**Name of Policy:** Interpretation Reporting  
**Policy Number:** 3364-135-057  
**Department:** Radiology  
**Approving Officer:** Chief Operating Officer - UTMC  
**Responsible Agent:** Chairman & Professor, Radiology  
**Effective Date:** 08/01/2022  
**Initial Effective Date:** 7/19/1999

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<th>Category</th>
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(A) **Policy Statement**

The Department of Radiology will read and produce a typed report within twenty-four hours, for all exams/images completed. (Exceptions may be: OR’s, treatment planning, pain blocks, cysto’s, CT percutaneous pinnings, etc.)

(B) **Purpose of Policy**

To provide a diagnostic report for all exams and procedures within a 24 hour time period.

(C) **Procedure**

1. All exams will receive a radiologists interpretation within 24 hours.

2. Transcription of reports must include the following:
   - Patient name
   - Patient Medical record number
   - Requesting Provider name
   - Attending Provider name
   - Date of exam
   - Findings
   - Impression
   - Signature lines: radiologist

3. Reports are reviewed and signed (electronic verification) by the Radiologist and Resident involved.

4. Reports are distributed electronically:
   - Inpatients ➔ electronically to HPF
   - Outpatients ➔ electronically to HPF
   - Referring Physicians(s) ➔ fax or email
   - Results are distributed electronically to the requesting provider, attending provider, and a copy goes into the patient’s medical record within 24 hours.
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<tr>
<td>/s/ Haitham Elsamaloty, MD</td>
<td>07/22/2022</td>
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<tr>
<td>Chairman &amp; Professor, Radiology</td>
<td>Date</td>
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<tr>
<td>/s/</td>
<td>07/26/2022</td>
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<tr>
<td>Christine Stesney-Ridenour, FACHE</td>
<td>Date</td>
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<tr>
<td>Chief Operating Officer - UTMC</td>
<td>07/01/2022</td>
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*Review/Revision Completed By:*

Haitham Elsamaloty, MD

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<th>Policies Superseded by This Policy:</th>
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| Next Review Date: 08/01/2025 |

*Date*

07/22/2022

9/1/2005

5/23/2008

11/3/2008

5/20/2011

5/24/2014

10/27/2014

07/01/2017

07/01/2020

08/01/2022