

QCDR Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
ACRad 15 !	Report Turnaround Time: Radiography	Mean Radiography RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	✓
ACRad 16 !	Report Turnaround Time: Ultrasound (Excluding Breast US)	Mean Ultrasound RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	√
ACRad 17	Report Turnaround Time: MRI	Mean MRI RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	√
ACRad 18	Report Turnaround Time: CT	Mean CT RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	√
ACRad 19 !	Report Turnaround Time: PET	Mean PET RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	√
ACRad 25 !	Report Turnaround Time: Mammography	Mean mammography report turnaround time (RTAT)	Communication and Care Coordination	Outcome	General Radiology Improvement Database	√
ACRad 34 !	Multi-strata weighted average for 3 CT Exam Types: Overall Percent of CT exams for which Dose Length Product is at or below the size-specific diagnostic reference level (for CT Abdomen-pelvis with contrast/single phase scan, CT Chest without contrast/single phase scan and CT Head/Brain	Weighted average of 3 former QCDR measures, ACRad 31, 32, and 33 Weighted average percent of CT Abdomen-Pelvis, CT Chest, and CT Head/Brain exams with contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level.	Patient Safety	Outcome	Dose Index Registry	



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	without contrast/single phase scan)					
ACRad 36 !	Incidental Coronary Artery Calcification Reported on Chest CT	Percentage of final reports for male patients aged 18 years through 50 and female patients aged 18 through 65 years undergoing noncardiac noncontrast chest CT exams or with and without contrast chest CT exams that note presence or absence of coronary artery calcification or not evaluable	Communication and Care Coordination	Process	General Radiology Improvement Database/MIPS Portal	
ACRad 37	Interpretation of CT Pulmonary Angiography (CTPA) for Pulmonary Embolism	Percentage of final reports for patients aged 18 years and older undergoing CT pulmonary angiography (CTPA) with a finding of PE that specify the branching order level of the most proximal level of embolus (i.e. main, lobar, interlobar, segmental, subsegmental).	Communication and Care Coordination	Process	General Radiology Improvement Database/MIPS Portal	
ACRad 41	Use of Quantitative Criteria for Oncologic FDG PET Imaging	Percentage of final reports for all patients, regardless of age, undergoing non-CNS oncologic FDG PET studies that include at a minimum: a) Serum glucose (eg, finger stick at time of injection) b) Uptake time (interval from injection to initiation of imaging) c) One reference background (eg, volumetric normal liver or mediastinal blood pool) SUV	Communication and Care Coordination	Process	General Radiology Improvement Database/MIPS Portal	



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		measurement, along with description of the SUV measurement type (eg, SUVmax) and normalization method (eg, BMI) d) At least one lesional SUV measurement OR diagnosis of "no disease-specific abnormal uptake."				
ACRad 43 !	DXA: Improving Reporting of True Change in Bone Mineral Density	Percentage of exam final reports for all serial DXA exams which have a comparable prior exam that include (1) an appropriate least significant change (LSC) statement referencing a facility's LSC values and (2) a second statement regarding whether the measurement differences between the current exam and the prior exam constitutes a significant change.	Communication and Care Coordination	Process	MIPS Portal	
MEDNAX55	Use of ASPECTS (Alberta Stroke Program Early CT Score) for non- contrast CT Head performed for suspected acute stroke	Percentage of final reports for non- contrast CT Head performed for suspected acute stroke that include an ASPECTS value.	Effective Clinical Care	Process	MIPS Portal	
MSN13	Screening Coronary Calcium Scoring for Cardiovascular Risk Assessment Including Coronary Artery Calcification Regional Distribution Scoring	Percentage of patients, regardless of age, undergoing Coronary Calcium Scoring who have measurable coronary artery calcification (CAC) with total CACS, regional distribution scoring, AND whether or not the regional distribution/ total CACS warrants further evaluation documented in the final report.	Effective Clinical Care	Process	MIPS Portal	



