

Library Current Awareness Bulletin

Radiology – June 2020

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<https://openathens.nice.org.uk/>



OpenAthens

News

[Is radiology ready for a reboot?](#)

The Society of Radiographers
June 2020

[A brief summary of an online event in which thoughts and experiences were shared in a discussion about restarting imaging and oncology services following the Covid-19 crisis. A link to access a recording of the event is provided.]

[Myth busting: SCoR continues to support sonographers](#)

The Society of Radiographers
June 2020

[An explanation of the changes to the Public Voluntary Register of Sonographers (PVRs).]

[New eLfH sessions for radiographers](#)

The Society of Radiographers
June 2020

[A full online programme created by the National Breast Imaging Academy, in partnership with Health Education England e-Learning for Healthcare is due to launch in the autumn, but many sessions are already available.]

[Opportunities for sonographers and radiographers](#)

The Society of Radiographers
June 2020

[Opportunities are available for experienced sonographers and radiographers to undertake expert witness work. UKAS are recruiting technical assessors and CASE are looking for accreditors.]

Diagnostic Radiology

[Accuracy of lung ultrasonography in the hands of non-imaging specialists to diagnose and assess the severity of community-acquired pneumonia in adults: a systematic review](#)

Strøm, J.J. et al

BMJ Open, vol. 10(6)

June 2020

[The aim was to systematically review the published literature regarding adults with clinical suspicion of pneumonia that compares the accuracy of lung ultrasonography (LUS) performed by non-imaging specialists to other reference standards in diagnosing and evaluating the severity of community-acquired pneumonia. 17 studies were included.]

[Appropriateness of ultrasound imaging for thyroid pathology, the standard of radiology reporting on thyroid nodules and the detection rates of thyroid malignancy: a tertiary centre retrospective audit](#)

Joseph, F.G. et al

Internal Medicine Journal, vol. 50(6) pp. 732-740

June 2020

[Medical records were reviewed to determine the number of inappropriate requests for thyroid ultrasound (US), the quality of radiology reporting for thyroid nodules and the resultant number of thyroid cancers identified. Records provided data on patients who underwent thyroid US imaging and were referred to the Endocrine Department at Gold Coast University Hospital, Queensland, between July 2014 and July 2017. Data for 251 patients were analysed and the final 201 patients who were found to have thyroid nodules were evaluated using descriptive statistics.]

[Artificial intelligence for interpretation of segments of whole body MRI in CNO: pilot study comparing radiologists versus machine learning algorithm](#)

Bhat, C.S. et al

Pediatric Rheumatology Online Journal, vol. 18(1)

June 2020

[Whole body MRI of patients under the age of 16 diagnosed with CNO and treated with pamidronate at a tertiary referral paediatric hospital in United Kingdom between 2005 and 2017 were reviewed. Pre and post pamidronate images of the commonest sites of involvement (distal femur and proximal tibia) were manually selected (n = 45). A machine learning algorithm was developed and tested to assess treatment effectiveness by comparing pre and post pamidronate scans. The results of this algorithm were compared with the results of a panel of radiologists (ground truth).]

[Can diagnostic imaging help improve elder abuse detection?](#)

Rohringer, T.J. et al

The British Journal of Radiology, vol. 93(1110)

June 2020

[A thorough review of the literature using Medline to describe the current knowledge on injury patterns and injury findings seen in elder abuse, as well as barriers to and recommendations for an increased role of diagnostic imaging in elder abuse detection.]

[Radiologic discrepancies in diagnosis of fractures in a Dutch teaching emergency department: a retrospective analysis](#)

Mattijssen-Horstink, L. et al

Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine, vol. 28(1)

May 2020

[A single-centre retrospective analysis of all missed fractures in a general teaching hospital from 2012 to 2017 was performed to determine the rate and nature of radiographic discrepancies between ED treating physicians, radiologists and trauma/orthopaedic surgeons and the clinical consequences of delayed diagnosis. Data regarding missed fractures were provided by the hospital's complication list and related database. Additional data were retrieved from the electronic medical records as required for the study.]

[Radiological management of COVID-19: structure your diagnostic path to guarantee a safe path](#)

Stramare, R. et al

La Radiologia Medica

June 2020

[This article provides an overview of how one imaging department at an Italian hospital has optimised the diagnostic pathway during the COVID-19 outbreak. A mobile CT scanner in a truck was rented and became operative for all patients with a confirmed diagnosis of COVID-19 and another CT was assigned for all suspected cases. The authors report that during the outbreak, the radiological workflow was never interrupted and despite the national lockdown only a 29.3% decrease of CT scans occurred compared to the previous year.]

[What is the validity of self-reported fractures?](#)

Baleanu, F. et al

Bone Reports, vol. 12

June 2020

[The authors assessed the validity of self-reported fractures, over a median follow-up period of 6.2 years, in a population-based cohort of 3,560 postmenopausal women, aged 60-85 years, from the Fracture Risk Brussels Epidemiological Enquiry (FRISBEE) study. A self-reported fracture was considered as a true positive if it was validated by written reliable medical reports (radiographs, CT scans or surgical report). False positives fractures were considered to be those for which the radiology report indicated that there was no fracture at the reported site.]

Education and Training

[Coronavirus disease 2019 \(COVID-19\) and radiology education-strategies for survival](#)

Slanetz, P.J. et al

Journal of the American College of Radiology, vol. 17(6) pp. 743-745

June 2020

[This article suggests ways that radiology staff can continue their learning through innovative approaches during the COVID-19 pandemic.]

