

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 ID

Modality

Case ID

View Box #

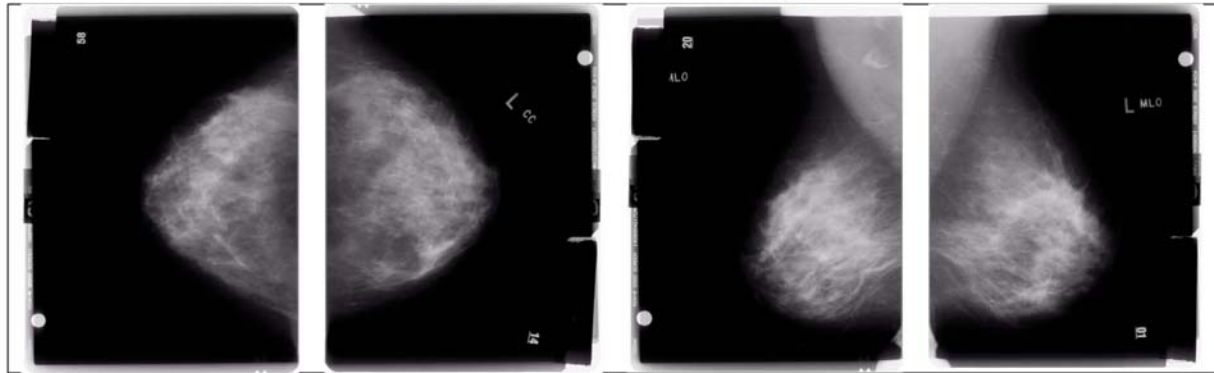
QC Check

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 ID

Modality

Case ID

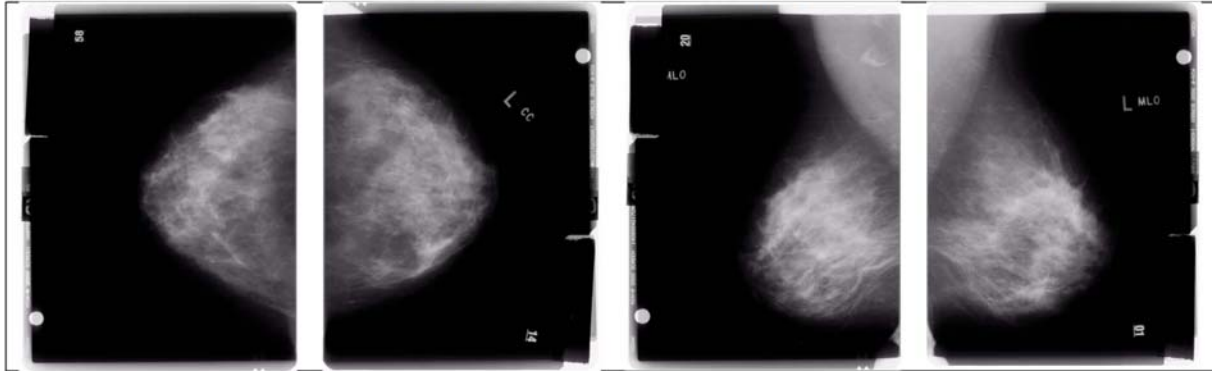
View Box #

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 ID

Modality

Case ID

View Box #

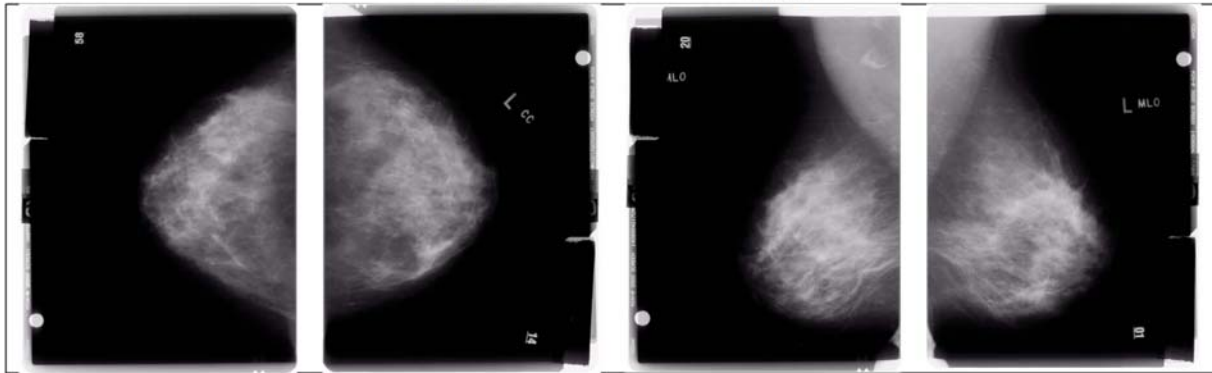
Get Started
& QC Check

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

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

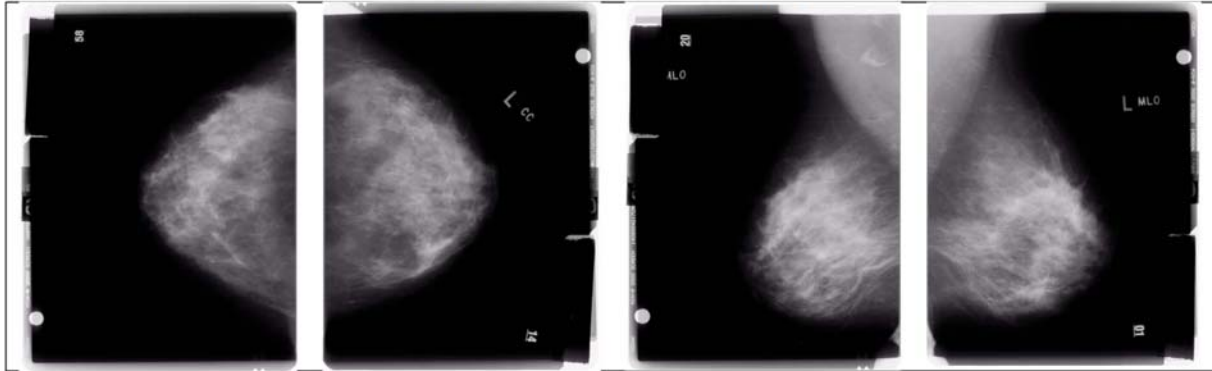
View Box #

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, circle lesions

Reader ID

Modality

Case ID

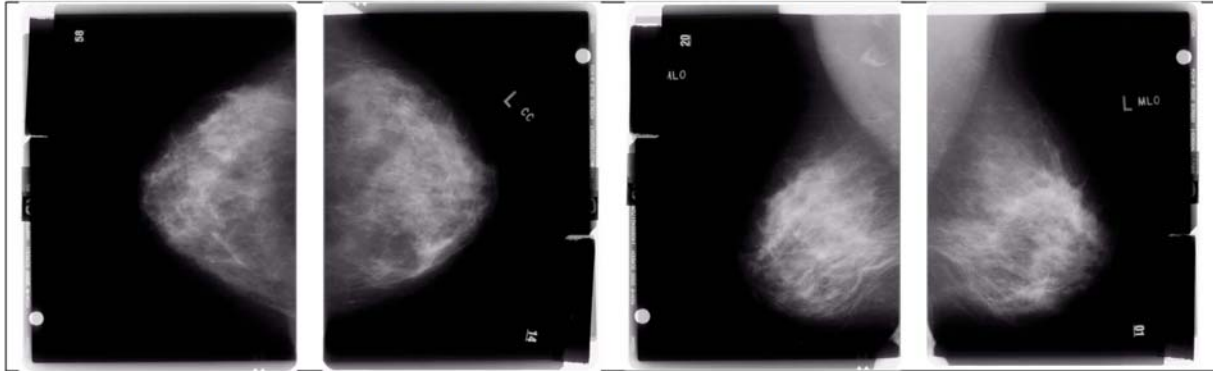
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

☒ Yes
☐ No

Most suspicious abnormality:

0 Mass 0 Microcalcification
0 Asymmetry 0 Architectural Distortion

Continue

☐ Missing Images


Reader Signature

9/17/2012 10:12:40 AM

NEXT CASE

eCRF when case is "YES" to recall, at identify
most suspicious abnormality

Reader ID

Modality

Case ID

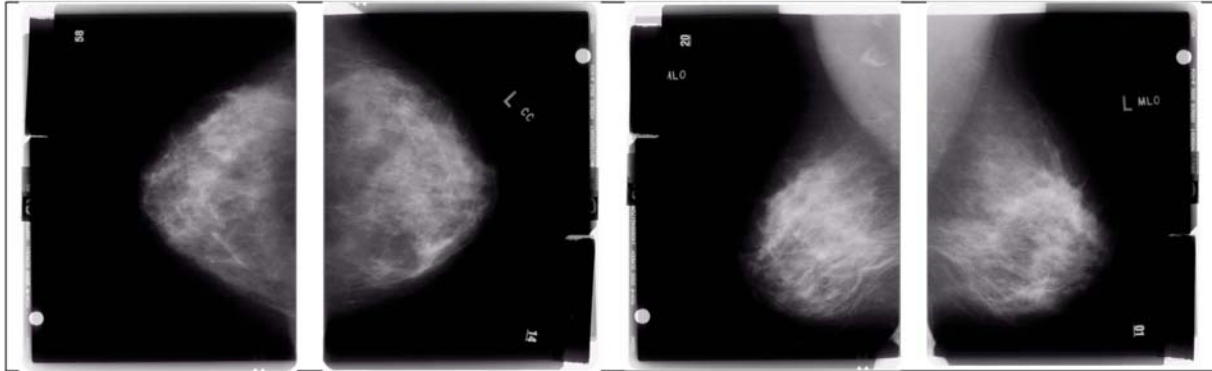
View Box #

RCC

LCC

RMLO

LMLO



Would you recall patient?

☒ Yes
☐ No

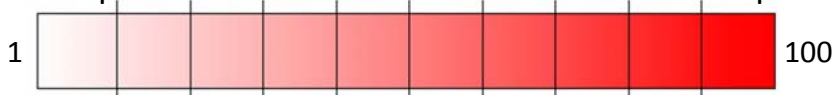
Most suspicious abnormality:

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 1-25?
- Are there many definitive visual cues prompting your decision to recall? If so, perhaps your *Numeric Rating* should be 75-100.
- Are the visual cues somewhere in the middle?

Least Suspicious



Most Suspicious

Numeric
Score

Reader Signature

9/17/2012 10:12:40 AM

☐ Missing Images

NEXT CASE

eCRF when case is "YES" to recall, at scoring case