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MSN15 !	Use of Thyroid Imaging Reporting & Data System (TI- RADS) in Final Report to Stratify Thyroid Nodule Risk	Percentage of patients, regardless of age, undergoing ultrasound of the neck with findings of thyroid nodule(s) whose reports include the TI-RADS assessment.	Communication and Care Coordination	Process	MIPS Portal	
QMM16 !	IVC Filter Management Confirmation	Percentage of final reports for eligible exams where an IVC filter is present and the radiologist included a statement of recommendation in the impression of the report for the treating clinician to: 1) Assess if there is a management plan in place for the patient's IVC filter, AND 2) If there is no established management plan for the patient's IVC filter, refer the patient to an interventional clinician on a nonemergent basis for evaluation.	Patient Safety	Process	MIPS Portal	
QMM17 !	Appropriate Follow-up Recommendations for Ovarian- Adnexal Lesions using the Ovarian-Adnexal Reporting and Data System (O-RADS)	The percentage of final reports for female patients receiving a transvaginal ultrasound (US) examination of the pelvis (including transabdominal/transvaginal exams) where a clinically relevant lesion is detected, in which the radiologist describes the lesion using O-RADS Lexicon Descriptors and subsequently makes the correct clinical management recommendation based on the O-RADS Risk Stratification and Management System.	Communication and Care Coordination	Process	MIPS Portal	



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QMM18 !	Use of Breast Cancer Risk Score on Mammography	The percentage of final reports for screening mammograms which include the patient's estimated numeric risk assessment based on a validated and published model, and appropriate recommendations for supplemental screening based on the patient's estimated risk and documentation of the source of recommendation.	Patient Safety	Process	MIPS Portal	
QMM19	DEXA/DXA and Fracture Risk Assessment for Patients with Osteopenia	All patients with osteopenia, aged 40-90 at time of service, who undergo DEXA scans for bone density who have their FRAX score reported and a statement of whether they meet criteria for pharmacologic treatment to prevent osteoporosis included in the final report	Effective Clinical Care	Process	MIPS Portal	
QMM23 !	Low Dose Cancer Screening Recommendation for CT of Chest with Diagnosis of Emphysema	Percentage of emphysema patients, 50-77 years of age at time of service, who undergo a CT/CTA of the chest in which the final report: • Mentions that the presence of pulmonary emphysema on CT is an independent risk factor for lung cancer, AND • Includes a recommendation to consider the patient for low dose CT (LDCT) lung cancer screening in the future (current chest CT serves as baseline).	Population Health	Process	MIPS Portal	



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QMM24	Acute Rib Fracture Numbering	Percentage of patients, regardless of age,	Effective Clinical	Process	MIPS Portal	
!	on ED Trauma Patients	undergoing a CT/CTA of the chest in the	Care			
		Emergency Department with a diagnosis				
		of acute rib fracture(s) who have				
		documentation of rib fracture				
		numbering, laterality of rib fracture(s),				
		and presence or absence of ribs				
		fractured in two or more places in the				
		final report.				
QMM26	Screening Abdominal Aortic	Percentage of patients, 50 years of age	Effective Clinical	Process	MIPS Portal	
ļ !	Aneurysm Reporting with	and older, undergoing a screening	Care			
	Recommendations	ultrasound for abdominal aortic				
		aneurysm (AAA) that have recognized				
		clinical follow-up recommendations				
		documented in the final report and direct				
		communication of AAA findings >5.5cm				
		in size made to the ordering provider.				
QMM27	Appropriate Classification and	Percentage of final reports for CT, CTA,	Communication	Process	MIPS Portal	
!	Follow-Up Imaging for Incidental	MRI or MRA of the abdomen or	and Care			
	Pancreatic Cysts	abdomen/pelvis for patients 18 years of	Coordination			
		age and older with a pancreatic cyst				
		incidentally noted that include				
		documentation of cyst classification and				
		follow-up imaging recommendation(s) in				
		accordance with published guidelines				
		and source of recommendation.				
QMM28	Reporting Breast Arterial	Percentage of final reports for screening	Communication	Process	MIPS Portal	
!	Calcification (BAC) on Screening	mammography for female patients 40	and Care			
	Mammography	years of age and older that include	Coordination			



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		documentation of the presence or absence of Breast Arterial Calcification (BAC) and its clinical relevance.				