

VS. RIS Mammography Modules



MagView vs. RIS Modules

Departments that only want basic patient tracking and MQSA compliance may find that a RIS-based mammography module offers a viable, low-cost alternative to a specialized system. However, others may want an option that balances the advantages of a single information system with the breast center-specific features, flexibility, and workflows of a dedicated mammography information system (MIS).

About MagView

MagView has been focusing on the needs of breast centers and mammography departments since 1992. That's when the first version of MagView was developed for the American College of Radiology (ACR), with input from the ACR BI-RADS™ Committee. The benefit of a large R&D budget combined with the expert insights of hundreds of radiologists in the clinical setting at more than 2500 facilities helped MagView quickly became a powerfully effective system. The ability to provide standardized reporting, outcome monitoring, patient tracking, and departmental management has made MagView the clear leader in breast imaging information management.

MagView

- Every feature and screen designed for needs, efficiency of a breast center
- Eliminates redundant data entry for patient tracking
- Participates in national registry programs and centers of excellence
- Used by top ranked breast centers and radiologists

RIS/EHR Mammo Module

Single Information System



Can Your RIS Module Do This?

Mammography is a radiology modality like none other. Breast centers operate with different needs and more federal regulations than other modalities. **Most RIS-based mammography modules are not designed with mammography in mind** and can double the work effort or require numerous clicks to perform the same tasks in comparison to MagView.

These add-ons that are available in MagView—and typically lacking in RIS modules—can increase efficiency and reduce costs so much that the purchase of a mammography information system ultimately pays for itself.

- ✓ Risk Assessment module calculates risk for Gail, BRCAPRO, Tyrer-Cuzick, B-RST, and other models based on electronic history.
- ✓ Patient Navigation module navigates through the continuum of care—from detection through treatment and beyond.
- ✓ Tablet and/or Online Patient History
 Portal module enables direct input of clinical
 history by the patient instead of requiring the
 cumbersome burdens of paper.
- ✓ TechPad™ untethers your technologists from workstations and allows them to move freely with the patient and throughout the facility.
- ✓ Patient Results Portal offers HIPAA-compliant access to lay letters via email notifications with secure links to the web.

- ✓ Workstation Interface integrates with imaging systems to synchronize the display of a patient's record with their images.
- Extraction Interface automatically extracts MQSA assessments from results and creates tracking records without requiring human interaction.
- Screening Keypad provides access to your favorite macros and reduces radiologist interaction with the keyboard and mouse.
- ✓ Text Message Notification allows your patients to receive a text reminder for an upcoming appointment or follow-up due, which saves staff time and reduces no-shows.

Questions to Ask Your RIS/EHR Vendor

With more than 25 years of experience and serving over 2500 facilities, we've heard our share of stories about shortcomings and dangerous missing features when it comes to RIS-based mammography modules. With the help of our customers, we've integrated these core features that all breast centers should have access to.

	Does your RIS/EHR mammo module offer	Benefit to your practice
PATIENT TRACKING & COMMUNICATION	Automatic results extraction?	Even if you report in an outside system (such as PowerScribe), you can save countless hours of manual data entry and tracking related to following up on annual, short interval, and immediate callback studies.
	Entry and tracking of multiple findings/assessments per exam or even per side?	Prevents patients and less-severe lesions from being missed and reduces risk of litigation.
	Discrete finding data entered at the time of resulting by the radiologist?	Reduces redundant data entry and risk of error associated with manual processes.
	Interactive worklists of patients who are out of compliance?	Gives on-demand access to view patients who are out of compliance with recommended testing and follow-up. Helps to ensure patients won't be missed and allows busy staff to make the best use of their time.
	Audited, central screen to document all attempts to recall patients?	Site is required by federal law to document all attempts to recall patients for their recommended imaging. All entries should be audited for additional legal security.
	Ability to link breast ultrasound and mammogram exams to result as a	Improves accuracy of radiologist statistics by avoiding interstitial "0" assessments, and

reduces confusion for referring clinicians and

patients.

single exam and track overall findings?

Benefit to your practice...

Tracking to determine whether a patient has returned for their recommended imaging/procedure?

