Nearly four decades ago, Wake Radiology started with a single radiologist working in an office in Raleigh. Since then, Wake Radiology has grown into a regional practice extending into five counties with more than 30 radiologists working at seven offices and five hospitals. During that time, Wake Radiology has remained committed to providing the highest quality radiology service to deliver superior patient care to the Triangle community. Achieving these goals has required meticulous attention to detail and an uncompromising commitment of resources.

To provide convenient access to our radiological services, a network of offices has been established in the Triangle region. Five offices are located in Raleigh, Cary, Garner, and Chapel Hill. With the exception of the Garner office, these facilities offer fluoroscopy, ultrasound, CT, mammography, and nuclear medicine. Our facilities in North Hills and West Raleigh also offer bone densitometry. In the fall of 1998, a sixth office will be opened in northwest Raleigh. Our MR facility (Raleigh MRI Center) is conveniently open seven days a week, including evening hours. This allows for the scheduling of most MR examinations within 48 hours of receiving the exam request.

There are several components of a superior radiology exam, including high quality images, accurate interpretation of the images, and timely delivery of the reports. Wake Radiology is committed to continual upgrading of equipment and the acquisition of the latest technological advances. In addition to providing improved image quality and the resulting increased diagnostic accuracy, superior technology often allows for shorter exam times, which increase patients' comfort. A prime example is the Raleigh MRI office where a 1.5 Tesla Siemens Vision scanner with state-of-the-art hardware and software has significantly improved image quality and greatly expanded the application of MR to the chest, abdomen and pelvis. The MR facility was also one of the first outpatient facilities in the United States to install a MR-compatible integrated contrast injector. The ultrasound machines in our offices are all produced by a sonos and certified by the ACR (American College of Radiology) and most are equipped with color doppler which facilitates the detection and evaluation of vascular anatomy and vascular-related disease entities. The CT scanner at the new Cary office utilizes helical scanning technique which can improve lesion detection, shorten patient time on the scanning table, optimize contrast enhancement, and reduce the volume of intravascular contrast material administered. Other recent additions to our technologic armamentarium include Lunar DEXA scanners for performing rapid and accurate bone density measurements, and upgrading our nuclear cameras with SPECT, which allows for more precise three-dimensional localization of the radiopharmaceutical in the body. The mammography machines are both ACR and FDA certified.

Optimal utilization of the advanced imaging equipment requires highly trained technologists. Our subspecialty-trained technologists are certified by their respective organizations—sonographers by the American Registry of Diagnostic Medical Sonographers; nuclear medicine technologists by the Nuclear Medicine Technology Certification Board; and the MR, CT and mammography technologists by the American Registry of Radiologic Technologists. Periodic in-service lectures and presentations provide continuing education of the office staff.

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ADDED VALUE: IT’S BOTH QUALITY AND COST

William T. Djang, M.D.

The total cost of a radiology procedure cannot be measured in the charges alone—it’s added value that counts! And value is comprised of both cost and quality. Getting the most information with the right examination, performed right the first time on the right equipment ultimately saves time and money and reduces patient pain and inconvenience—in short, value. Consider the following scenarios:

Patient A receives an MRI study at another imaging center. The neuroradiologist feels that the study is technically sub-optimal, but insurance will not cover a repeat study at one of Wake Radiology’s state-of-the-art MRI facilities. The patient is then sent to Wake Medical Center for a myelogram and post-myelogram CT, requiring post-procedure observation—lost value in extra costs.

An orthopedist consults with Wake Radiology’s Dr. Charles Pope regarding Patient B’s shoulder complaints. Dr. Pope performs a shoulder ultrasound and diagnoses a rotator cuff tear. This saves a possible MRI and/or shoulder arthrogram—added value in reducing diagnostic cost.

Patient C goes to Wake Medical Center with acute abdominal symptoms. Appropriate abdominal CT is quickly performed because one of Wake Radiology’s radiologists is available in-house 24 hours a day each and every day. Similarly, Raleigh MRI is open nights and weekends—added value in accessibility.

