Consensus Statement

Managing the Transition to Digital Diagnostic Imaging

15 July 2008

- The transition to digital diagnostic imaging has the potential to add value to the healthcare system through quicker and more efficient access to images, fewer lost and repeated studies, and greater diagnostic information content of the studies.
- The referring and treating practitioner should have access to clinically relevant diagnostic quality images.
- A radiology service comprises both the clinically appropriate diagnostic image and the report.
- During the transition to digital diagnostic imaging, it is important that referring and treating doctors have access to appropriate imaging in an appropriate format. This may include printing images on film.
- Different referral groups will have different requirements and these need to be recognised by the referrer, the treating doctor, and the imaging provider.
- An element of training is seen as an important component of the transition to digital diagnostic imaging.
- The implementation of a Code of Practice for provision of digital diagnostic imaging is supported.
- It is recognised that the transition will involve increased costs to the referrer, to health institutions (e.g. PACS in the wards, clinics and theatres), and to the provider of the service. Appropriate additional funding to cover such increased costs will need to be made available.

Delivery

- The delivery medium of imaging to a referring doctor will change during the transition period from film through to portable digital media, ultimately to intranet and internet services.
- Digital image data delivery should comply with DICOM standards and the IHE (Integrating the Healthcare Enterprise) profiles, including that for portable digital images.

Access and Viewing

- Interoperability is a key element to the effective delivery of digital images between providers and referrers. The IHE profiles are supported as a useful methodology. There must be national guidelines for media used for digital diagnostic image transfer such that images are quickly, reliably and easily viewed and manipulated.

- Standards for viewing platforms must be devised in a way that ensures compatibility between the media and the referrer's viewer. Viewers shall permit the simultaneous viewing of images from more than one examination (for comparison purposes).

- These standards must be set in a way so that the standards can be improved as improvements in technology occur.

- There must be engagement with hospitals, to ensure that adequate numbers of appropriate viewing stations are provided in operating theatres, wards and clinics.

- Wide bandwidth fast internet networks are essential for the best use of digital diagnostic imaging. Government must provide adequate broadband capacity, nationally and locally, in order to facilitate the optimum delivery of images to the point of patient care.

Public and Private settings

- Improved communication between public and private sectors is required, such that data transfer between providers is readily achieved, in the interest of safe and efficient patient care. Obstacles of privacy, security and commercial considerations need to be addressed.

Storage

- During the transition period the patient will be the agent for the storage of images on durable portable media. It is envisaged that an internet based offsite storage facility will develop with time.

- With the transition to digital imaging, there will be an increasing need for the provider of imaging to store the diagnostic imaging data for an appropriate minimum time. Patient and specialty specific archiving requirements need to be noted.

- During the transition from film-based to digital storage, high quality diagnostic standard imaging must continue to be available.

- The delivery and storage of image data solely on CD or DVD is frequently inadequate.

Stakeholders

- A working party of interested groups will be formed to include:
  - Australian Diagnostic Imaging Association
  - Australian Orthopaedic Association
  - Australian Medical Association
  - Royal Australasian College of Surgeons
  - Royal Australian and New Zealand College of Radiologists
  - Surgical Specialty Societies