

Emergency Ultrasound Discrepancy Policy

Purpose: To formalize the mechanism for reporting discrepancies and incidental suspicious findings (ISF) related to the Emergency Ultrasound Quality Assurance (EUS-QA) process . This policy is the accepted procedure even if the patient has been discharged, is still within the ED or admitted at the time the discrepancy is discovered.

Definition: For the purposes of this policy, a “*discrepancy*” is a finding, reading, impression or diagnosis made on the basis of an emergency ultrasound study that is at variance with the initial interpretation rendered by the credentialed sonographer.

“*Variance*” is defined as an imaging finding discovered by the reviewer that requires additional imaging, additional clinical evaluation, treatment or follow up.

An “*incidental suspicious finding*” (ISF) is defined as an abnormality discovered by the reviewer that is out of the scope of the limited emergency ultrasound exam but may pose harm for the patient’s short- or long-term health and requires additional comprehensive imaging.

Policy: Discrepancies or ISFs discovered through the EUS-QA process all require formal follow up if no comprehensive confirmatory study is obtained during the same emergency department encounter.

Procedure: The EUS reviewer will contact the MD or ED LIP responsible for the necessary follow-up. The EUS reviewer will complete *verbal* MD to MD/LIP communication.

Date of last review: 3/19/19

Division of Emergency Ultrasound