Office Based Ultrasound
Obstacles to Getting Started

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OBJECTIVES

• Describe the most common obstacles experienced by both endocrine surgeons and head and neck surgeons interested in implementing office based ultrasound

• Recognize the nature of obstacles

• Provide resources for dealing with these obstacles

Ten Common Obstacles preventing you from getting started

1. Assessing the Need for Ultrasound in your office practice
2. Making a decision
3. Time
4. Training
5. Purchasing equipment
6. Documentation
7. Credentialing
8. Reimbursement
9. Competition and Collaboration
10. Continued Training and Updating Your Equipment
OVERCOMING OBSTACLE #1
ASSESSING THE NEED FOR ULTRASOUND IN YOUR OFFICE

• 3 main factors appear to be an issue for most surgeons:
  • Surgeons in general are highly motivated to provide best possible care for their patients
    • This technology has been shown to aid in diagnosis and treatment in patients with thyroid and parathyroid diseases.
  • Current technologies are amenable to being office based
    • Compact
    • Affordable
    • User friendly
  • Surgeon performed ultrasound appears to be useful as a cost containment tool, saving time and money

OVERCOMING OBSTACLE #1
ASSESSING THE NEED FOR ULTRASOUND IN YOUR OFFICE

• Why are you needing ultrasound in your office?
  • Do you need ultrasound for a comprehensive part of your examination of the head and neck?
    • Considerable literature on using ultrasound as an extension of the physical exam
  • Do you need ultrasound for interventions such as aspiration of thyroid, cyst, or lymph nodes?
    • 31% of practicing endocrinologist use ultrasound routinely for biopsy of thyroid nodules

OVERCOMING OBSTACLE #1
ASSESSING THE NEED FOR ULTRASOUND IN YOUR OFFICE

• Why are you needing ultrasound in your office?
  • Do you think surgeon performed ultrasound will change your diagnostic or therapeutic outcomes?
    • Surgeon performed ultrasound influenced the management of 50% of patients who were undergoing neck exploration for diseases of the thyroid and parathyroid glands*
    • Non palpable thyroid nodules were found and aspirated
    • Contralateral non palpable thyroid nodules were found
    • Non palpable metastatic lymph nodes
    • Identified co-existing thyroid nodules needing intervention in patients being evaluated for parathyroid disease
    • Found abnormal parathyroid glands
    • Found sites of persistent disease in patients undergoing reexploration for hyperparathyroidism

*Solorzano et al., The American Surgeon, July 2004
Milas et al., Surgery, December 2005
OVERCOMING OBSTACLE #1
ASSESSING THE NEED FOR ULTRASOUND IN YOUR OFFICE

• Why are you needing ultrasound in your office?
  • Is your ultrasound examination superior to the ultrasound examination performed by your radiology colleagues?
  • Kairys et al., World Journal of Surgery, 2006
• Do you need ultrasound for patient/surgeon convenience
  • Is the wait time too long for examinations performed by radiologists?
• Do you want to keep up with new technology
• Do you want to use it as a teaching tool
• Do you want to increase billing?

OVERCOMING OBSTACLE #2
MAKING A DECISION
“I NEED ULTRASOUND IN THE OFFICE”

• Believe in yourself and your abilities
• Be willing to put in extra time and effort
• Accept higher initial cost

OVERCOMING OBSTACLE #3
TIME

• Willingness to put in extra time and effort
  • Training yourself
  • Credentialing
  • Testing equipment
  • Purchasing equipment
  • Documentation, labelling images
  • Billing
• Tolerate interest from others interested in your new technology
  • Endocrinologists
  • Surgeons
  • Surgical residents/Endocrine Fellows
• Increase time spent with each patient, especially at first
• Instruct your assistants accordingly
OVERCOMING OBSTACLE #4
TRAINING

• Initial courses should be CD ROM based course offered by the ACS
• Courses offered by specialty organizations:
  • American Association of Endocrine Surgeons
  • American Thyroid Association
  • American Association of Clinical Endocrinology
  • Head and Neck Society
  • Endocrine Society
• Free courses offered by some ultrasound companies in major cities or at academic centers
• Hands on training in ACS and other courses
• Hands on training with surgical/radiology colleagues
• Visit with colleagues who are friendly and knowledgeable

