

Applying NPMA Training in the Field of Mammographic X-Rays

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X-rays are assets that need to be tracked. It is extremely important to associate each X-ray with the name of the patient, date of birth, facility, date of X-ray, and assigned tracking number. After my position in Logistics and Property Management was eliminated a year ago with fifteen years at my company, I was not sure what direction to go in for employment. After healing from foot surgery I went to class and became a Notary Public in the State of North Carolina. It had been a goal of mine for many years, however I had never taken the time to achieve it.

I ended up at The Breast Center in Greensboro, North Carolina since May 2001. This center is newly-established and had only been open for a couple of months prior to my being hired. My duties include transcribing a variety of mammography reports to include ultrasounds, needle localizations and specimens. One doctor who remains at the center full-time and four other doctors who rotate their time at the center dictate these reports.

Another of my duties is hanging the mammography X-rays on a rotating screen system. The X-rays come from other sites as well to be read and are delivered by a courier twice a day. Each group of mammography films come in a folder that has been numerically color coded and contains patient information. When the films are hung, a wet reading sheet is used. The sticker containing patient information is placed on this sheet and it is numbered. After the doctor reads the films, a Birads Code is given to each patient.

For example, Birads 0 means incomplete and additional imaging evaluation is required. Birads 1 is negative. Birads 2 is benign finding, negative. Birads 3 is a probably benign finding with a short interval follow-up recommended. Birads 4 is a suspicious abnormality, biopsy is recommended. Birads 5 is highly suggestive of malignancy, biopsy is indicated.

When an X-ray is taken, the technician assigns an accession number to each patient. The beginning of the number indicates the mammography site where the films were taken, the letters stand for the type of films taken, next comes the last two digits of the year and then an automatically assigned six digit number. It looks something like this: 06-MM-02-000001. MM standing for mammography and US for ultrasound.

This identification number is generated into a system that is accessed by me, when transcribing the report. Each patient has a requisition printed out providing patient name, age, date of birth, gender, account number, priority, room/location, patient's phone number, medical record number, ordering physician, physician phone, referring physician, accession number, exam date and time, admitting diagnosis, admitting date, date and time of entry, the name of the exam, the reason for the exam, and an area for special information and scheduling comments.

The requisitions are bar coded. When the doctor is dictating the information on each patient, the bar code is scanned into the online work list. It is now ready for me to access by patient name by the accession number. Once transcribed, the doctor reviews the report and signs it off in the system as final. Once final, the reports automatically print out at the referring physicians' offices.

Storage of the x-rays is here at our mammography center using the numeric color-coded system previously mentioned. When patient's folders are needed at another site, the courier delivers them.

For our patients the proper control of these documents is a critical component of their care – and could become a matter of life and death for the patient. So if you think that proper property management is unimportant – think about this form of property control. ♦

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