[Effectiveness of the clinical decision support tool ESR eGUIDE for teaching medical students the appropriate selection of imaging tests: randomized cross-over evaluation](#)

Diekhoff, T. et al

European Radiology

May 2020

[This study aimed to evaluate the ESR eGUIDE—the European Society of Radiology (ESR) e-Learning tool for appropriate use of diagnostic imaging modalities—for learning purposes in different clinical scenarios. Forty clinical scenarios were developed in which at least one imaging modality was clinically most appropriate, and the scenarios were divided into sets 1 and 2. These sets were provided to medical students randomly assigned to group A or B to select the most appropriate imaging test for each scenario.]

[Evaluating the principles of radiation protection in diagnostic radiologic examinations: collimation, exposure factors and use of protective equipment for the patients and their companions](#)

Farzanegan, Z. et al

Journal of Medical Radiation Sciences, vol. 67(2) pp. 119-127

June 2020

[This cross-sectional study aimed to evaluate the observance of the principles of radiation protection in radiographic examinations with emphasis on field size collimation, suitability of exposure factors and the use of protective equipment for the patients and their companions. Two radiography students on their final year of study at Ahvaz Jundishapur University of Medical Sciences observed 100 radiographic examinations from the imaging departments of five educational hospitals.]

[Trainee and attending perspectives on remote radiology readouts in the era of the COVID-19 pandemic](#)

Matalon, S. A. et al

Academic Radiology

May 2020

[The authors describe how a large academic radiology department achieved socially distant “remote readouts”. They provide trainee and attending perspectives on this early experience, and propose ways by which “remote readouts” can be used effectively by training programs beyond COVID-19.]

[Virtual read-out: radiology education for the 21st century during the COVID-19 pandemic](#)

Li, C. et al

Academic Radiology, vol. 27(6)

June 2020

[The authors present the novel use of video-conferencing in virtual radiology read-outs during the COVID-19 pandemic. According to the authors, knowledge of key aspects of set-up, implementation, and possible pitfalls of video-conferencing technology in the application of virtual read-outs can help to improve the educational experience of radiology trainees and promote potential future distance learning and collaboration.]

Interventional Radiology

[Interventional radiology and COVID-19: evidence-based measures to limit transmission](#)

Chandy, P.E. et al

Diagnostic and Interventional Radiology, vol. 26(3) pp. 236-240

May 2020

[This article suggests various infection control measures for implementation by interventional departments during the COVID-19 pandemic. It considers the control of patient and staff movement, cleaning procedures, segregation of patients, and segregation of staff.]

[Interventional radiology procedures for COVID-19 patients: how we do it](#)

Too, C.W. et al

Cardiovascular and Interventional Radiology, vol. 43(6) pp. 827-836

June 2020

[The authors detail their approach on how to perform interventional procedures for COVID-19 patients at the bedside, in the isolation room, and with the patient transferred to the interventional radiology centre.]

[Preparing IR for COVID-19: The Singapore Experience](#)

Gogna, A. et al

Journal of Vascular and Interventional Radiology, vol. 31(6) pp. 869-875

June 2020

[This article describes special measures undertaken for interventional radiology staff in Australia during the current coronavirus disease 2019 (COVID-19) pandemic. The authors recognise that each interventional radiology service around the world faces unique challenges, but they explain that the principles outlined in this article will be useful when designing or strengthening individual practices and integrating them within wider hospital and national measures.]

[Radiation therapy during the COVID-19 pandemic: experience from Beijing, China](#)

Wang, W. et al

In Vivo, vol. 34(3)

June 2020

[This article explains how the radiotherapy department at Peking Union Medical College (a comprehensive hospital in Beijing) has adapted and continued to treat patients during the COVID-19 pandemic.]

[Radiotherapy during COVID-19 pandemic. How to create a NO fly zone: a Northern Italy experience](#)

Montesi, G. et al

La Radiologia Medica, vol. 125(6) p. 600-603

June 2020

[This article describes how a radiotherapy department in an Italian hospital has utilised telephonic screening and telephonic triage to assess patients remotely and reduce contacts and infections.]

Patient Experience

[Rescheduling nonurgent care in radiology: Implementation during the Coronavirus disease 2019 \(COVID-19\) pandemic](#)

Vagal, A. et al

Journal of the American College of Radiology

May 2020

[This article reports on the authors' experience of rescheduling non-urgent imaging and procedures during the pandemic at their academic medical centre in Cincinnati which has an annual imaging volume of 430,000 studies.]

[Touch me not: safe distancing in radiology during coronavirus disease 2019 \(COVID-19\)](#)

Chen, R.C. et al

Journal of the American College of Radiology, vol. 17(6) pp. 739-742

June 2020

[This article describes the measures and early experiences with safe distancing in a radiology service at a 1,700-bed hospital in Singapore with a radiological service strength of over 600.]

Technology

[Does health information technology improve acknowledgement of radiology results for discharged Emergency Department patients? A before and after study](#)

Li, J. et al

BMC Medical Informatics and Decision Making, vol. 20

June 2020

[This study aimed to measure changes in the proportion of acknowledged radiology reports pre and post introduction of an electronic result acknowledgement system and to determine the proportion of reports with abnormal results, including clinically significant abnormal results requiring follow-up action. The study was conducted in the emergency department of a 450-bed metropolitan teaching hospital in Australia. All radiology reports for discharged patients for a one-month period before and after implementation of the electronic result acknowledgement system were reviewed to determine; i) those that reported abnormal results; ii) evidence of test result acknowledgement. All unacknowledged radiology results with an abnormal finding were assessed by an independent panel of two senior emergency physicians for clinical significance.]

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 01535 294412

Airedale General Hospital – Location B11