Quality Improvement Conference: Radiology Review of Missed Cases

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The Quality Improvement (QI) Conference was created in place of the common “Morbidity and Mortality” conference, which is not easily applicable to radiology. The common goal of the QI Conference is to discuss cases that contain radiographic-diagnostic errors that could lead to unexpected morbidity, mortality, or suspected medical error. To minimize stigma, cases were presented by the senior resident involved, and attending physicians were not invited to the conference. The Quality Improvement Conference has been active for approximately 30 months. The participating residents were surveyed 18 months after QI conference inception to gauge efficacy. Based on the survey results, the conference was shown to overall be beneficial for education and future call, along with possible benefits in patient care.

**METHODS**

**QI Conferences:**
- Monthly one-hour conferences led by senior residents.
- Attending physicians were not present at the conference.
- The target audience was first- and second-year radiology residents, given the obvious additional benefit for call preparation.
- Senior residents used Primordial software to compile and present their missed cases.
- Presenting one’s own misses created a non-punitive environment.
- Emphasis placed on cases demonstrating common pitfalls in search pattern, diagnostic mimics, and diagnoses commonly encountered during call hours.
- Pertinent information including history, images/sequences, description of error type, follow-up of care, and learning points were presented with each case.
- Cases were presented in varying styles including “show-and-tell” and “hot seat.”

**Data collection:**
- After 18 months, participants were polled to assess perceived QI conference utility using both open ended and dichotomous questions. Using Survey Monkey ensured anonymity.
- Question 1: Are the QI conferences beneficial?
- Question 2: Do you think they improved patient care?
- Question 3: How could the conferences be improved?
- Question 4: What types of presentations worked the best?
- Question 5: Do you think the time and frequency needs to be changed?
- Question 6: Do you have comments or suggestions for next year?

**RESULTS**

8 of the 11 regular attendees responded to the survey, of whom 100% felt the QI conference was beneficial AND improved patient care. Junior residents felt the conferences enhanced their comprehensive educational experience and helped them identify their own areas of weakness. Future evaluation would be needed to objectively demonstrate a possible decrease in resident on-call misses.

**REFERENCES**