applicable for initial biopsy. Now to expose secondary biopsy technique selector, repeat reason must be first indicated.

When facilities use the PenRad biopsy exam, initial biopsy technique and pathology data is transferred. For facilities not, select method from First BX Technique window, and add pathological data by tapping Statistical Pathology

button, then specify pathological finding.

Pathology exam is typically suspend if re-biopsy or surgery is planned. When completed, specify reason in Repeat BX Reason window, method in Second BX Technique window, and tap Ancillary Pathology button and select pathological finding. To suspend exam, tap Suspend button on main pathology screen.

Pathological type specified as statistical is referenced in various statistical reports for audit.

Ancillary pathology type can be exchanged with statistical pathology by, tapping the Swap button. Examples; 1) Initial core bx ADH (atypia), surgery nets DCIS, then; surgical upgrade, repeat reason atypia, statistical path DCIS, swap applicable. 2) Initial core bx malignant, surgery nets benign, then; surgical downgrade, repeat reason other, statistical path malignant, implies core removed abnormality, swap not applicable.

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