Patient D has an abdominal aortic aneurysm. Instead of invasive angiography, the patient receives a custom-tailored MR angiogram performed by Dr. Glenn Coates at Raleigh MRI, using dynamic Gadolinium contrast injection with timed, single-breath-hold imaging. The MR angiogram elegantly depicts the vascular anatomy for pre-surgical assessment—all performed in one hour on an outpatient basis—added value in technical expertise.

Patient E is being treated for breast cancer at the new Wake Radiology Diagnostic Imaging and Oncology Services Center in Cary. Her diagnostic CT examination performed in this office is also used for three-dimensional treatment planning. The radiation oncologist discusses the case directly with the diagnostic radiologist—added value in integrated patient care.

These examples show that a decrease in the cost of a radiological procedure does not mean that quality or value has to be sacrificed. It’s possible to provide patients with quality diagnostic imaging that is timely and cost-effective, as well as accurate. Wake Radiology has always been committed to providing quality care at all of our offices.

MANAGED CARE UPDATE

Wake Radiology Diagnostic Imaging, Inc., Carolina Breast Cancer Detection Center, Inc., Raleigh MRI and Village Radiology currently contracts with the following Managed Care Organizations:
- Blue Cross Blue Shield—all plans
- Cigna Healthcare of N.C., Inc.
- Cigna Healthcare PPN/PPN & PPN/PCS (formerly Healthsource Provident)
- Doctors Health Plan
- Generations
- Healthsource North Carolina, Inc.
- Healthstar
- Jefferson Pilot PPO
- MedCost
- Medicare
- Medicaid

Wake Radiology Oncology Services currently contracts with the following Managed Care Organizations:
- Cigna Healthcare of N.C., Inc.
- Cigna Healthcare PPN/PPN & PPN/PCS (formerly Healthsource Provident)
- Doctors Health Plan
- Healthsource North Carolina, Inc.
- Generations
- Jefferson Pilot PPO
- MedCost
- Medicare
- Medicaid
- NCMM

Through North Carolina MedPartners Management (NCMM) (formerly Cardinal IPA, Piedmont IPA, and NCMA):
- Aetna/US Healthcare
- Cigna Healthcare
- Doctor’s Health Plan
- Kaiser
- Maxicare
- WellPath

Wake Radiology continues to align its managed care contracts with those of its referring practices. If there are additional managed care organizations that we should consider, please contact Michele Jackson at 854-4588 Ext. 115.

COMMITMENT

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Recognizing the increasing complexity of the field of radiology, Wake Radiology is committed to subspecialty-trained radiologists. More than two-thirds of our 30 radiologists have subspecialty training, and their expertise helps to keep the practice aware of all the latest advances in diagnostic imaging. For example, our MRI facility, under the direction of Dr. Glenn Coates, is one of only four sites in this country selected by Siemens Medical Systems to develop and test new MR-scanning protocols. Through the increasing use of electronic transmission of images, subspecialty expertise will become more readily available for consultation at all of the offices. Eventually the digital images from a MR exam will be available for review by the requesting physician on a computer network connection within an hour after completion of the study.

Any patient who comes to a Wake Radiology office can expect a courteous and careful exam. Patient surveys are conducted and reviewed quarterly at all of the offices and the quality of the staff is reflected in the high marks they consistently receive on these surveys. Patient safety has always been a high priority. For any examination that requires intravascular contrast administration, Wake Radiology exclusively uses non-ionic iodinated contrast material. Our office staff receive CPR training and instruction in the OSHA regulations. The imaging machines are regularly inspected by a medical physicist. Mammography patients are entered into a computer-tracking program and patients are notified if they have missed a scheduled follow-up exam. Both our technology and our technologists have been approved by the American College of Radiology and the Food and Drug Administration.

Wake Radiology continues to grow for the future and is committed to increasing the medical resources available to the citizens of the Triangle and surrounding communities. In addition to the newly expanded Cary office, a state-of-the-art radiation oncology center was recently opened in Cary. This facility will operate in collaboration with the Department of Radiation Oncology at the University of North Carolina. In addition, a northwest Raleigh office will open in December 1998. For more information about Wake Radiology, visit our web site at www.wakerad.com.
Wake Radiology is pleased to announce the addition of three new physicians to the practice. They are Jerry W. Burke, M.D., Gordon R. Randall, M.D. and Carroll C. Overton, M.D.

