

# Summary

- Workflow views
  - Getting Started
  - QC per case
  - Diagnostic review Recall No
    - Score case
  - Diagnostic review Recall Yes
    - Circle lesions
    - Identify most suspicious abnormality
    - Score case



Pisano Breast Imaging Research Lab  
**VIPER Study**

Reader Study 1  
Form Version 1.1

Reader ID

Modality

Get Started

eCRF at "Getting Started"  
Reader enters ID and Modality

Reader ID

Modality

Case ID

View Box #

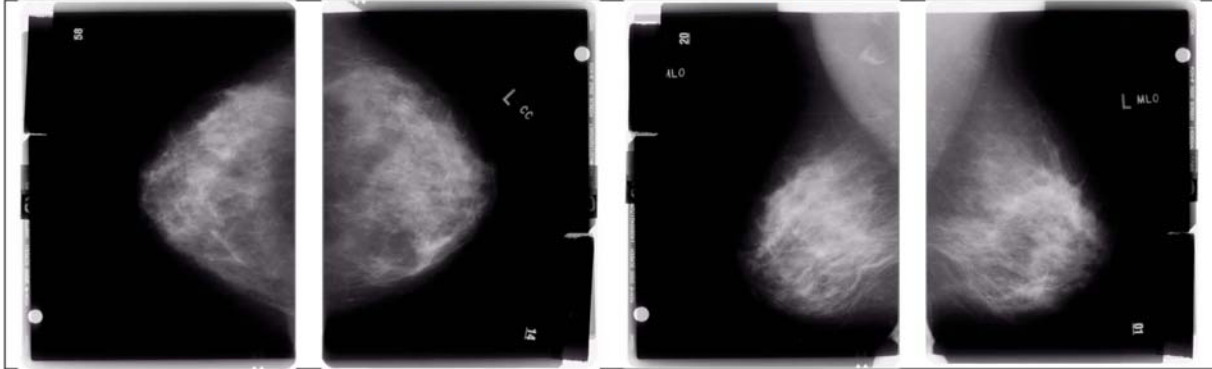
QC Check

RCC

LCC

RMLO

LMLO



  
Reader Signature

9/17/2012 10:12:40 AM

Missing Images

NEXT CASE

eCRF at "Quality Control for Each Case":

Reader inspects images on screen or film on viewbox and compares them to the images on the eCRF, verifying all expected images are present.

Reader ID

Modality

Case ID

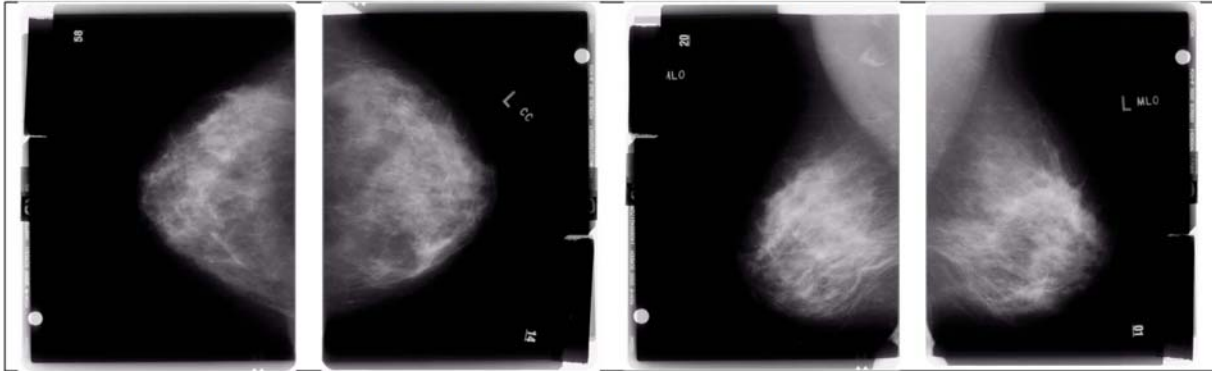
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

- Yes  
 No

Missing Images

  
Reader Signature

9/17/2012 10:12:40 AM

**NEXT CASE**

eCRF at "Diagnostic Review":

Reader provides binary decision: recall or do not recall.

