

## Best Practices for Reading Rooms During the COVID-19 Pandemic

**Approved:** 6/2/20

**Last Revision:** 6/2/20 – initial document

**Background:** This document provides suggested best practices within the UCSF Department of Radiology and Biomedical Imaging during the COVID-19 pandemic. Its goal is to protect our people from exposure and dissemination of COVID-19 while maintaining our mission to provide excellent clinical imaging and educate tomorrow's leaders in radiology.

### Guidance:

#### *PPE and hygiene*

As per UCSF institutional guidelines, staff will be screened upon entry to the campus and provided surgical masks to cover the mouth and nose. These masks should be worn at all times including in the radiology reading rooms. Hand sanitizer (alcohol-based hand rub) is present in every reading room either at a wall dispenser or tabletop pump dispenser and should be used when entering and exiting the reading room. Glove use does not replace the need for hand hygiene.

During this time, it is recommended that staff avoid eating and minimize drinking in the reading room. When this is not possible, please be especially mindful of social distancing while eating or drinking and immediately clean-up, re-sanitize the space after eating, and replace surgical mask as soon as possible.

#### *Reading rooms*

The maximum number of staff in a reading room will be variable depending on reading room size, however the number of persons should permit social distancing guidance of maintaining 6 feet distance between persons. The PACS workstations used should also be at a minimum 6 feet apart. In some cases, this will require relocating PACS workstations to other office space. For assistance with moving a workstation contact Marc Kohli (marc.kohli@ucsf.edu). Whenever possible should faculty or trainees need an isolated workstation several options are available (see Table 1). Use of PACS workstations within the inpatient facilities should be primarily for direct patient care.

#### *Workstations*

PACS workstation cleaning should include wipe down with disinfectant wipes (gloves and wipes available in each reading room) of the table, keyboard, mouse, dictaphone, and adjacent nearest telephone. These surfaces should be wiped at the beginning and end of the shift. Faculty and trainees should use the same workstation throughout the course of their shift. Cleaning should follow established UCSF/[CDC guidelines](#).

#### *Study interpretation*

Ultimately, studies to be read will be determined by sections, however, we recommend the use of a common worklist to allow for flexibility with the unpredictable nature of volume by site and potential added clinical responsibilities. Consideration should be given to preserving accessibility for referring

provider consultation. This can be achieved via a dedicated line of communication and/or set teleconference (Zoom) time to minimize disruption of routine interpretations.

#### *Trainee education*

To promote trainee education, readouts should be collaborative while maintaining appropriate social distancing whenever possible. When social distancing permits, readouts may occur in person with the resident or fellow sitting 6 feet away from the interpreting attending. Readouts may also be done remotely. There are several options available, including mark up of images and creation of key images within PACS to highlight findings, use of eUnity collaborative viewer (Appendix 1), and use of screen sharing on video conferencing platforms such as Zoom (link in Appendix 2). Staff and trainees are encouraged to share interesting cases using secure methods (email or Box).

Alternative curricula using the aforementioned online tools can also be tailored for internal and external medical student education.

Be mindful of others in the reading room during remote readout as phone calls and crosstalk within the same reading room can be distracting to others.

#### *Meetings*

Meetings should be held via Zoom ([ucsf.zoom.us](https://ucsf.zoom.us)). Zoom is a simple, all-in-one solution that lets you meet across desktops, mobile devices, and conference rooms. Zoom is free to UCSF faculty, staff, and students, and the UCSF Zoom instance is approved for use with restricted data. If you need assistance working remotely please contact the IT Service Desk. The [UCSF IT Service Desk](#) provides IT support 24 hours a day, 7 days a week (415-514-4100). [How to Have a Zoom Meeting That Is \(Almost\) as Good as Being There](#). Skype is NOT approved for use of restricted data.

If in person meetings must be held, attendees should adhere to room capacity limits. Maximum-capacity signs have been placed in meeting rooms, classrooms, and other facilities. If there is no sign, please ensure occupants are able to stay at least six feet apart from each other at all times.

#### *Consults*

Consider redirecting consulting teams to virtual collaboration tools which include, but are not limited to, phone, Voalte, Zoom and eUnity.

Potential solutions to engage referring providers and reduce interruptions include 1) designating a consult radiologist who would be available to receive communication about consults and set up Zoom meeting, 2) setting up a Zoom meeting with a waiting room that referring providers can access and join when the radiologist is available, 3) implementing "office hours" for consults, or 4) some combination thereof.

