



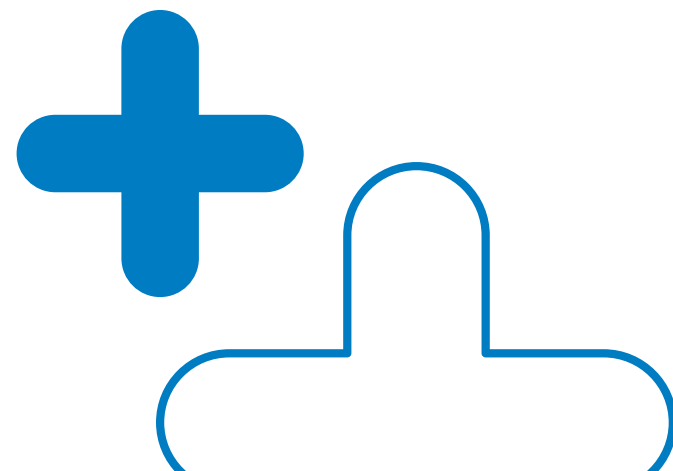
April 22nd 2026



Are we contributing to the demise of the Ontario Health Care System?

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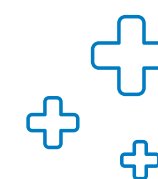


I have no disclosures



Premise

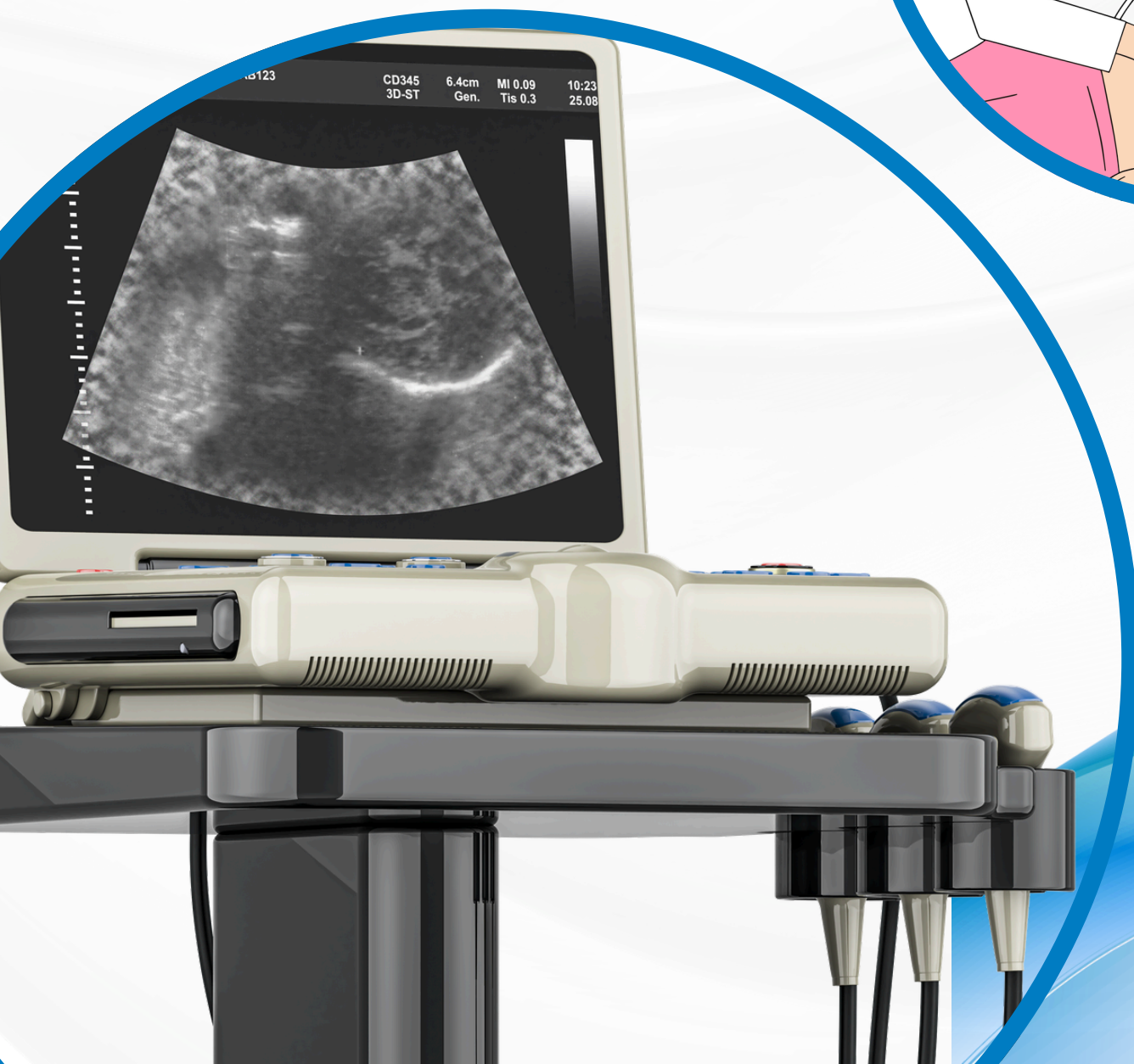
Is the over-ordering of tests (as an example: diagnostic imaging, specifically ultrasound) by physicians and nurse practitioners contributing to the financial strain on the health care system?