Reader ID

Modality

Case ID

View Box #

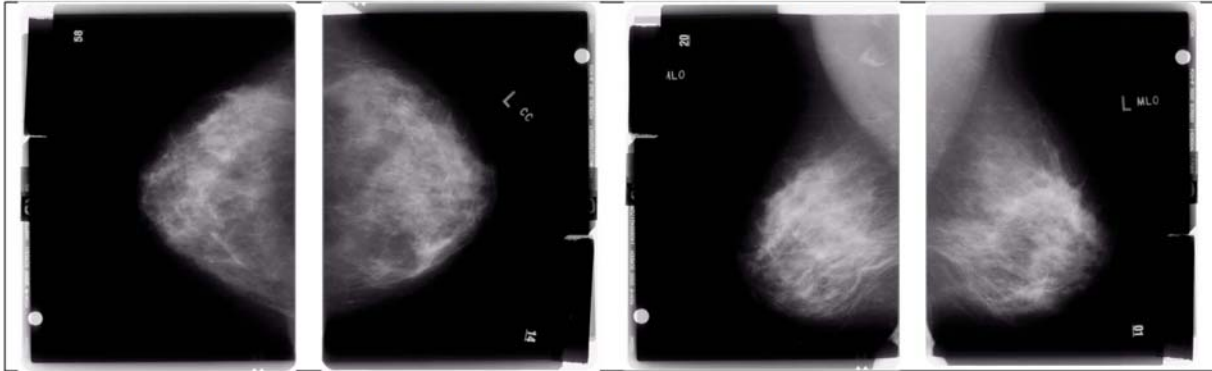
Get Started  
& QC Check

RCC

LCC

RMLO

LMLO



Would you recall patient?

- Yes  
 No

Being more quantitative in reporting your *Numeric Rating*:

- Are there no dense areas and no abnormal findings? If so, perhaps your *Numeric Rating* should be 1-25?
- Are there dense areas or benign findings, but not enough to prompt a decision to recall? If so, perhaps your *Numeric Rating* should be 75-100.
- Are the visual cues somewhere in the middle?

Most Normal

Least Normal

1



100

Numeric  
Score

Reader Signature

9/17/2012 10:12:40 AM

Missing Images

NEXT CASE

eCRF when case is "NO" to recall:

Reader provides extra information about their binary decision.

Reader provides an ROC score.

# Link between scales

- A mark on visual scale (the ruler)

Equals

- The numeric score
- The user can use either mode to enter or update their score
- Both representations of the score will update with either mode.

Reader ID

Modality

Case ID

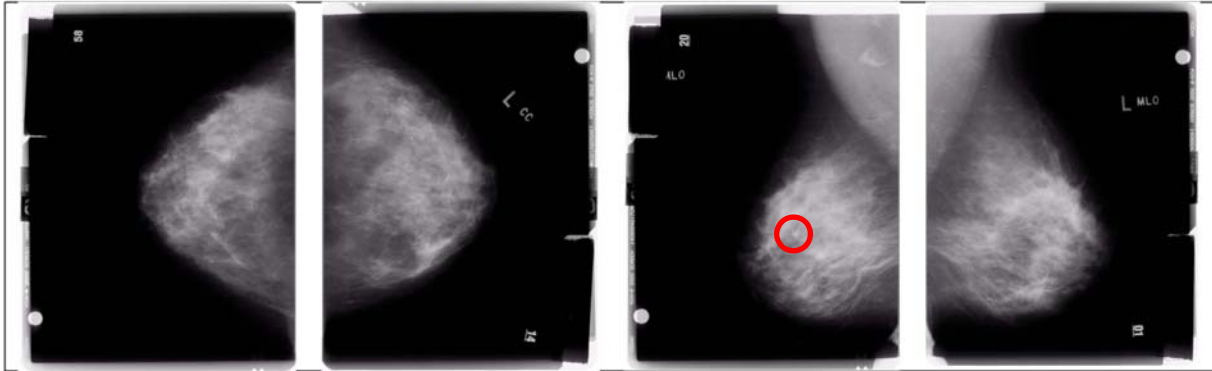
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

- Yes  
 No

Continue

Missing Images

  
Reader Signature

9/17/2012 10:12:40 AM

NEXT CASE

eCRF when case is "YES" to recall:

Reader provides extra information about their binary decision.

Reader circles lesions.