OVERCOMING OBSTACLE #5
PURCHASING EQUIPMENT

• Things to look for when purchasing the first ultrasound for your office:
  • Image quality
  • Cost
  • Size
  • Ease of Use
  • Portability
  • Ability to accommodate different probes
  • Durability
  • Reliability of service
  • Warranties
  • Consider used equipment

• Try out different equipment
  • Try out 3-5 pieces of equipment at meetings/courses
  • Inquire about what other surgeons have bought
  • Common names include: Aloka, B&K Medical, GE, Phillips, Sonosite
  • What have they liked or disliked about their purchases?
  • Try out 2-4 pieces of equipment in your office
  • Compare your top two choices with radiology equipment in your own office setting
  • Practice on patients with specific known problems in your office
  • Get the opinion of your radiology colleagues
  • Ultimately will have to rely on your own needs
OVERCOMING OBSTACLE #6
DOCUMENTATION OF IMAGES

• Documentation and communication of findings:
  • Hand written documentation
  • Typed or dictated note indicating findings sent to primary care and referring physician
  • Saving Images for future access
  • Keep hard copies of pictures in chart, attached to report
  • Keep saved hard drive images backed up in computer for future retrieval
  • Theoretically images can be uploaded onto your hospital’s PACS system

• Medicolegal documentation:
  • Adequate documentation of your imaging
  • Documentation of service/calibration for your equipment

OVERCOMING OBSTACLE #8
CREDENTIALING

• Credentialing required by hospital for performing services:
  • Hospital dependent
  • Somewhat dependent on who performs ultrasound in your hospital and what precedent has been set
  • General Surgeons/Trauma Surgeons/Hepatobiliary surgeons/Breast surgeons/Urologists/Ob/Gyn/Anesthesiologist
  • Obtain as much information as possible upfront from your practice/hospital management
  • Go Solo if you have strong credentials
OVERCOMING OBSTACLE #8
CREDENTIALING
- Credentialing by insurance companies
  - Training course certificates
    - Detailed description of training: Residency, Basic Courses, Advanced Courses, Instructor Courses
    - How many hours of hands on training
  - Documentation of competence
    - Letters verifying your competence
    - Chief of radiology
    - Chief of ultrasound in your hospital
    - Community endocrinologist
    - Number of ultrasound performed, with clinical correlation
    - Keep log of first 50-200 cases, with image documentation, cytology, final pathologic findings
  - Some require documentation/accreditation of competence by outside organizations such as American Institute of Ultrasound in Medicine (AIUM)

OVERCOMING OBSTACLE #7
REIMBURSEMENT
INSURANCE COMPANIES
- Primary goal is to assure you are competent to render services
- Secondary goal is to deny payment for services you provide

PRACTITIONER
- Primary goal is to provide optimal patient care
- Pay for costs you incur for your time, equipment and documentation

OVERCOMING OBSTACLE #7
REIMBURSEMENT
<table>
<thead>
<tr>
<th>Common codes</th>
<th>Range of payments</th>
</tr>
</thead>
<tbody>
<tr>
<td>10022 - FNA Aspiration with US guidance</td>
<td>$33-722 (bilateral)</td>
</tr>
<tr>
<td>76936 US Head and Neck with image documentation</td>
<td>$21-331</td>
</tr>
<tr>
<td>76942 US guidance for needle placement</td>
<td>$25-213</td>
</tr>
</tbody>
</table>

- Reimbursement rates vary by insurance/state/your attention to detail etc…
- My practice average in one year of service
  - 352 billed events = 66,000 K (2006-2007)
OVERCOMING OBSTACLE #9
COMPETITION VERSUS COLLABORATION
• Primarily you will find yourself either in a collaborative or competitive environment with radiologist/endocrinologist/surgical colleagues
• Where the balance lies will depend on
  • Hospital/Clinic setting
  • Your Colleagues
  • Area of clinical/academic interest
  • Volume of patients
  • Persistence

OVERCOMING OBSTACLE #10
CONTINUED TRAINING AND UPDATING YOUR EQUIPMENT
• Continued training is important to you and your patients
  • Allow yourself feedback from patients/your colleagues
  • Additional more advanced courses
  • Teaching in hospital and out of hospital setting
  • Teaching at the ACS and other societies
  • No clear cut rules updating your equipment, use common sense
  • Cleaning and maintaining equipment at standards will allow longevity of equipment
  • Multiple users likely more complicated
  • Consider trade in for an updated model if necessary

Overcoming Ten Common Obstacles Preventing you from getting started
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