

## CARDIOLOGY SERVICES POLICY AND PROCEDURE

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**Subject:** Echocardiogram Quality Improvement

**Policy No.:** 2

Supersedes:

Review Date: May 15, 2024

Origin Date: May 15, 2024

Revision Date:

### **PURPOSE:**

To establish guidelines for continuous process improvement of the echocardiogram laboratory with goal of attaining high-quality echocardiography studies and interpretations to ensure better patient outcomes.

### **POLICY:**

An echocardiogram is performed by a technician who has passed the Los Angeles County Department of Health Services echocardiography competency exam.

### **PROCEDURE:**

#### **I. QI Oversight**

The Director of the Echocardiogram Laboratory provides oversight of its quality improvement measures, which include but are not limited to:

- Test Appropriateness
- Technical Quality Review (Sonographer Performance Variability)
- Interpretive Quality Review (Physician Interpretation Variability)
- Final Report Completeness and Timeliness

#### **II. Test Appropriateness**

Test appropriateness will be measured on a minimum of two cases per quarter and categorized as appropriate, may be appropriate, or rarely appropriate. Results are documented, reviewed, and discussed in cardiology meetings.

#### **III. Technical Quality Review (Sonographer Performance Variability)**

Two cases per quarter will be reviewed for image quality, completeness, and adherence to the protocol. Results will be reviewed/discussed in cardiology meetings. The cases selected will represent as many sonographers as possible. The Director of the Echocardiogram Laboratory will address any deficiencies in the quality and completeness of the studies as well as adherence to the protocol. If concerns exist regarding a specific measurement technique, additional training will be scheduled.

#### **IV. Interpretive Quality Review (Physician Interpretation Variability)**

Two cases per quarter will be evaluated for the quality and accuracy of the interpretation based on the acquired images. The results are documented, reviewed, and discussed in cardiology meetings. As many physicians as possible will participate in the review. The Director of the Echocardiogram Laboratory will address any differences in interpretation to achieve uniform study interpretations.

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Revised:

Reviewed: 5/24

Approved By: Dr. Grace P. Chen, Chief of Cardiology

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**V. Final Report Completeness and Timeliness**

A minimum of two random reports per quarter are evaluated and the results documented for report completeness (demographics, 2D or M-Mode measurements, Doppler evaluations, required report text comments) and timeliness of reporting. The time of the completion of the study to initial physician preliminary interpretation to final report are evaluated. The results will be documented, reviewed, and discussed at cardiology meetings. The Director of Echocardiogram Laboratory will address any incomplete reports, reports not interpreted and finalized in the required timeframe (as listed below), with the interpreting physician.

- inpatient studies are interpreted by a physician within 24 hours of completion of the examination
- outpatient studies are interpreted by the end of the next business day
- the interpreting physician will verify and sign the final report within 48 hours after interpretation

**VI. Biannual Meetings:**

A minimum of two meetings per year will be held to review/discuss the results of the above quality measures. All Echocardiogram Laboratory staff will participate in at least one meeting per year.

**REFERENCES:**

INTERSOCIETAL ACCREDITATION COMMISSION (<https://intersocietal.org>)