

Critical Findings Protocol

vRad’s strict policy, integrated technology, and robust support deliver rapid communications and reportable documentation. vRad handles more than 190,000 critical findings calls each year with an average relay time of 10 minutes (Radiologist call request > physician located > conference call completed).

Following is an overview of our critical findings communication and documentation:

- A vRad radiologist verbally notifies the client’s ordering physician within 30 minutes with any critical test results (target for stroke protocol – CT Head Without Contrast – is under 20 minutes).
- Documentation of this communication is provided on vRad’s radiology report and in the Operations Center records.
- Communication response time reports are available to clients.
- Disruption to radiologist and attending physician clinical work is minimized.



It is critical that we have up-to-date contact records to communicate critical findings as quickly as possible. Please keep referring physician information updated using one of the following:

- vRad Order Management System (OMS)
- vRad Operations Center (phone or chat)
- HL7 message
- Your account manager

Critical findings include:

- Intracranial hemorrhage
- Intracranial mass with mass effect
- Skull fracture
- Acute hydrocephalus
- Acute ischemic stroke
- Intraorbital abscess
- Cardiac tamponade
- Aortic dissection or rupture
- Acute intra-abdominal or retroperitoneal hemorrhage
- Vascular extravasation or active hemorrhage
- Unsuspected malignancy
- Ruptured aortic aneurysm
- Large aortic aneurysm (or significant change in size of aneurysm compared to prior imaging studies)
- Pneumothorax
- Imaging findings suggestive of potential highly infectious conditions or communicable diseases with major public health concerns (such as Tuberculosis or SARS) to allow client facilities to take appropriate precautions and to facilitate reporting by such facilities, as such facilities deem appropriate or required, to local, state, and federal public health authorities in accordance with law and regulation
- Pulmonary embolism
- Deep venous thrombosis
- Solid organ laceration
- Unexplained pneumoperitoneum
- Portal venous gas
- Ischemic bowel
- Bowel obstruction, closed loop
- Bowel obstruction, incarcerated bowel
- Spinal cord compression
- All cervical spine fractures
- Unstable thoracic and lumbar spine fracture
- Foreign bodies (other than soft tissues) – including Ingested radiopaque or corrosive foreign body
- Acute or unsuspected abdominal abscess
- Suspected intussusceptions or volvulus
- Acute appendicitis
- Testicular or ovarian torsion
- Ectopic pregnancy
- Fetal demise
- Abnormal fetal biophysical profile
- Other pregnancy abnormalities requiring intervention or observation (i.e., cervical funneling/incompetent cervix, 3rd trimester placenta previa, placental abruption, threatened abortion or abortion in progress, large subchorionic hemorrhage, severe oligohydramnios)
- Acute arterial occlusion
- Misplaced line or tube
- Any other urgent, unexpected findings which require immediate intervention

Need to consult with a vRad radiologist regarding a critical finding?

Anytime your referring physicians want to consult with a vRad radiologist they can call our physician's hotline: 855.856.6465, or our main OC number 866.941.5695 (press 4 for the physician's hotline).