

Radiologists warned their turf being invaded in ER

A survey of emergency radiology services in Canada should serve as a “wake-up call” for the country’s radiologists, a new study concludes.

The study, published in the June issue of the *Canadian Association of Radiologists Journal*, involved a survey of emergency physicians and radiologists from 35 hospitals ranging in size from 120 to 1500 beds. Author William Torreggiani and colleagues said the goal was to make radiologists more aware “of the real needs and requirements of their emergency departments [EDs].”

The survey revealed distinctly different

impressions about the current quality of radiology services available in EDs. Nine of the 21 emergency physicians surveyed rated the services as poor or average, compared with only 2 of 24 radiologists. “Our survey indicates that a significant number of emergency physicians are not satisfied with the services being offered. This is likely related to the combined lack of immediate availability of some radiologic services at different times of the day and the inefficiency of their provision.”

As well, even though emergency physicians almost always read films first, 21 of the 35 hospitals surveyed provide

no formal training in this. The study also noted that only 3 of the responding hospitals employed a radiologist with a special interest in trauma.

“It is clear,” the study concluded, “that in certain areas that were previously the domain of the radiologist (such as emergency ultrasonography) other physicians are performing and interpreting images.

“If radiologists do not provide satisfactory service to the referring emergency physicians, it is likely that some functions previously under their domain will be lost to other specialties.” — *Patrick Sullivan, CMAJ*

PULSE

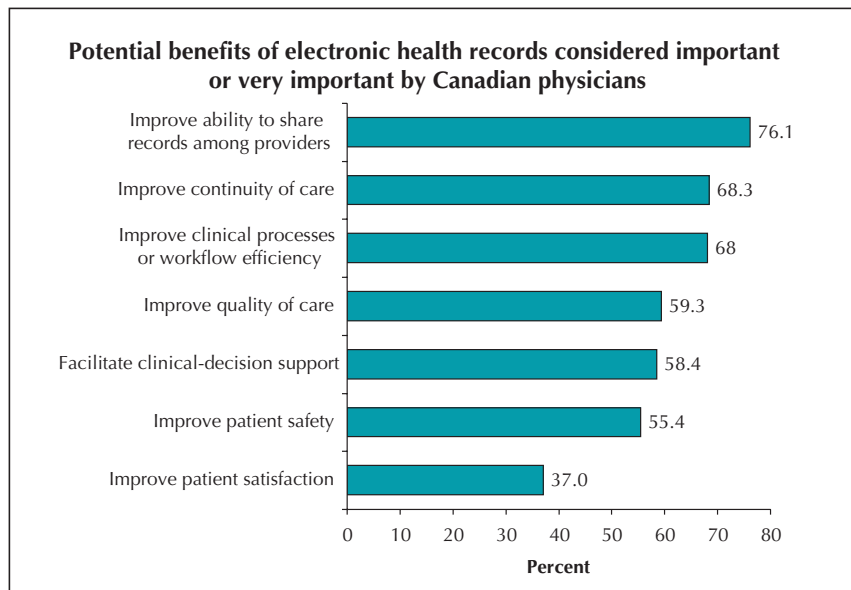
What paperless office?

Preliminary data from the CMA's 2002 Physician Resource Questionnaire (PRQ) indicate that just 3% of Canadian physicians use only electronic media to store active patient records, while 24% use a combination of electronic and paper media. A majority of physicians (69%) use only paper.

GP/FPs are less likely to use electronic patient records or a combination of electronic and paper (21%) than medical specialists (35%) and surgical specialists (31%).

Among those who use electronic patient records alone or with paper records, less than half (38%) receive data (such as laboratory results and pharmacy information) directly into the records. Surgical specialists are somewhat less likely (30%) to receive data directly into electronic records than are GP/FPs and medical specialists (40%).

More than three-quarters (76%) of MDs said improving how patient information is shared is an important or very important potential benefit of electronic health records (EHRs). Sixty-eight percent indicated that improvements to clinical processes or work-flow efficiency — and improve-



ments to continuity of care — are important or very important potential benefits.

Only 37% felt that potential improvements to patient satisfaction are an important or very important benefit of electronic patient records.

The CMA says adoption of the EHR has been sporadic because of the complex issues surrounding its use. As a result, it identified the creation of

standards for use of the EHR as a priority project in 2000. More recently the CMA has developed working principles and recommendations for discussion to help advance the development of EHRs in Canada.

The PRQ is the CMA's annual survey of about 7700 physicians. This year's response rate was 37%. — *Shelley Martin*, Senior Analyst, Research, Policy and Planning Directorate, CMA