Generates specific reminders to patients who are out of compliance, and allows staff to easily identify patients who need to return.

Incorporation of risk statement based on your facility's high-risk threshold?

Informs primary physicians and patients of their elevated risk, which may prompt a recommendation for genetic counseling.

Automated inclusion of state-required breast tissue density notification?

Prevents non-compliance with local legislation. Informs and educates patients about tissue density, the potential risks, and their options for return visits.

Automatically track tissue density for patients who have been seen previously?

Cuts down on time to create the findings report, and offers the radiologist a default option for selecting an ambiguous density.

Non-standard recall options, recommendations, and intervals?

Radiologists have the flexibility to select a 3-month follow-up date for a BI-RADS 3 assessment, for example. Can also calculate months to return screening visit automatically. Allows for case-specific recalls instead of a one-size-fits-all approach.

Full-spectrum extraction capability of finding reports dictated in Power-Scribe or another VR system?

Prevents loss of data between systems, and prevents doubling time to manually add findings and tracking information in two different systems.

Benefit to your practice...

One-click negatives for screening and diagnostic exams?

Speeds the interpretation process and reduces radiologist computer interaction by automatically inserting film comparisons, tissue density, views obtained, patient history, contralateral negatives, and other important text.

100% BI-RADS compliant structured results, with automatic error checking?

Helps sites adhere to national standards of care and lexicon developed by the ACR. Generates clear, concise, complete results.

Guardians that check structured results for common mistakes prior to signing?

Reduces corrections and amendments to finalized results due to common omissions such as missing sides; missing assessment codes; missing follow-up recommendations, etc.

Automatic selection of patient lay result letters based on the assessment code entered at the time the exam was resulted?

Reduces redundant data entry and potential errors due to manual processes.

Ability for radiologists to easily edit the text of any patient letter per exam?

Radiologists can preview and add text to each letter that is sent to the patient, without affecting other letter templates.

Structured results for any type of breast exam performed at your facility?

Has context-aware templates for mammography, tomosynthesis, breast ultrasound, breast MR, ductography, DXA, interventional biopsies, localizations, and excisions.

Automatic insertion of any text or paragraph based on any data point in the system?

Inserts added text for dense breasts or high-risk patients in support of a high-risk screening program and offers more guidance to your referring clinicians.

Benefit to your practice...

Technique statements automatically included in your report which state tomosynthesis and c-view were used?

Cuts down significantly on reporting time by automatically inserting technique text, including tomosynthesis and c-view.

Automatic inclusion of a custom statement for patients who meet a certain high-risk threshold?

Many high-risk programs want to inform the referring physician of the patient's risk score and recommend genetic counseling. Takes the guesswork out of identifying these patients and communicating with their referring physicians.

New location specification within the breast for a new finding?

Creates a more specific and accurate report, cutting down on confusion between readers and exams. Aids in diagnosis and treatment.

Benefit to your practice...

Calculation of all statistics required for your annual medical outcome audits inspection in a single report?

Reduces time it takes to cobble together statistics from multiple reports or calculate by hand. Frees staff to perform exams instead of running reports.

Outcomes statistics that go beyond the bare minimum of MQSA and meet the national standard of care? The national standard of care for mammography exceeds the stats required by MQSA; collecting anything less may put your practice at risk. In particular, the Performance Benchmarks for Screening Mammography outlined by the National Cancer Institute Breast Cancer Surveillance Consortium represents benchmarks

Outcomes statistics incorporating "The More Complete Mammography Audit" recommended in the BIRADS Atlas? Provides important information regarding mammographic performance of your facility and meaningful measures to improve the quality of reading there.

Data fields and reporting to support NCBC's 31 quality measures for breast centers?

The National Consortium of Breast Centers defines 31 quality measures that all breast centers "should be collecting."

Capture and reporting of all data required to participate in ACR national databases and accreditation programs?

The ACR offers several programs that require a higher level of data capture and offer the benefits of ACR membership, including ACR Breast Imaging Center of Excellence designation; ACR National Mammography Database (NMD) entry; and ACR ultrasound/stereotactic biopsy accreditation.

