INTRODUCTION
Radiological examinations performed in SingHealth Polyclinics (SHP) are reported by radiologists in Singapore General Hospital (SGH). Abnormal reports (Category 4) that are not immediately life-threatening but with significant morbidity/mortality if not treated appropriately are flagged as ‘Further Action and Early Intervention Required (FAEIR)’ in RIS. Report notification is performed by SGH Radiology Report Notification Team to SHP for follow up. However the manual notification process is inefficient and not robust, with multiple gaps which could potentially lead to patients’ care and overall outcome being adversely impacted due to cases not being followed up appropriately.

OBJECTIVE
To review and replace the manual process of notification of significant abnormal radiological results with an electronic and paperless route which is more efficient, robust and environmentally friendly. The new electronic process must also be enabled with proper tracking of follow up and closure for each notification.

METHOD
A team comprising of members from SHP Clinical Services, Allied Health and Nursing, iHIS and SGH Division of Radiological Sciences collaborated to review the existing notification process.

RESULTS
A new workflow was established using SHP Intranet as a secure platform to send notifications on FAEIR results.

OLD
SGH Report Notification Team
Generate and fax the list of previous-day cases with ‘Abnormal Report Indicator’ to notify SHP for clinical intervention.

SHP
Upon receipt of the report, SHP will acknowledge by faxing the acknowledgment slip back to SGH DDR to close the notification loop.

NEW
SGH Report Notification Team
Generate and upload the list of patients with FAEIR reports from previous day’s examinations into SHP Infopedia Shared Folder. Nil returns to be included.

SHP
Respective clinic treatment room nursing staff will check and acknowledge the listing in the shared folder daily, and notify ordering doctor of any FAEIR report, then update details in the worksheet. Completed file will remain in the shared folder as record.

CONCLUSION
This new electronic paperless notification process is effective and robust and is more efficient in its overall delivery. Clinicians are assured of timely notification of FAEIR cases. All stakeholders feel more confident with the new strategy which ensures data security. Potential cost savings may be achieved in this new paperless workflow through saving the storage space for the returned acknowledgment slips via fax in the old process.