



CT & MR—Preventing Errors

LSU Health Sciences Center—Radiology Department



Prevent hospital errors by using good communication and accurate order entry.

Examples of common errors :

- **Illegible Orders—Clarification is essential (Example: Thorax is not Thoracic Spine, Neck is not C Spine) - Inpatient orders must be clarified before being entered in Invision. Outpatient orders that are illegible will be returned to the clinic.**
- **Correct Ordering Doctor—The actual physician ordering the test must be entered on the order to comply with critical value reporting as required by Joint Commission.**
- **Indication—Provide the RIGHT HISTORY, the RIGHT INDICATION so that the RIGHT DIAGNOSIS can be achieved. Scanning protocols are determined by the indication for the exam (There are 18 different protocols used to scan the abdomen alone).**
- **Chart—Chart must accompany patient to scan room. The technologists must verify the original order which adds an additional safety check.**
- **Stat Orders—Contact Radiologist on pager 1931 for all exams that are “STAT” or needed urgently.**

If You Do Not Know—Always Ask



Precautions When Using Contrast

LSU Health Sciences Center—Radiology Department

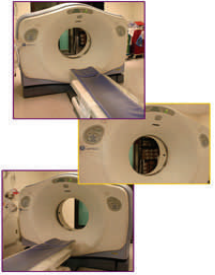


Many Diseases, Many Types of Contrast, Many Precautions

- **High BUN & Creatinine and multiple doses of contrast within 72 hours increases the risk of contrast induced nephrotoxicity (CIN).**
- **Oral antihyperglycemic “metformin” must be discontinued for 48 hours post IV contrast. BUN and Creatinine must be drawn and checked before re-starting metformin.**
- **Mucomyst premedication (used in patients with renal impairment) is 4 doses, patient can be scanned after 3rd dose.**
- **Adequate IV access—20g or larger antecubital for CT Angio and CT with PE protocol.**
- **Power injectable central lines and PICC lines are available in the hospital. Contact Sarah Murphy for ordering or product information (57308).**



CT Contrast Tips



CPT® 2008

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Radiology

Radiology Guidelines (Including Nuclear
Medicine and Diagnostic Ultrasound)

Administration of Contrast Material (s)

The phrase “with contrast” used in the codes for procedures performed using contrast for imaging enhancement represents contrast material administered intravascularly, intra-articularly or intrathecally.

Oral and/or rectal contrast administration alone does not qualify as a study “with contrast”.

If a physician order reads:

With Contrast—this equals intravenous contrast or CT WITH

Oral or PO Contrast Only—Use a CT WITHOUT (Include “Oral Contrast Only” in comments)