Delivery of Digital Diagnostic Imaging: Collaboration to Reach a Solution

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Medical Images (X-rays, CT scans, etc) on CD (instead of film)

 "The move to supply x-rays on compact disc has been badly implemented to the potential detriment of patient care"

• "At present this means good quality films are required for all imaging investigations"

ASOS / AOA Press Release, 10/11/2006

Digital Revolution in Imaging

 Radiology started by exposing analog film to X-rays

 Now almost entirely electronic detection and digital manipulation

 Printing images from electronic display onto film becoming anachronistic (and expensive)

Why Digital Imaging? - I

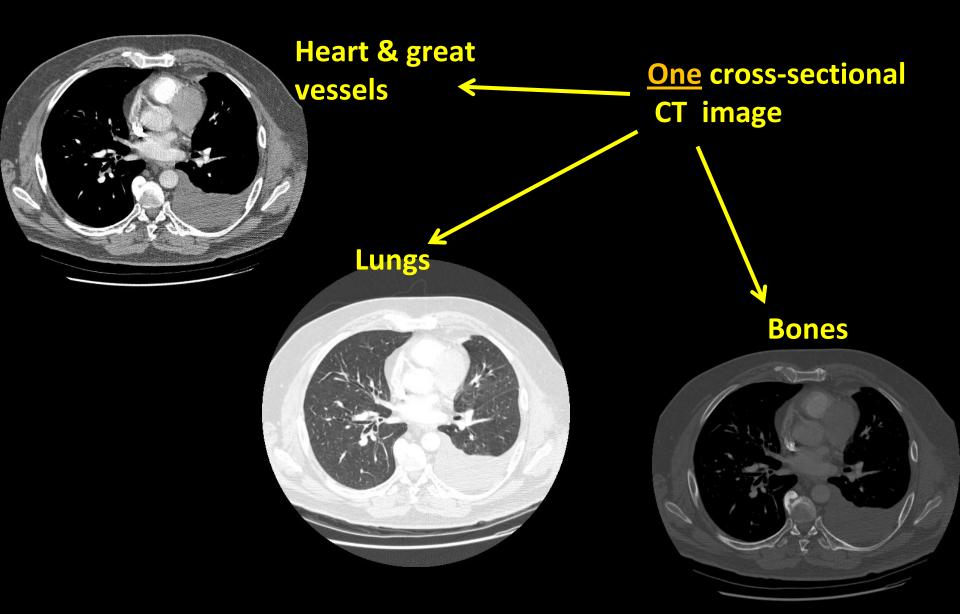




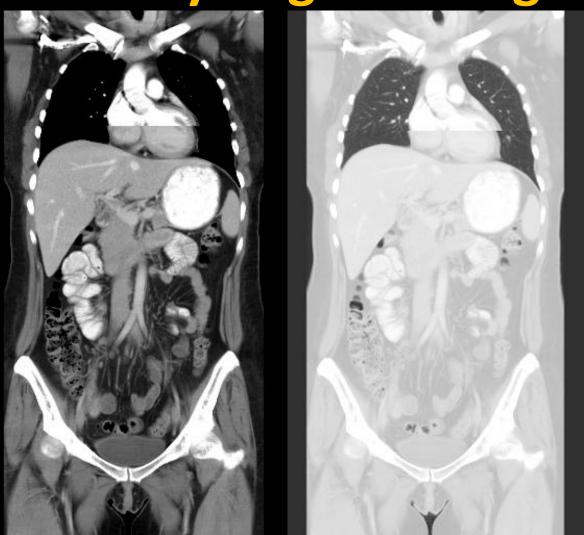
CXR: 'Underpenetrated'
Can see lungs, nothing else

CXR: 'Windowed' digital display
- 'reveals' heart and vertebrae

Why Digital Imaging? - II



Why Digital Imaging? - III





Combine 100s (or 1000s) of thin cross-sectional images into 3-D model - reformat and window as desired.

