

SUMMIT RADIOLOGY SERVICES

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ADDENDA

- If original report does not come back to queue, transcribe as new report.
- If original report comes back to queue along with original dictation with the addendum added to end of original dictation
 - Skip to end of dictation by pressing red right arrow with vertical line in top right corner of screen.
 - Backspace to check for addendum.
 - If addendum dictated transcribe below the signature line of the original report.
- If no addendum dictated, place report in held queue Connie Chase at cchase@summitrad.net with the patient number, exam description to let them know dictation does not contain addendum.

BLANKS

- Do not leave note on report for physician.
- Use 10 underline spaces (_____) to mark all blanks.
- Place reports in Needs QA queue. Do not use Held queue.

CARBON COPIES

When physician requests a copy sent to a physician other than ordering doctor, email patient information and cc request information to Connie Chase (cchase@summitradiologyservices.com)

DISCREPANCY PROTOCOL

- If discrepancy within the report, contact the facility.
Example: Order for left knee but dictates bilateral knees.
- Do not put note on top of report.
- Contact
 - cchase@summitrad.net
 - ehazard@summitrad.net
 - Include the patient's name and exam

DISREGARD DICTATION

- Place DISREGARD in all caps at top of report
- Set report to Needs QA queue
- Email eth below with the patient name, exam description to let them know physician wants to disregard dictation
 - Summit - Connie Chase at cchase@summitrad.net

FORMATTING

REPORT FORMAT IS AS FOLLOWS (NO EXCEPTIONS):

- Transcribe reports verbatim, while correcting grammar and following style guide.
 - *Exceptions:*
 - If the history auto populates in Avreo, add any additional history dictated by the physician.
 - If the history does not auto populate and/or no history dictated, make no changes and save report as is. Do not add any information from Avreo such as symptoms/reason for exam.
- Follow dictator's instructions for format style.
- Type headings as dictated. If no title dictated, do not add.
- Text should be on same line as headings except when numbering impression.

TITLE OF EXAM:

CLINICAL INDICATION:

BODY OF REPORT

IMPRESSION: If only 1 impression is given continue on same line as heading. If more than one impression is given begin transcribing below the heading, number each impression.

SIGNEDBY (DO NOT CORRECT SIGNED BY WITH SPELL CHECK)

DD: 09/30/2011/DT: 09/30/2011

T:cr (Add your initials under DD/DT line. Formatting should be

T:your initials --initials should be lowercase)

ALBANY

When the below physician's name shows as "image" on the report, transcribe dictating physician's name on bottom of report.

Dr. Eric Lindstrom

Dr. Kevin Miller

Dr. Hans Chang

Dr. Derek Pollard

GEORGIA BONE & JOINT

SIGNEDBY (DO NOT CORRECT SIGNED BY WITH SPELL CHECK)

DD: 09/30/2011/DT: 09/30/2011

T:cr (Transcribe - T:your initials --initials should be lowercase)

PATIENT: John T. Smith (Transcribe - PATIENT:patient's full name - ALL CAPS)

INCOMPLETE DICTATION

- Place INCOMPLETE DICTATION in all caps at top of report.

- Set report to Needs QA queue
- Email the below with the patient name and exam description to let them know dictation is incomplete-
 - Summit - Connie Chase at cchase@summitrad.net

REQUESTING JOBS

No more than 2 jobs are to be routed to the transcriptionist at all times.

Go to View

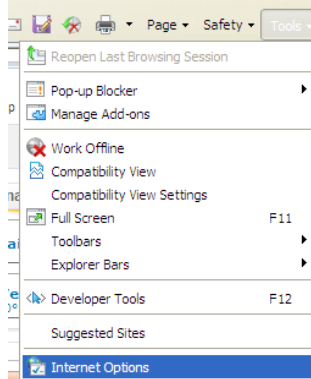
Transcription Request Queue

Request Next 2 Transcription Items*

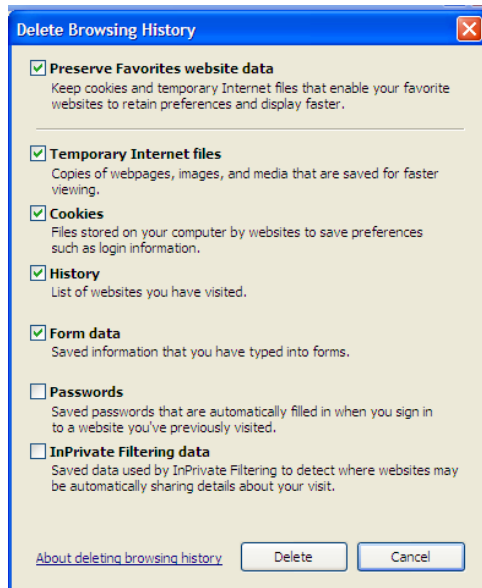
*This process must be repeated again after the 2 jobs routed have been transcribed. Do not click on Request Next 2 Transcription Items until both jobs are transcribed.

TECHNICAL PROBLEMS

- If Avreo is locking up, log out/close Avreo.
 - Open new Internet Explorer window.
 - Go to tools, internet options



- Check temporary internet files, cookies, history and then click Delete to clear out the IE cache



- Close Internet Explorer.
- If problem is not resolved, restart computer.
- If problem still is not resolved, contact Southern Transcription Services.