#### *Staff Engagement and Well Being*

Department and section leadership should monitor for anxiety and/or burnout through communication and engagement with staff and faculty. Consider frequent virtual meetings to communicate policy and informational updates as well as to check on team morale and listen to questions and concerns.

*Work from home*

Use of a work from home solution is subject to approval by section chief, vice chair of operations, or department chair. This is an employee-driven benefit, and is not required. Imaging IT will provide remote support for installation and use. However, we are currently not resourced to provide in-person support at home. And so, if the work from home solution can't be fixed remotely, the radiologist is responsible for finding an alternative method to get their work done. Alternative methods may include utilizing eUnity for on-call coverage or physically coming into work if covering a day shift. Internet costs related to the laptop remain the responsibility of the individual, not the department. Currently work from home solutions are scarce resources and therefore we may request that you return/redeploy them in the future if circumstances change.

More details will be provided by Jane Wang and Matt Bucknor who will address this formally as part of Strategic Planning.

**Table 1: Additional Workstations Not Assigned to Sections\***

Location	Resource	Contact	Phone
Parnassus – Moffit-Long	L325 On-Call RR (2)	Chris Laubenthal	319-499-8122
Parnassus – 350 and 400 Parnassus/ACC	350 Parnassus Faculty Office Suite – 307A (1) MRSC C114, C108 (2)	Chris Laubenthal	319-499-8122
Mount Zion	AI Reading Room (1)*	Lena Borodina	415-885-7464
China Basin	Reading Room (1)	Mabel Zelaya	415-531-5378
Mission Bay - Hospital	C1758N inside C1758L (1)	Andrea Fung	415-476-1364
Mission Bay - PCMB		Andrea Fung	415-476-1364

\*1 workstation in this reading room is assigned to AI but at present is typically free. First consideration for use should be to AI faculty and trainees if conflicting needs arise.

In addition to the above, sections may move existing reading room PACS workstations to office spaces to allow social distancing. For assistance with moving workstations, please contact Marc Kohli (marc.kohli@ucsf.edu).

## Appendix

1. Link to Zoom teleconference guide with step-by step use instructions
  - <https://wiki.radiology.ucsf.edu/bin/view/ImagingIT/Procedures/HowToGuides/VideoConferencing/ZoomInstructions/>
2. Additional reading room cleaning supplies please contact:
  - Section's Administrative Assistant. The section AA will coordinate with the designated contacts at each site to ensure supplies are replenished in the reading rooms.
3. UCSF infection control up to date policies and FAQ regarding Covid-19
  - <https://coronavirus.ucsf.edu>
4. Resources regarding emotional well-being and coping during covid-19.
  - <https://psychiatry.ucsf.edu/coronavirus/coping>
5. Videos on remote education of residents
  - [https://youtu.be/9YMWBDCp\\_BU](https://youtu.be/9YMWBDCp_BU)

## Virtual Consults and Readouts with eUnity – Radiology Internal Tip Sheet

eUnity's collaboration tool allows 2+ people to view the same study, at the same time synchronizing series, window/level, and image automatically. Additionally, you can see the other person's mouse cursor so everyone can point at structures and ask questions.

