



# Central Intake for Outpatient MRI

## As a radiologist at an MRI hospital, here's what you need to know:

### What is Central Intake and what are the key features?

MRI service providers in the Ottawa Valley and Eastern Ontario have centralized the intake for outpatient MRI scan requests. The new Central Intake Program (CIP) provides a secure and simple single point of access for all outpatient Priority 3 and Priority 4 MRI exams for Ontario patients. All MRI requests will be sent to a central hub, and then assigned to the most appropriate MRI site in the region.

Using standards-based processes, CIP will review submitted referral documents and will route them to one of the region's MRI service providers for scheduling. This routing decision will be based on a number of factors, including: patient age, the type of exam requested, the MRI locations that can provide that specific type of imaging, location of the patient's residence, MRI site queue lengths, the patient's preferred language, and any other patient preferences that are indicated on the referral form.

**Regional Standard Requisition Form and MRI Screening Form:** Hospitals in the region have worked together to develop a new standard MRI requisition and safety screening form. The new forms, which will be distributed to referring physicians and the region's imaging departments in November 2019, will replace the hospital-specific forms that are currently in use. The forms can be found in this package and on the Central Intake website.

As of December 9, 2019, all outpatient MRI scan requests must be submitted through Central Intake. Referrals can be submitted to Central Intake by fax at 613-737-8944, eReferral, or hospital CPOE (currently available at TOH, CHEO, and Cornwall Community Hospital). The process for submitting inpatient and emergency referrals to MRI services will not change.

**Focus on Appropriateness:** Improving the appropriateness of requests for MRI services is an important component of Central Intake. In an effort to support leading practice and to reduce the number of low-value scans, guidelines have been developed to support decisions regarding advanced imaging for headache and low-back pain. The guidelines and associated decision support checklists can be found in this package or on the Central Intake website.

### How will Central Intake impact my workflows?

*For the most part, radiologist workflows will not change:*

1. Radiologists will continue to prioritize and protocol referrals that are sent to their site
2. Sites will continue to be responsible for scheduling patients
3. Sites will continue to read, dictate, and send reports to the referring physician

There are a few things that will change:

1. MRI sites will no longer directly receive outpatient (P3/P4) requisitions for initial processing. All requests for P3 or P4 outpatient MRI scans must be submitted to Central Intake Program.
2. Given the single point of access through the Central Intake Program, radiologists may be reviewing requisitions from a broader group of referring physicians
3. Referrals for headache and low-back pain will be accompanied by an appropriateness checklist that is meant to provide additional information to help with triaging
4. There are new standard forms that can be used to communicate with referring physicians if a radiologist requires additional information or if the clinical history does not sufficiently demonstrate medical necessity of the request

### How will Central Intake benefit patients?



Improving equitable access to care by reducing variability across sites



Improving overall access to care by reducing the number of duplicate and unnecessary exams



Providing patients (particularly adults) more options to receive care close to home or with a provider of choice



Increase confidence in care choices through increased transparency on wait times



Improve leading-practice care through knowledge transfer on imaging guidelines