

University of Groningen

Elevate value in neck ultrasonography to a next level

Kasalak, Ömer; Yakar, Derya; Dierckx, Rudi A J O; Kwee, Thomas C

Published in:
Clinical imaging

DOI:
[10.1016/j.clinimag.2021.11.028](https://doi.org/10.1016/j.clinimag.2021.11.028)

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

Document Version
Version created as part of publication process; publisher's layout; not normally made publicly available

Publication date:
2022

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):

Kasalak, Ö., Yakar, D., Dierckx, R. A. J. O., & Kwee, T. C. (2022). Elevate value in neck ultrasonography to a next level. *Clinical imaging*, 190. <https://doi.org/10.1016/j.clinimag.2021.11.028>

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: <https://www.rug.nl/library/open-access/self-archiving-pure/taverne-amendment>.

Take-down policy

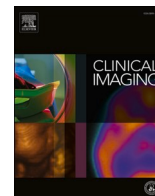
If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Downloaded from the University of Groningen/UMCG research database (Pure): <http://www.rug.nl/research/portal>. For technical reasons the number of authors shown on this cover page is limited to 10 maximum.



Contents lists available at ScienceDirect

Clinical Imaging

journal homepage: www.elsevier.com/locate/clinimag

Patients & Practice, Policy & Education

Elevate value in neck ultrasonography to a next level

Ömer Kasalak^{*}, Derya Yakar, Rudi A.J.O. Dierckx, Thomas C. Kwee*Medical Imaging Center, Department of Radiology, Nuclear Medicine and Molecular Imaging, University of Groningen, University Medical Center Groningen, the Netherlands*

ARTICLE INFO

Keywords:

Ultrasound head and neck

We thank the authors for submitting their letter showing interest in our article “Radiologist-patient consultation of imaging findings after neck ultrasonography”.¹ Thanks to technological advances, proven value in countless settings, and increased availability of medical imaging to healthcare providers, the specialty of radiology has moved to the center of clinical medicine. Not surprisingly, the number of medical imaging procedures has increased considerably over the years,² and this also applies to the complexity of many individual imaging examinations.³ However, the radiologist workforce has not experienced a similar growth, which can be attributed to declining medical imaging reimbursements.⁴ Clinical productivity (i.e. the number of examinations that are performed and reported) is still one of the main motives for radiology departments and hospitals because it determines the amount of income. However, this contradicts the concept of value-based healthcare, which incentivizes healthcare professionals to focus on the quality rather than the quantity of medical services provided.⁵

In our study, we were able to show that a rather small effort (i.e. informing patients of their neck ultrasonography findings) decreases patient anxiety, is desired by most patients, and does not significantly increase total examination time when a radiologist is also the one who performs the ultrasonography.¹ As correctly pointed out by the authors of the letter, this practice increases the visibility of the radiologist and adds humanism to patient care. It can also be rewarding to the radiologist to be of direct significance to the patient, rather than treating the examination with the person that is being examined like a product on an assembly line. We also agree with the authors who submitted their letter to the editors that further research is needed into how the communication with the patient can be optimized, and how such a radiologist-patient communication may perhaps replace imaging reports that

patients can read online but that may be misunderstood and cause anxiety when not explained by a physician. Another important topic that needs further investigation is whether or not some patients can skip their consultation with their referring physician after a negative neck US examination, in particular when negative imaging findings would imply no further diagnostics or treatment. Such a concept would both add value and lower costs, and would elevate value-based radiology in this context to a next level.

Funding

None.

Declaration of competing interest

None (all authors).

References

1. Kasalak Ö, Yakar D, Dierckx RAJO, Kwee TC. Radiologist-patient consultation of imaging findings after neck ultrasonography: an opportunity to practice value-based radiology. *Clin Imaging* 2021 Oct;12(81):87–91.
2. Smith-Bindman R, Kwan ML, Marlow EC, et al. Trends in use of medical imaging in US health care systems and in Ontario, Canada, 2000–2016. *JAMA* 2019;322:84356.
3. McDonald RJ, Schwartz KM, Eckel LJ, et al. The effects of changes in utilization and technological advancements of cross-sectional imaging on radiologist workload. *Acad Radiol* 2015;22:1191–8.
4. Jha S. Navigating the paradox of scarcity—the case for physician extenders. *J Am Coll Radiol* 2021;18:148–50.
5. Porter ME. A strategy for health care reform—toward a value-based system. *N Engl J Med* 2009;361:109–12.

^{*} Corresponding author at: Department of Radiology, Nuclear Medicine and Molecular Imaging, University of Groningen, University Medical Center Groningen, Hanzeplein 1, P.O. Box 30.001, 9700 RB Groningen, the Netherlands.

E-mail address: o.kasalak@umcg.nl (Ö. Kasalak).

<https://doi.org/10.1016/j.clinimag.2021.11.028>

Received 23 November 2021; Accepted 27 November 2021

0899-7071/© 2021 The Authors. Published by Elsevier Inc. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).