FOCUS ON: STRUCTURED REPORTING

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Structured reporting

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Abstract

With new technologies in oncologic imaging usually more than 500 and sometimes up to even 2000 images are acquired per patient. Computer programs enable reconstruction of three-dimensional or function-integrated images. With a conventional written report, the transfer of the message to the referring clinician is limited. Also the observer subjectiveness of the report increases. Therefore it is essential to generate a structured report that includes a standardized written report with representative three-dimensional and/or functional images, tables, schemes, videos if necessary, and a final short conclusion and advice for further diagnostic steps. Such a report should be sent to the referring physician in a fast, effective (electronic) way. A structured report should be generated quickly in as operator-independent way as possible. This lecture illustrates the use of structured reporting in multimodality and nodal imaging of prostate cancer. Guidelines will be provided on how to objectively interpret and weigh the various functional imaging techniques such as delayed contrast enhancement diffusion-weighted imaging and magnetic resonance spectroscopic imaging combined with high-resolution T2-weighted imaging.