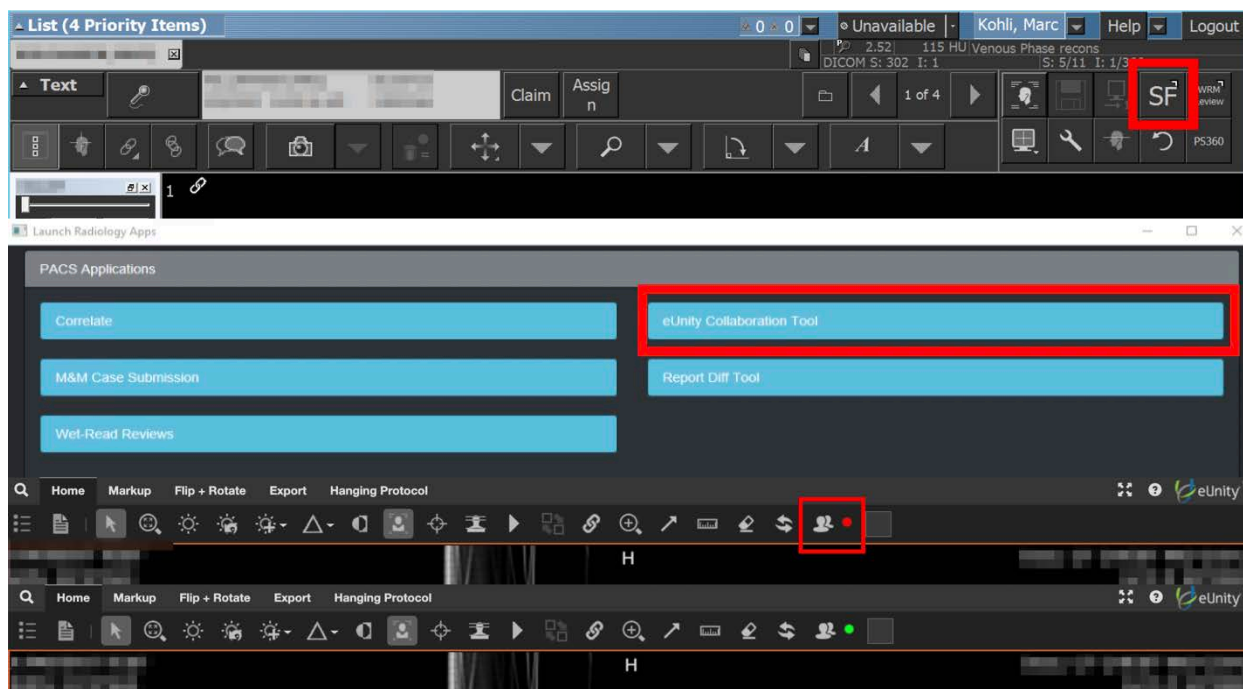
### **Step 1 - Depends on where you're working (PACS vs. APeX/webpacs)**

#### PACS workstation

- With the patient you want to consult on selected – click on the SF button (see below).
- Click on the eUnity Collaboration Tool Button (see below).
- eUnity will open to the patient you have displayed in IMPAX and will automatically enable collaboration (button should go green).

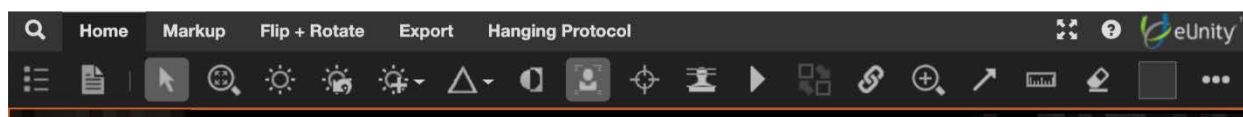
#### APeX or eUnity/webpacs/imagesoncall

- Click on the Collaboration Button (see below)
- The light should turn green (see below)

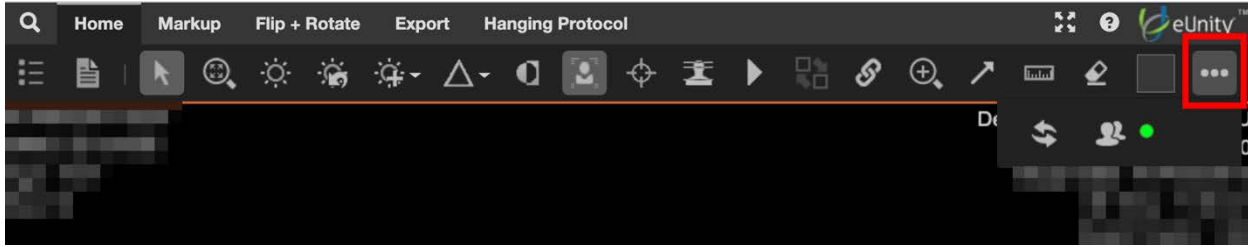


### Pro-Tip

Sometimes the Collaboration Icon is hidden due to a narrow display window.



Click on the ... to expand the menu



## Step 2 - Walk the caller through opening the same study in eUnity.

Talk them through finding the collaboration button and clicking on it. I usually tell them to look for the icon that looks like two people standing next to each other with the red dot.

Have them click, and the light should turn green – just like it did for you in the steps above.

### Common Pitfalls

- Only single studies are supported – don't load comparison studies. If you want to discuss another study – both people have to switch and enable collaboration again.
- If the light doesn't go green fairly quickly, page PACS 415- 443-3544