

Beverly and Addison Gilbert Hospitals  
Tips for streamlining orders

Central Scheduling Phone: 866.479.3208 or 978.712.1400

Fax number for paper orders to Central Scheduling 978.712.1419

Epic Providers

Orders are placed in Epic and used for scheduling

Non-Epic Providers

Paper orders are faxed to 978.712.1419

Central Scheduling receives paper orders and the order is transcribed into Epic and scanned into Epic. The order is then ready for scheduling.

Some paper orders, however, have missing information or are not legible. The following are some examples of common issues with paper orders:

- Generic orders, no specific exam noted
- Contrast or non-contrast CT test ordered not correctly
- Missing provider signatures
- Missing diagnosis
- Diagnosis/reason for test does not match ordered exam
- Clinic notes faxed rather than actual provider order for testing
- Referral sent rather than actual provider order
- Screening order faxed but due to diagnosis, patient needs a diagnostic order; a new order is required
- Orders for Holter Monitors missing the length of time 24hr/48hr
- Orders for Zio Patch missing the # of days
- Ultrasound issue: “abdominal pain” pelvic US ordered but abdomen US should be ordered
  - the pelvic US order needs additional reason/diagnosis

**In addition:**

- Clinical questions required at the time of scheduling for low dose lung screening
- Clinical questions required at the time of scheduling for DVT ultrasounds

If an authorization is required, it is required at the time of scheduling or an updated authorization when rescheduling.

CT Scans

Due to the critical shortage in contrast, radiologists will be reviewing and protocoling all CT orders with contrast in an effort to preserve contrast for critical emergent cases such as stroke, GI bleeds, run offs, aortic dissection and PE CTs.

Radiologists will determine:

- scan without contrast
- scan with contrast
- reschedule to scan with contrast at later date
- change to MRI

You can reach a Radiology Administrator by calling 978-816-2380. When ordering a test with contrast at this time, ordering providers may want to check in before calling for an authorization. We can then be sure it is ordered correctly before calling.

### Radiology Tip Sheet CT Exam List

**Head w/o** = trauma, R/O bleed, headache, dizziness, blurred vision

**Head w/o and w/c** = for hx of cancer, mets. (Sometimes clinical of headache is w/o and w/c)

**\*\*\*\*DO NOT SCHEDULE HEAD WITH CONTRAST ONLY\*\*\*\***

**Sinus** = (maxiofacial code) routine always without contrast

**Surgical guidance**= is only done at Danvers for patients having sinus surgery (specialty exam)

**Temporal Bones w/o**= to view the IAC's. This is usually a specialty exam.

**Orbits or Maxillofacial without contrast**= trauma, MVA. R/O fx

**Orbits or Maxillofacial with contrast** = cellulitis, abscess, redness, facial swelling

**CT soft tissue neck** = always with contrast for cellulitis, abscess, redness, facial swelling and lump

**CT soft tissue neck w/o**= only if patient cannot have IV contrast due to labs or allergy

**CT neck**= bone spine neck

**Chest w/o**= F/U nodule (confirmed nodules), cannot have IV contrast due to labs

**Chest w/c** = lymph adenopathy, lung mass, abnormal chest x-ray, any new diagnosis

**\*\*\*\*DO NOT SCHEDULE CHEST W & WO\*\*\*\***

**Chest PE protocol** = always with contrast. Elevated D Dimer, chest pain, SOB (as of 8/22 schedule cta pe study)

**Abd/pel w/o**= Redicat (Baruim based) oral contrast but NO IV for patients that cannot be injected due to renal function or contrast allergy

**Abd/pel w/c** = oral and IV for R/O appy, diverticulitis, abdominal pain, elevated WBC, cancer, colitis

**Kidney stone**= protocol to look for kidney stones, hematuria, flank pain

**Urogram** = (abdomen and pelvis) w/o and w/c IV contrast for blood in urine, evaluate cysts, masses, proteinuria

**CT upper abdomen w/o and w/c** = renal mass, renal cysts adrenal mass (usually urologist order for f/u)

**CT upper abdomen w/c** = pancreatitis, cirrhosis, epigastric pain. Oral and IV contrast

**Enterography**= anemia, Crohn's disease. Prep with Volume and IV contrast- a specialty exam.

#### **All CTA exams are with contrast to look at blood vessels**

Usually a specialty exam: for patients that cannot have MRI's due to metal or pacemakers, etc

**CTA head**= to evaluate for aneurysm, headache.

**CTA neck** = to evaluate for carotid arteries, f/u abnormal ultrasound.

**CTA head/neck**= abnormal MRI, etc.

**CTA chest**= to evaluate large vessels, aneurysm

**CTA abd/pel**= to evaluate aorta

**CTA runoff**= to evaluate lower extremities

- All patients over 50, are a diabetic or have any type of kidney disease and are receiving IV contrast need to have a BUN, creatinine and GFR within 90 days
  - a. If those labs are abnormal, then new labs should be obtained sooner to the patient's appointment to ensure it is safe to give the patient the IV contrast
- Patient's that are allergic to Iodine contrast are to be orally prepped with Redicat prep. This can be picked up in the Radiology department prior to the appointment
  - This is a 2 hour prep that can be done at home
  - One bottle, two hours prior to exam
  - One bottle, one hour prior to exam
- Patient's that are allergic (depending on the severity of the allergy) can be pre-treated with a 12 hour pre-treatment protocol
  - Call CT Department for instructions