Downside - Moving the data

- On film, routine oncology staging with CT (20 format, full-size 35 x 43 cm film):
 - 2-3 sheets for lungs
 - 6-7 sheets for 'soft tissues'
 - 2 sheets for liver
 - 6-7 sheets for bones
 - +/- 4-5 sheets for neck, 6 sheets for brain
 - => ie, up to 30 films per exam
 and compare with previous!

How to send (so many) images ?

Inside large institutions (mostly hospitals):

PACS (Picture Archiving & Communication Systems)

- electronic storage and networked access

To the community:

Film (selected) images Portable digital media

- eg CD: a cheap, widely used transfer medium=> widely used also by PACS vendors

Yes, but....

- "There's no computer in my rooms and/or operating theatre"
- "I can't open the CD"
- "I've got 15 patients to see in 3 hours, and the CD takes 5 minutes to load..."
- "How do I window with this viewer?"
- "How do I compare this CD with the last one?"
- "They're only good for drinks coasters..."

...referrers/customers not happy!

 "...film must remain the principal means to provide images to the treating practitioner"

"CD are an entirely inappropriate medium"

"Must load in < 5 seconds"

Must provide film to be eligible for rebate

There are problems

Numerous complaints from referrers

(GPs, gastro-enterologists, neurosurgeons, orthopaedic surgeons, and others)

and radiologists and patients (sent for repeat tests)

- Became political issue:
 - media releases
 - lobbying of AMA, DoHA, Minister
- Calls for legislative action and economic penalties to enforce provision of film

 "...potential gains may be offset by poor implementation strategies and inadequate attention to problems"

Georgiou et al, paper # 22, HIC 2008

Addressing the Issues

- Referrer engagement : Define the problems
- Identify relevant "use cases" (numerous and not similar)
- Identify relevant (existing) standards
- Identify (or develop) technical solutions
- Test the proposed solutions

Some "use cases"

 Send report & simple jpeg for GP to show to patient

- Send full DICOM data set of complex pelvic fracture to orthopaedic surgeon
- Lumbar spine CT to GP (?jpeg)
 - but referred on to orthopaedic surgeon...
- Images required for operating theatre
- Images at rooms A, doctor at rooms B Etc, etc, etc, ...

Relevant existing "standard": RSNA 2004 - Launch of IHE PDI Profile

Portable Data for Imaging Profile (PDI)

CDs that Work!

INDEX.HTM

PDI - IHE Portable Data for Imaging RSNA 2004 Demonstration

This is a sample CD containing data

Institution/Privacy...

Web Content - Reports and Images

The following are web viewable versions of DICOM Reports and Images on this disk.

Vendor A CR

Vendor B (XR)

Additional Data

What is PDI? - An Overview of IHE Portable Data for Imaging

Manifest of Importable Data

This section should contain a list, or a link to a list, of all DICOM SOP instances on this disk that can be imported by a Media Importer Actor.

DICOM Viewer

This CD does not contain a DICOM viewer application. If it did, this section would contain a link to that viewer and a discussion of operating system requirements.

README File

For technical details about this disk and contact information for the source, see: README.TXT

Acknowledgements

Disclaimers

The data is for demonstration purposes only and not for diagnostic imaging. ...