Dr. Burke received his M.D. from the University of North Carolina School of Medicine and served his surgical internship, surgical residency and diagnostic radiology residency at the University of Virginia Medical School in Charlottesville, VA. Dr. Burke completed a magnetic resonance imaging fellowship at Huntington Medical Research Institute in Pasadena, CA and a neurology fellowship at Bowman Gray School of Medicine in Winston-Salem. Dr. Burke is a member of the Radiological Society of North America and the American College of Radiology.

Dr. Randall is a graduate of the University of Tennessee College of Medicine. He completed a medicine internship at the University of Tennessee Hospital in Memphis, TN and diagnostic radiology residency at Duke University Medical Center. Dr. Randall is a member of the Radiological Society of North America and the American College of Radiology.

Dr. Overton graduated from the University of North Carolina School of Medicine. He completed a surgical internship, surgical residency and diagnostic radiology residency at Mercy Hospital of Pittsburgh in PA. He also completed a diagnostic radiology residency at the University of Pittsburgh and an interventional radiology fellowship at Alexandria Hospital in Virginia. Dr. Overton is a member of the Vascular Interventional Society.

Wake Radiology co-sponsored the event reception and two golf holes with Pinehurst Radiology Consultants. Wake Radiology's Celly Davis, Kathy Hurry, Michele Jackson and Penny Smith and Amy Barefoot, along with employees from Pinehurst Radiology staffed two golf holes located on the Pine Needles and Mid Pines golf courses.

Prizes, including golf umbrellas, were given to golfers hitting inside a circle drawn around the hole. Information about mammography and Wake Radiology’s new oncology center were available at each golf hole.

Approximately 200 golfers attended this year’s festival which was sold out months before the tournament. Wake Radiology’s managing partner, Dr. Robert Schaaf, says, “It’s very rewarding for us to see the increase in participants and the amount of money raised this year for such an important cause. We are very pleased that we are able to continue our community support for breast cancer education and research, and we are looking forward to participating again next year.”

The event will be held every year leading up to 2001, when the LPGA returns to Pine Needles Resort. In addition to Blue Cross/Blue Shield, Wake Radiology and Pinehurst Radiology Consultants, other sponsors included Glaxo Wellcome Inc., CP&L, First Citizens Bank, 360 Communications, BellSouth, Nortel, Sprint, BB&T, Duke Energy, IBM and Midway Airlines.

Wake Radiology’s John Sierra, M.D., enjoys the pre-banquet reception at Pine Needles Lodge and Golf Club in Southern Pines.

Secretary of State Jan Dempster, golfers Brady Strickland, Woody “Voice of the Tarheels” Durham, and Elaine Marshall prepare to putt for prizes at the Wake Radiology-sponsored hole.


Wake Radiology’s John Sierra, M.D.

Jerry W. Burke, M.D.

Carroll C. Overton, M.D.

Three New Physicians Join Wake Radiology

Bill Johnson Named Administrator of the Month
Festivities, visiting physicians and legislators, business dignitaries, television cameras, and families and friends of Wake Radiology staff marked the opening of the new state-of-the-art Wake Radiology Radiation Oncology center in Cary the first week in August.

The 16,000-square-foot facility combines both the new Cary office of Wake Radiology Diagnostic Imaging as well as Wake Radiology Oncology Services, the area’s first comprehensive cancer-treatment center independent from a hospital.

Managing Partner Dr. Robert E. Schaaf, Radiation Oncology specialists Dr. Joel E. Tepper, Dr. Jay A. Clark and physicist Per Halvorsen of UNC Hospital, greeted visitors over a three-day time frame. On the first evening, United States Senator Lauch Faircloth cut the official ribbon for the facility, with the help of officials from the Cary Chamber of Commerce and accompanied by Cary mayor Koka Booth.

Faircloth also unveiled the new Breast Cancer stamp for the visitors and media.

More guests visited the center on Thursday night. Friday evening was reserved for visits by Wake Radiology employees and their families.

“This is the realization of many months of planning and hard work by many people in the practice,” said Dr. Schaaf. “We are very pleased with the new center and very optimistic about its future.”

Patient service began in the diagnostic imaging office on June 1, and in radiation oncology soon thereafter.