Distinction between BI-RADS 0 for old films vs. additional imaging vs. technical repeat?

Improves the accuracy of your outcome statistics by not penalizing radiologists for problems in obtaining prior films or due to suboptimal imaging.

Benefit to your practice...

Ability to query and build custom reports on any data point you capture?

Lets you see the data you want to see. Satisfies existing benchmark reports for your organization and expands your research capabilities.

List of instances of architectural distortion on screening that were normal on further workup—but still resulted in the eventual development of cancer in the same breast?

Allows readers and residents to review prior exams to look for ways to improve CDR, adjust recall rates, and confirm previous assessments on all cases. Multiple tools are available for both training and review.

Report that shows patients who were called back from screening and came back within three months with a diagnosis of cancer?

Greater depth of data in identifying trends in your patient population and radiologist practice. Improves the level of outreach and follow-up on high-risk patients.

Benefit to your practice...

Automatic generation of all letters to patients?

Saves staff time so they don't have to manually select each letter from a RIS log or manually trigger each letter to print.

Unlimited letters and support for unlimited languages?

Allows more specific instructions to the patient and in their preferred language to offer a higher level of care.

Permanent storage of every letter sent to the patient in the electronic health record?

Reduces risk to your practice with a true auditable copy of every letter exactly as it was sent, including the date it was sent and the address, even if the address has changed.

Automatic generation of up to three annual reminders or overdue recall notices?

Saves staff time with no need to manually request letters or manually identify patients who have not yet returned for their recommended imaging.

Automatic generation of appointment reminder letters?

Reduce no-show rates and increase patient retention rates. Customizable to support any appointment type, regardless of modality.

Ability to insert any text into patient letters based on any data point in the system?

Improves patient care and communication, and also increases staff efficiency by automatically inserting paragraphs of text based on clinically relevant data.

Separate letterheads and lettersets for each facility in your system?

Supports customized letterheads and customized text, instead of requiring all facilities to use the same content.

Automated inclusion of state-required breast tissue density notification?

Prevents non-compliance with local legislation. Informs and educates patients about tissue density, the potential risks, and their options for return visits.

Benefit to your practice...

Correlation of each pathology result to the imaging that requested that pathology?

Required for proper calculation of positive biopsy statistics for biopsy recommended (FP2/ PPV2) and biopsy done (FP3/PPV3). Also helps track imaging findings that have not been assigned the recommended tissue diagnosis.

Entry of multiple histologies/pathology codes from a single pathology procedure/report?

Results in more complete outcomes statistics, and gives you a true snapshot of the numbers and types of cancers diagnosed.

Reports to identify all patient records that are missing pathology reports?

Ensures staff is fully compliant with MQSA and FDA federal requirements.

Entry of any and all outside pathology?

More complete medical outcomes.

Surgical pathology entry for all surgeries and excisions?

Generates QA outcomes vs. your positive core biopsies and reviews atypia cases upgraded at surgery.

CAP protocol compliant pathology?

Allows you to participate in NAPBC and measure a higher level of pathology outcomes data for tumor board, research, or other accreditations.

Entry of multiple core pathology records per recommendation or finding?

Improves statistics and allows proper tracking of pathology even in "non-typical" scenarios.

Benefit to your practice...

Pre-populated paper history forms with previous responses?

Speeds up patient check-in.

Electronically capture patient history?

Gives technologists and radiologists quick access to relevant patient history, and supports a paperless workflow.

Tailored history collection screens to capture any data point?

Gives you access to the clinical history that is important to your practice.

Automatic risk assessment calculation based on history entered?

Includes risk scores, or any paragraph based on the score, in the referring clinician and patient letters.

Guardians that prevent technologists from saving incomplete exam information?

Prevents incomplete radiologist results, reduces delays at interpretation, and improves technologist efficiency.



Magview offers **24/7 support** at no additional charge. 100% of our support staff is dedicated to the mammography information module.

We have a close relationship with the ACR, rapid deployment of new BI-RADS terminology, and swift development to support new regulations to keep you compliant in the ever-changing world of breast imaging.

To request a demo of MagView's Mammography Information System, please contact sales@magview.com.