

MAIN STREET RADIOLOGY NEWS

Spring 2007

WELLCARE APPROVED AT MSR III

On February 01, 2007, WellCare approved MSR III at 136-25 37th Ave as a provider for Radiological and Imaging services.

WellCare is a leading provider dedicated to government sponsored health plans such as Medicare, Medicaid, State Children's Health Insurance Programs and others. Specific site approval is still required for patients referred to MSR I at 32-25 Francis Lewis and MSR II at 44-01 Francis Lewis Blvd.

Participation in WellCare will further help MSR provide readily accessible radiological services to the Flushing community.

PUBLIC HEALTH ADVISORY

The U.S. Food and Drug Administration (FDA) has issued new guidance for patients with moderate to end stage kidney disease who receive gadolinium-based contrast agents during MRI procedures. Having learned of more than 400 cases worldwide of **Nephrogenic Systemic Fibrosis (NSF)** in patients receiving gadolinium contrast agents for MR imaging, the FDA issued an advisory suggesting that physicians refrain from ordering MRI procedures with contrast or to select alternative imaging methods for patients with moderate to end stage kidney disease whenever possible. If alternatives are not feasible the FDA recommends prompt dialysis. NSF is a progressive and debilitating thickening and fibrosis, which can affect the entire body including muscles, skin and vital organs.

MRI, CT, ULTRASOUND, PET and Nuclear Medicine REACCREDITED by The American College of Radiology

As you may know, United Healthcare will be joining the growing number of insurance companies who require their members to utilize Imaging Centers who have demonstrated to their communities, patients and referring physicians their commitment to providing the highest quality imaging care by acquiring ACR accreditation.

Main Street Radiology-Bayside has been awarded a renewal of a three-year term of accreditation in MRI, CT, Ultrasound, PET Scanning and Nuclear Medicine as a result of recently completed surveys by the American College of Radiology (ACR)

The ACR awards accreditation to a radiology practice for the achievement of high practice standards after a voluntary evaluation of its practice. Evaluations are conducted by radiologists and physicists who are members of the ACR with special expertise in an imaging modality. When evaluating a radiology facility, the ACR reviews the quality of the equipment, personnel, quality control procedures and quality assurance programs, as well as image quality. For more information, please visit the ACR website at www.acr.org.

PHYSICIAN SURVEY

Since opening our first office in 2000, Main Street Radiology has strived to provide the highest quality service to our patients and referring physicians. Each suggestion or complaint has been taken seriously and where possible corrective action taken.

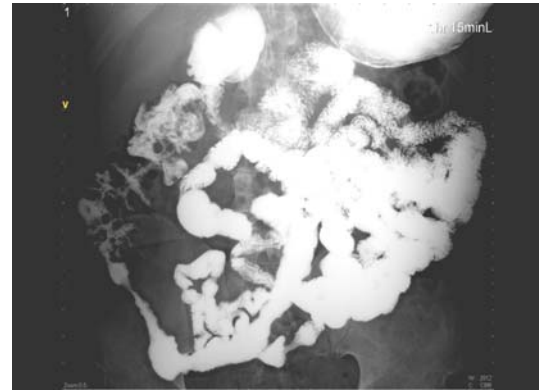
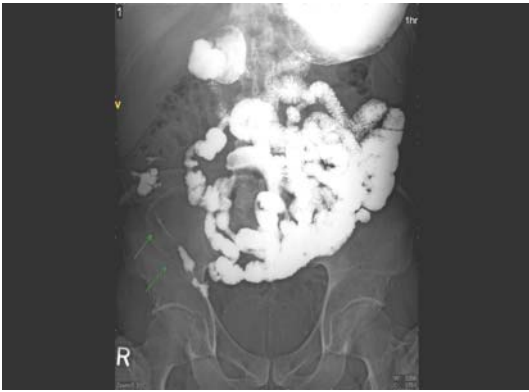
In our effort to continue to improve our service enclosed please find a physician survey. It would be appreciated if you can complete it and fax it to 718-428-2475.

As always, you can speak directly to our radiologist, managers or customers service representatives at 718-428-1500

CASE OF THE MONTH

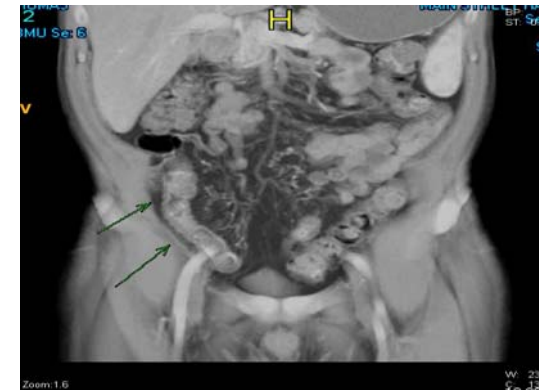
CT ENTEROGRAPHY

CT enterography is a relatively new and exciting means to evaluate the small bowel. With the newer generation spiral CT scanners installed with 3D “volumetric” software, CT enterography may more accurately demonstrate small bowel disease with the advantage of additional information regarding adjacent tissues and solid organs.



History: 60 year old male with history of Crohn’s disease

Findings: Small bowel series shows persistent area of narrowing involving the distal small bowel and terminal ileum. During the examination minimal peristalsis was seen.



Follow up CT in 9 months again shows the persistent area of narrowing of the same loops of distal and terminal ileum. No significant adenopathy or inflammatory changes were seen and no abscess or fistulas were identified.

Discussion:

CT enterography is an accurate means to assess the small bowel for inflammatory disease of the bowel. The adjacent solid organs, bony structures and retro peritoneum can also be evaluated during the exam. Crohn’s disease, also called terminal ileitis, is a chronic recurrent and segmental inflammatory disease of the bowel, involving the terminal ileum in 95% of cases, colon in 22-55 % of cases and rectum in 14-50 %.

In this patient, CT enterography accurately excluded the presence acute inflammatory changes of the mesentery associated with acute disease. Abnormal and thickened small bowel loops with associated areas of narrowing were accurately demonstrated. The presences of an abscess or fistula as well as the presence of perirectal fistula, often found in Crohn’s disease, were excluded. Other manifestations of the disease including sacroileitis/arthritis and biliary disease were also excluded.

MSR is excited to provide the newest means of diagnosis and imaging as they become available.

