

Study examines necessity of additional imaging in PET/CT oncologic reports

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Radiologists and nuclear medicine physicians recommended additional imaging about 30% of the time in oncologic PET/CT reports, with about half of those recommendations being unnecessary, a new study shows.

The study, conducted at Brigham and Women's Hospital in Boston, included 250 patients. The study found that there were 84 recommendations made for additional imaging. When study reviewers examined the patients' records, they concluded that 43 of those recommendations were unnecessary, said Atul Shinagare, MD, one of the authors of the study. No adverse patient outcome would have occurred by not recommending additional imaging tests in these 43 cases, said Dr. Shinagare.

The study did not specifically address the motivating factors behind the recommendations for additional imaging, however "we feel that some of the most important factors leading to unnecessary recommendations include reluctance of physicians to accept uncertainty regarding diagnosis, partly driven by medicolegal concerns, combined with a failure to fully consider the patients' clinical circumstances and the likely cost-effectiveness of additional imaging tests," said Dr. Shinagare.

The study also found that 70% of the time, referring physicians did not follow through on the radiologists' recommendation for additional imaging. Radiologists and nuclear medicine physicians may not have access to the complete medical history of patients referred for PET/<u>CT</u> <u>imaging</u>, said Dr. Shinagare. "On the other hand, ordering clinicians



usually know the <u>patient record</u> and history, which may put them in a better position to judge the necessity of some recommended additional imaging," Dr. Shinagare said.

The study will be presented on May 4 at the American Roentgen Ray Society Annual Meeting in Vancouver, Canada.

Provided by American Roentgen Ray Society

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