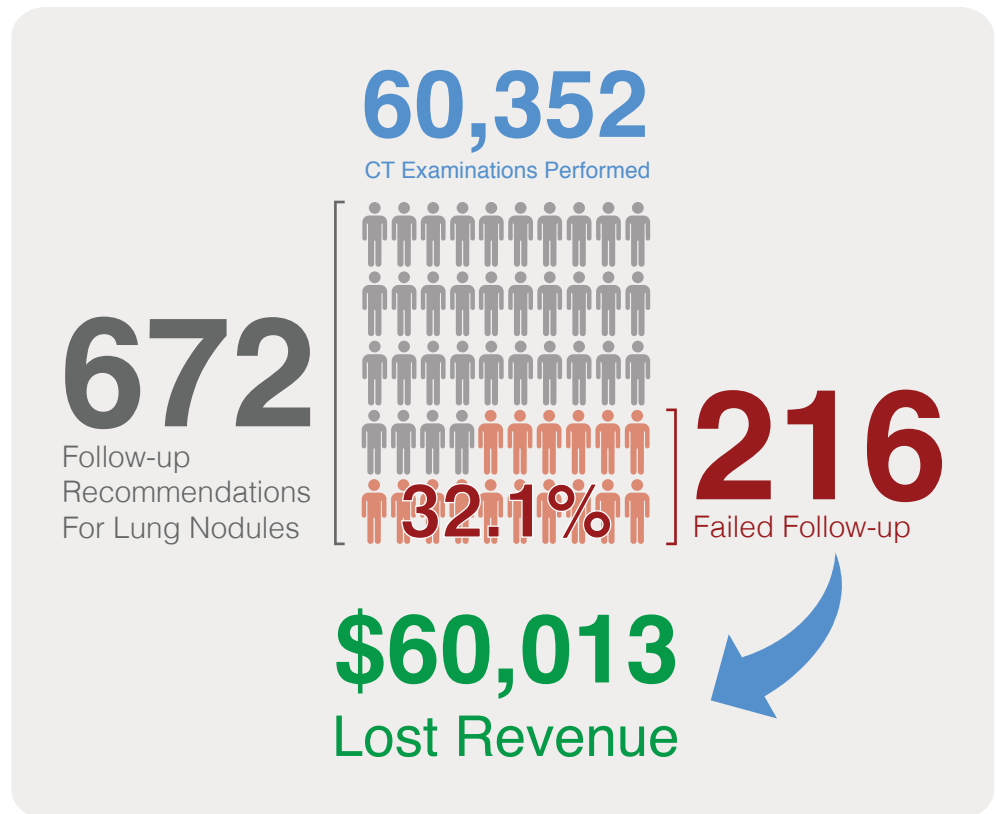


WHAT IS THE COST OF FAILURE TO FOLLOW UP LUNG NODULES ON CT?

What happens when a radiologist recommends follow-up imaging due to an incidental lung nodule found on a computed tomography (CT) study in your facility? Most administrators and radiologists struggle to answer this question. A simple query using MONTAGE™ Search and Analytics answered this question definitively for three facilities.

The query was designed to search all CT procedures performed during specific calendar months and filtered to detect only reports that contain a radiologist recommendation for lung nodule follow-up. We included 14 months of reports from three facilities in late 2013 and early 2014. MONTAGE Search and Analytics was then configured to show patients from the first search who failed to have the recommended

follow-up study. All nodules less than 5 mm were assumed to be low-risk based on the Fleischner Society guidelines and not counted as failed follow-up. This sequential search performed in MONTAGE Search and Analytics was audited by a radiologist, who read all reports that had the presence of a nodule and follow-up recommendation.



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60,352 CT's were evaluated, of which 672 (1.1%) contained follow-up recommendation due to the presence of a lung nodule. Of the 672 CT's that contained a follow-up recommendation, 456 (67.9%) follow-up studies were completed, and 216 (32.1%) failed to be completed. The 216 failed follow-ups equate to a loss of over \$60,000 in technical and professional revenue, or roughly \$4,287 per month. When allocated across the total CT volume, this translates to loss of about \$1 for every scan performed.

\$2,500,000

Malpractice Settlement
Cost For Failed Lung
Nodule Follow-up

The prevalence of malignancy in patients with pulmonary nodules ranges from 1.1% to 12%.¹ Even at 1.1%, 2.38 of the 216 patients who failed to return for a follow-up study will later present with lung cancer progression. In addition to poor patient care, failed follow-up exposes radiology practices to substantial medico-legal risks. For example, a similar lost-to-follow-up case was recently settled in Chicago for \$2.5 million.²

What is the impact of these missed follow-ups at your facility? If cost containment due to diminished reimbursement is a primary goal, recouping almost \$1 of revenue attributable to missed lung nodule follow-up for every CT exam performed can have a significant impact. When your primary goal is improved quality of care and enhanced radiology department relevance on care delivery, the ability to track, pursue, and document missed follow-ups assures radiology is an active and valued institutional contributor to better and more efficient care delivery. With MONTAGE Search and Analytics, both financial and clinical benefits can be yours. Let Montage help you quantify how these capabilities can impact YOUR operations.

**For your personalized analysis,
email us at info@montagehealthcare.com**

¹ Wahidi MM et al. Evidence for the treatment of patients with pulmonary nodules: when is it lung cancer?: ACCP evidence-based clinical practice guidelines (2nd edition). Chest 2007;132(suppl 3):94S-107S.

² Kreisman R. "\$2.5 million settlement for doctor's failure to follow up on signs and symptoms of lung cancer." Chicago Medical Malpractice Attorney Blog. 2014