

# Hospitals encouraged to consider value-added service of hospital-based radiology groups

September 1 2011

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Hospital executives should consider the value-added services of hospital-based radiology groups before allowing radiology departments to be taken over by teleradiologists or other specialists, according to an article in the September 2011 issue of the *Journal of the American College of Radiology*.

Although imaging has become an increasingly important cornerstone in the [diagnosis](#) and treatment of disease and injury, hospital-based imaging is now often read by other specialists or via teleradiology rather than hospital-based radiologists.

"These problematic situations may well have arisen because the hospital administrators have not recognized the value added by their on-site radiology groups or have not been sufficiently educated by these radiology groups to that effect," said Vijay M. Rao, MD, FACR, lead author of the article.

Researchers identified six value-added services. Those services are [patient safety](#), quality of the images, quality of the interpretations, service to patients and referring physicians, cost containment and helping build the hospital's business.

"Hospital executives should think through the potential impact of these lost values before allowing their radiology departments to be broken up

by the intrusion of other specialists or teleradiologists working at remote locations," said Rao.

"If the hospital allows its radiology department to become fragmented by the [intrusion](#) of other specialists or teleradiology companies in remote locations, most of these added values would be lost, and [chaos](#) would ensue," she said.

**More information:** [www.jacr.org/](http://www.jacr.org/)

Provided by American College of Radiology

Citation: Hospitals encouraged to consider value-added service of hospital-based radiology groups (2011, September 1) retrieved 18 April 2024 from <https://medicalxpress.com/news/2011-09-hospitals-value-added-hospital-based-radiology-groups.html>

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