Reader ID

Modality

Case ID

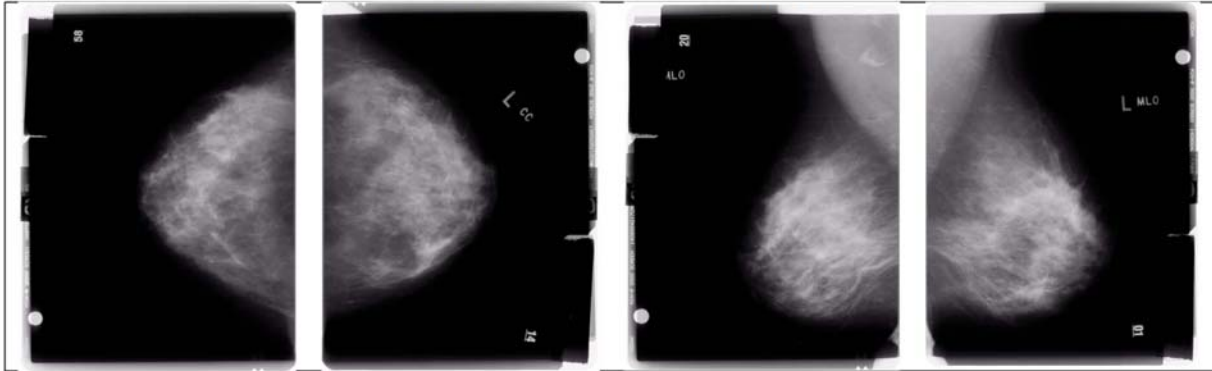
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

- Yes  
 No

Most suspicious abnormality:

- 0 Mass                      0 Microcalcification  
0 Asymmetry              0 Architectural Distortion

Continue

  
Reader Signature

9/17/2012 10:12:40 AM

Missing Images

NEXT CASE

eCRF when case is "YES" to recall:

Reader provides extra information about their binary decision.

Reader identifies most suspicious abnormality.



Reader ID

Modality

Case ID

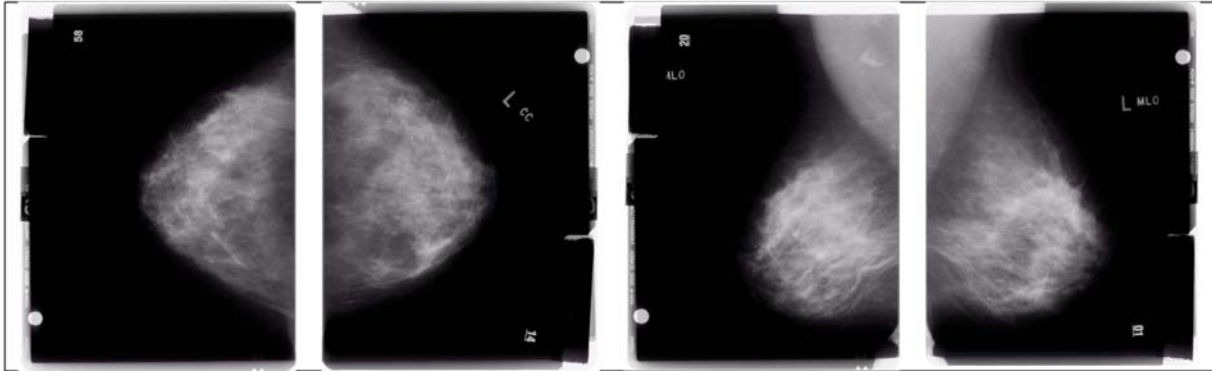
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

Yes  
 No

Most suspicious abnormality:

0 Mass                      0 Microcalcification  
0 Asymmetry              0 Architectural Distortion

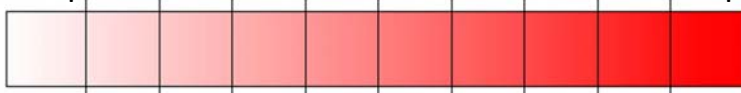
Being more quantitative in reporting your *Numeric Rating*:

- Are there only a few inconclusive visual cues prompting your decision to recall? If so, perhaps your *Numeric Rating* should be 101-125?
- Are there many definitive visual cues prompting your decision to recall? If so, perhaps your *Numeric Rating* should be 175-200.
- Are the visual cues somewhere in the middle?

Least Suspicious

Most Suspicious

101



200

Numeric  
Score

Reader Signature

9/17/2012 10:12:40 AM

Missing Images

NEXT CASE

eCRF when case is "YES" to recall:

Reader provides extra information about their binary decision.

Reader provides an ROC score.