Health

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STEP FORWARD

STATDX DISCOVERY INSIGHTS

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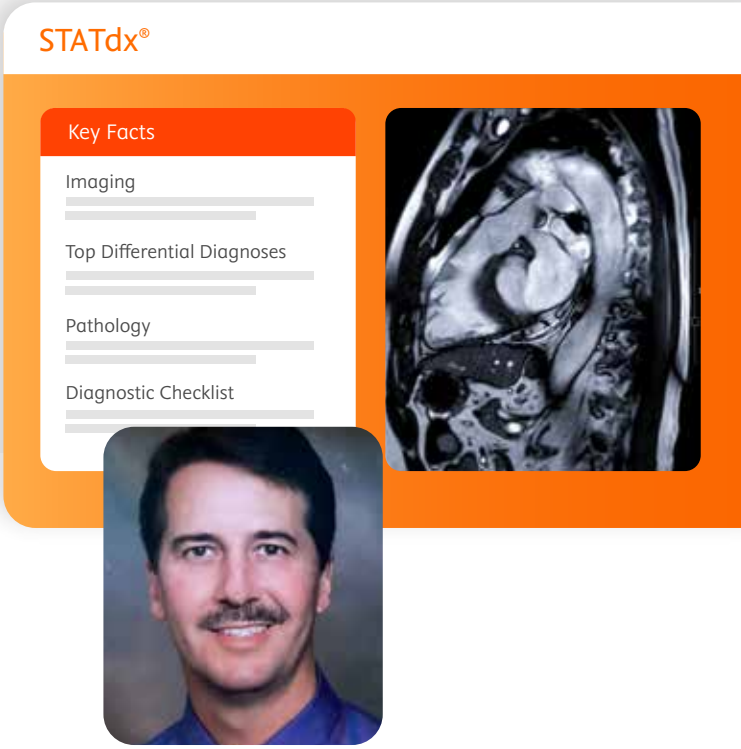

I am a hospital-based radiologist with Prisma Health based out of Greenville, South Carolina, USA. There are more than 90 radiologists in this busy hybrid private practice/academic structure. I trained in diagnostic radiology at Wake Forest University and have been in hospital practice for nearly 33 years. I am a general radiologist with additional expertise in mammography.

What problems were you attempting to solve when you started using STATdx?

I first stumbled onto STATdx about seven years ago when our practice purchased an institutional subscription. I used STATdx to help me understand the findings of an abnormal pelvic ultrasound examination, one in which the uterine line was partially bifurcated. I immediately found a timely discussion of Mullerian duct anomalies and the proper terminology to use in describing and categorizing the findings.

I was struck by the excellent organization of subjects presented by the program, and I was very impressed by the many well-captioned images to reinforce the concepts presented.

From your point of view, what are the biggest benefits you found in using STATdx in your day to day routine?

I like to treat my cases as a medical form of detective work. While I do rely on the printed books in my radiology library to investigate and review key findings on a perplexing study to read, I have shifted much more frequently to relying exclusively on STATdx for that task. STATdx is like having a thousand radiology reference books at your fingertips...and unlike printed books, the topics of STATdx are updated regularly to maintain cutting-edge reporting skills.

When I review a case, I study the EMR (electronic medical record) in detail to ascertain the relevant lab values, surgical history, medical history, findings at physical exam, and chief complaint. I find the clinical section for each diagnosis in STATdx to be invaluable in helping me understand how to synthesize all the available data to develop my differential diagnosis.

Also, instead of cluttering my desktop with frequently referenced classification systems—like those used to grade abdominal organ trauma, the significance of thyroid nodules, the classification of ankle fractures, and many more—I can just click on STATdx and recover that information instantly. This program frees up my mind by decluttering it with all the myriad classification systems that would otherwise have to be committed to rote memory. This freedom allows me to concentrate on the case at hand with greater effectiveness.

"STATdx is like having a thousand radiology reference books at your fingertips...and unlike printed books, the topics of STATdx are updated regularly"

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How do you use STATdx in your day-to-day workflow?

I rely on STATdx to assist me in several specific categories of cases. For example, the detailed explanations of the many types of chronic interstitial lung disease are elegantly explained in STATdx. Each entry includes not only the pertinent findings but also a differential diagnosis with specific findings that might increase or decrease the likelihood of a specific disease entity. I also rely on STATdx to help me with pediatric ultrasound interpretations; I am not a pediatric fellowship-trained radiologist, but I have to read pediatric studies quite often. STATdx delivers helpful interpretative guidelines and pearls to assist me in giving my patients the very best possible care. I also rely on STATdx for a host of other disease categories: characterization of liver masses, pancreatic masses, ovarian cysts, erosive arthritis, inflammatory bowel disease...the list goes on.

During the COVID-19 pandemic, when we were seeing large numbers of CT chest exams on afflicted patients, the regular updating of the STATdx data set was instrumental to me in learning about and applying the key radiologic concepts associated with this new viral disease.

I also use the handy CME modules to gain much-needed CME credits as I work. I have found this feature to be very easy to use, and the CME hours accumulate very quickly by this method. Our practice mandates a minimum number of CME hours earned per year, and STATdx helps me meet that requirement without having to spend extra time, money, and travel to attend radiology meetings.

If you had a colleague that was considering STATdx, what would you tell them?

I would tell my colleague that using STATdx is a complete no-brainer. It is an easy-to-use, well-organized, comprehensive radiology resource that makes my reports better, more accurate, and more useful to the referring clinicians. STATdx also conveniently satisfies my innate curiosity about the non-radiological aspects of almost every common disease by describing the pathological, laboratory, and clinical findings. This multi-specialty approach is very useful when synthesizing all available data to formulate a meaningful report and a differential diagnosis based on sound logic and informed reason.

The CME feature is very attractive and makes attaining the threshold goal of earned CMEs/year quite easy. I would certainly point this out to my colleague.

I would also highlight the cross-referencing among articles that allows the user to click on a highlighted disease to take the user to a dedicated page for that disease. I have learned much by clicking my way through several search entries, perusing the many captioned images, and applying these data to my thought process in developing a quality radiology report.

In short, given the unprecedented growth in imaging use, the increasing complexity of medical care in every field, the greater emphasis upon radiologist productivity, and the inescapable and worsening crunch in radiology manpower, any tool that can both shorten the time to research a complex case AND improve the quality of the final report rendered is a benevolent weapon that should be in the quiver of every radiologist.

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