Imaging

The following considerations can help imaging leaders as they ramp back up traditional services coming out of their Covid-19 curve and work through a backlog of exams.

### Top elective imaging procedures by volumes¹,²

- Chest X-ray
- Musculoskeletal X-ray
- Mammography
- Abdominal/pelvic CT
- Head/neck/brain CT
- Neck/spine X-ray
- Abdominal ultrasound
- Abdominal ultrasound
- Chest CT
- Abdominal X-ray
- Spine MRI
- Pelvic ultrasound
- Bone/joint MRI

### Short term considerations for restarting elective services

**Phasing of elective subservice lines based on clinical urgency**

<table>
<thead>
<tr>
<th>Phase 1 (1-2 months)</th>
<th>Phase 2 (2-3 months)</th>
<th>Phase 3 (3+ months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most advanced imaging (CT, MRI, PET)</td>
<td>Screening mammography for high-risk patients</td>
<td>Screening mammography for low-risk patients</td>
</tr>
<tr>
<td>Diagnostic mammography</td>
<td>Nuclear medicine</td>
<td>Lung screening</td>
</tr>
<tr>
<td>Some ultrasound, X-ray</td>
<td>Rest of ultrasound, X-ray</td>
<td>Elective IR procedures</td>
</tr>
</tbody>
</table>

**Barriers to clearing backlog of cases**

- Increased slot times due to additional cleaning protocols between exams
- Limited waiting room and facility capacity due to social distancing guidelines
- Limited staff availability to work extended hours, weekends

**Mid to long-term demand impacts**

- Slight decline in “self-referred” exams such as screening mammography and low-dose lung screening
- Increased shift towards non-hospital based outpatient imaging
- Unknown impact on ordering patterns of imaging due to increased use of telehealth

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¹ All services shown are estimated to have 50% or greater elective volumes.
² All services shown have greater than 8,000,000 projected national volumes in Advisory Board’s Outpatient Imaging Market Estimator.

Source: Imaging Performance Partnership interviews and analysis; Outpatient Imaging Market Estimator, Advisory Board; Service Line Strategy Advisor research and analysis.
# Imaging

## Subservice line summary

<table>
<thead>
<tr>
<th>Subservice Line</th>
<th>Estimated percent elective</th>
<th>Phasing restart by clinical urgency</th>
<th>Estimated drop off in future demand</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mammography</td>
<td>90%</td>
<td>Phase 2/3</td>
<td>Low</td>
</tr>
<tr>
<td>MRI</td>
<td>70%</td>
<td>Phase 1</td>
<td>Low</td>
</tr>
<tr>
<td>Nuclear Medicine</td>
<td>70%</td>
<td>Phase 2</td>
<td>None</td>
</tr>
<tr>
<td>CT</td>
<td>60%</td>
<td>Phase 1</td>
<td>Low</td>
</tr>
<tr>
<td>PET</td>
<td>50%</td>
<td>Phase 1</td>
<td>None</td>
</tr>
<tr>
<td>Ultrasound</td>
<td>50%</td>
<td>Phase 1/2</td>
<td>Low</td>
</tr>
<tr>
<td>X-ray</td>
<td>50%</td>
<td>Phase 1/2</td>
<td>Low</td>
</tr>
</tbody>
</table>

## DEFINITIONS

- **Estimated percent elective**: estimated portion of each subservice line that is both scheduled in advance and may be delayed for a short period of time without significant worsening of the condition.
- **Phasing restart by clinical urgency**: recommended prioritization of restarting services based solely on clinical urgency or importance for identification of higher acuity services. Services in earlier phases are more urgent. Phase 1: immediate, Phase 2: 2-3 months, Phase 3: 3+ months
- **Estimated drop off in demand**: decrease in demand over the next 1-2 years due to lingering patient fear. Low: 5-15%, Medium: 16-30%, High: 30%+, None: 0%