

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



HOW YOU CAN SLOW THE SPREAD OF COVID-19 Take care of others by taking care of yourself.

Wash your hands, don't touch your face, and stay home if you are sick.

Stay at Home and Physically Distance

Stay at home whenever you can. Maintain 2 meters distance from those outside of your household.

Medical Imaging Discussion Guide for Referring Practitioners April 29, 2020

In response to the acute phase of the COVID-19 pandemic, B.C. community clinics and health authorities have postponed all non-urgent medical imaging services.

Medical imaging (MI) exams will only be performed in cases where there is urgent or emergent clinical need. Urgent or emergent services are those which are necessary to diagnose and/or treat disease that is immediately threatening to a patient's health or would have a significant impact to future health if not performed as soon as possible. Referrals for non-urgent or non-emergent MI exams will be triaged and prioritized based on needs.

For patients being imaged during the pandemic, all provincial MI departments have modified their workflows in accordance with the B.C. Provincial Heath Officer's recommendations to reduce COVID-19 exposure risk to safe levels.

The following FAQ has been developed by the B.C. Provincial Medical Imaging Advisory Committee (MIAC) to help guide referring physicians ordering MI examinations:

1. What imaging examinations and modalities are impacted?

All non-urgent acute and non-urgent routine follow-up imaging exams, e.g. surveillance of arthritis, osteoporosis, chronic pain, pre-op imaging for elective surgery, across all modalities (X-rays, CT, MR, ultrasounds, PET and nuclear medicine) are being postponed until further notice in order to prioritize resources for the COVID-19 crisis.

2. What urgent or emergent imaging examinations can be requested?

Any imaging that is necessary to diagnose or treat conditions that are imminently life or limb threatening or would affect immediate future management.

All imaging requisitions will undergo additional triaging by the relevant MI departments dependant on service availability at each site. For triaging, clinical judgment will always the final arbitrator; this will ensure that any patient who requires urgent imaging will receive it.

While it is always best practice to include clear, pertinent clinical history on the requisition, please be particularly diligent to include as much detail as possible and suggest the priority you feel is required as this will assist in the triaging of examinations and interpretation of images.







If in doubt, radiologists are ready to provide consultation in cases where there is uncertainty regarding urgency either at the local site or by utilizing the <u>RACE</u> (Rapid Access to Consultative Expertise) line (1-877-696-2131) or RACEapp+.

3. Should I still submit requests for non-urgent or non-emergent imaging examinations during the outbreak response?

Yes. MI facilities will accept referrals for non-urgent, planned investigations rather than risk a request not being entered into the system and potentially "fall through the cracks." These referrals will be prioritized based on need and perceived urgency. As previously stated, MI requisitions should include all relevant clinical information and the suggested priority, to assist in both triaging the request and interpretation.

With respect to walk-in referrals, please only order at this time if the clinical situation truly dictates urgent. Urgent referrals should be directed to sites based on existing processes.

If in doubt, radiologists are ready to provide consultation in cases where there is uncertainty regarding urgency either at the local site (contacts may be found on Pathways) or by utilizing the RACE line (1-877-696-2131) or RACE app+. Please note RACE is not involve in the scheduling of imaging exams and should not be used to ask questions about a patient's booking.

4. Can imaging requests that do not require appointments, for example X-Ray, still be ordered?

Yes. However, requests should be reserved for emergent or urgent situations where the results may change patient management on an urgent basis. Please have your office call the MI Department in advance to confirm that they are accepting urgent walk-in patients or if an appointment booking option is available. Walk-in patients arriving at a MI Department will be triaged on site for both infection control and assessment of urgency of the request.

5. Should I order imaging to help diagnose COVID-19?

No. Imaging (typically with CXR) should not be used in the diagnosis of COVID-19 infection. The role of imaging should be reserved to help guide management decisions in patients already diagnosed with COVID-19. This will mainly be done in the hospital setting with admitted patients.

6. Will the referring practitioner be notified regarding which patients have imaging tests that have been postponed?

MI Departments are working towards notifying referring practitioners which exams have been postponed; this is dependent on available resources and remains a work in progress. Notifications will increase as options for batch notifications to referring practitioners regarding postponed imaging are being investigated and will be implemented when time allows.

MI Departments have been and will continue notifying impacted patients directly and will continue to monitor the status of appointments as the COVID-19 situation unfolds. All MI referrals, both before and after March 18, are now being triaged by your MI colleagues.

7. What do I tell my patients who has concerns about their postponement or whose health condition changes?

At this time, it is difficult to predict how long postponements may last and when examinations will occur.







Patients whose appointments have been postponed are being notified and advised by MI Departments to contact their referring practitioner if their health conditions change. Based on clinical judgment, if you feel the urgency of a postponed exam needs escalation, please contact your local MI Department and speak with a radiologist (contacts may be found on Pathways).

If in doubt, radiologists are ready to provide consultation in cases where there is uncertainty regarding urgency by utilizing the <u>RACE</u> line (1-877-696-2131) or <u>RACEapp+</u>. Please note RACE is not involved in the scheduling of imaging exams and should not be used to ask questions about a patient's booking.

8. How will I obtain results for tests that are performed during the outbreak?

Imaging exams, once undertaken, will be performed and reported in the usual fashion.

9. Are there any other resources or links that can help me?

- Pathways for contacts to your local MI Department
- RACE line
- BC Centre for Disease Control
- Public Health Agency of Canada
- Canadian Association of Radiologists
- Guidelines and Protocols Advisory Committee BC Guideline's Ultrasound Prioritization

These outbreak response measures are being taken to:

- Contain the spread of COVID-19, protecting both patients and staff from unnecessary infection exposure and promote the practice of physical distancing.
- Conserve resources and supplies (Health Human Resources and Personal Protective Equipment) for cases that need them the most and ensure sustainability of supplies.
- Alleviate pressures on the facilities and system.
- Support BC patients and physicians.

MIAC membership consists of clinical and academic radiologists, Health Authority representatives, Ministry of Health representatives, primary care practitioners, a BC College of Physicians and Surgeons representative, and others who have historically worked together to assist in setting provincial imaging standards and allocating resources.

It is important to note that MIAC will continue to meet regularly as the crisis evolves and may modify these recommendations. You will be advised of changes when they occur. We appreciate your dedication and collaboration as we work together for our patients in these challenging circumstances.

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