←Site Configurable Title

←Site Configurable Generic Information

←Generated Information on CD Content and Links

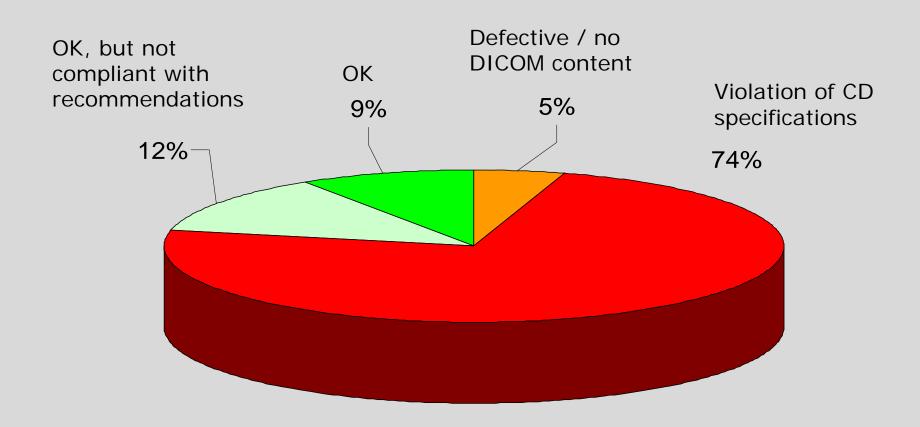
←Application Specific Information

←Information of DICOM VIEWER

←Link to README.TXT

←Other Site Configurable Information

DICOM CD Tests at DRK 2006 (2)



Test results

- almost 80% of the tested "real world" CDs failed!
- this clearly shows that despite all the activities of DICOM and IHE a quality assurance program is really needed

DICOM CD Tests at DRK 2006 (3)

Typical DICOM errors

- DICOM rules for filenames and directory names violated (beginner's mistake!)
- missing/empty required fields in DICOMDIR
- syntax rules for DICOM data types violated
- incorrect transfer syntax for DICOM images (implicit VR)

Typical problems with the DICOM viewer

- required administrator privileges or does not run at all (Windows XP)
- tries to install software components (Java or .NET runtime)
- tries to write in C:\WINDOWS
- cannot display all images on the CD
- often no documentation, no manual
- CD labelling often missing, almost always incomplete
- In summary, most of these problems would be easy to avoid for the software vendor

The Great Aussie CD Challenge (2007)

- Practices invited to present CDs for testing
 - IHE profile and relevant standards (using MESA (US) and Offis (German) tools)
- 33 CDs submitted all failed
 - many still readable, with varying difficulty

What were the problems?

DICOM errors

 Viewer - required administrator rights and/or missing software elements

13 different viewers encountered

Labelling not formally assessed (but poor)

=> Readily fixable

IHE Australia Workshop, Dec 2007

- Wide stakeholder participation
 - referrers, imagers, vendors, regulators, patients
- IHE PDI profile in the Australian context

Local extensions & other requirements

Began work on consensus statement

Harnessing the IHE Process

- "Ready-made" profile and standards
- Engage local vendors, imaging providers & referrers
 - -? Local extensions:

Labelling and storage
Readme.txt mandatory
Greater use of Web content
? Orthopaedic Templating

But need to promote use of the Profile :

Connectathon Exploration of a testing service

IHE Connectathon, July 2008

- Vendors tested products
 - compliance with IHE profiles
 - demonstrate interoperability with other

vendors, equipment

Independent witnesses

Only positive results published

IHE Interoperability Showcase

 Successful vendors demonstrate product (and interoperation) at IHE Showcase

HIC 2008 (Aug 31 – Sept 2), Melbourne

Several successful implementations of PDI

Conformance testing in the field

- Connectathon tests potential of product
 - NOT performance of the item in the field
 - local implementation can change properties

Need independent testing service, eg for CDs
 ? How funded

Supporting the Profile: College Guidelines Inter-Collegiate Working Party

Guidelines for viewing HW, inc. Monitors

Integrating CD into practice workflow

Requirements for generic viewer

Promote specification of IHE compliance

In the Inbox...

 Newer portable media (DVD, SD, USB...)

Archiving: What
 By whom
 Where
 For how long

RANZCR "e-radiology" group

Conclusions

- Image transfer a major current issue in DI
 - fundamentally about interoperability
- Best addressed via the IHE process (& profile)
- IHE process has helped build consensus, and has received referrer support
- Implementation in progress non-trivial
- IHE Process applicable in many other areas (workflow, eHR...)