Background

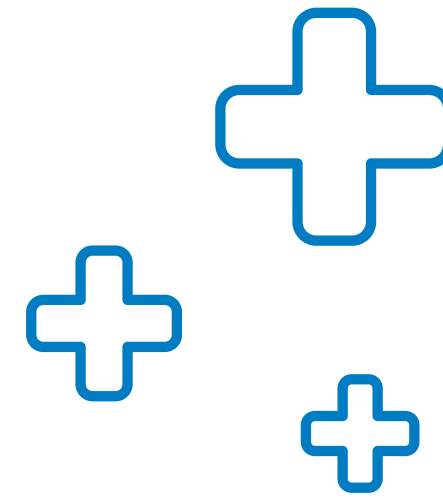
- What is the annual number of ultrasounds performed in Ontario?
- Is there a difference between number of ultrasounds ordered in urban vs rural areas?
- What is the total cost ?
- How do provincial numbers compare to MAHC numbers?





Objectives:

- to identify the rationale for the research project
- to provide a description of the research project
- to describe the methodology for collecting data



Reasons for ordering tests

- patient pressure
- suggested by radiologist as a follow up
- poor/inadequate history and physical examination skills
- poor teaching of history and physical examination skills
- time constraints
- fear of litigation
- fear of being wrong/lack of confidence
- as a fall out from the COVID pandemic and the trend towards virtual visits - tests are used as a surrogate for physical examination
- awaiting specialists' opinion
- N of 1 - difficult to change behaviour
- less tolerance for diagnostic uncertainty



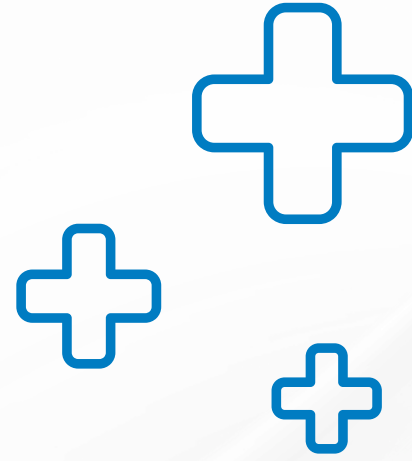
Implications:

- cost
- health anxiety (tests beget tests)
- incidentalomas
- inequitable access (patients who have PCP's get more care/more tests leading to less availability for others)
- long wait times



Ultrasound study	technical fee	professional fee	total cost
Face and/or neck (excluding vascular study)	47.30	23.70	\$71.00
Abdominal scan	48.75	26.45	\$75.20
limited study (abdomen)	32.10	17.55	\$49.65
Pelvis	48.75	26.55	\$75.30
Intracavitary ultrasound	48.75	26.50	\$75.25
Venous assessment (bilateral)	7.40	9.90	\$17.30

Ultrasound study	technical fee	professional fee	total cost
Breast (per breast)	23.70	13.10	\$36.80
Scrotal	47.30	23.80	\$71.10
Extremities (per limb excluding vascular study)	25.50	14.95	\$40.45



If you don't specify the target organ of interest, there is a good chance of identifying unrelated incidentalomas which will then need to be followed.

gallbladder & biliary tree - 20 min

abdomen - 30 min

abdomen/pelvis - 40



The Research Proposal



To review a representative sample of abdominal/pelvis/TV ultrasounds completed in fiscal year 2024/2025 at MAHC-Huntsville site and by reviewing the original requisitions, to ascertain the appropriateness of the exam using ACR (American College of Radiology) criteria



What is the ACR appropriateness criteria?

The American College of Radiology (ACR) Appropriateness Criteria are evidence-based clinical guidelines that help clinicians choose the most appropriate imaging test or treatment for a specific clinical condition.

They answer the question:
What is the best imaging study (if any) for this patient's problem?

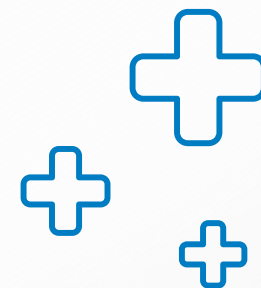


Thyroid Ultrasound

Don't routinely order a thyroid ultrasound in patients with abnormal thyroid function tests unless there is a palpable abnormality of the thyroid gland.

Testicular Ultrasound

Don't perform an ultrasound in children with undescended testes.

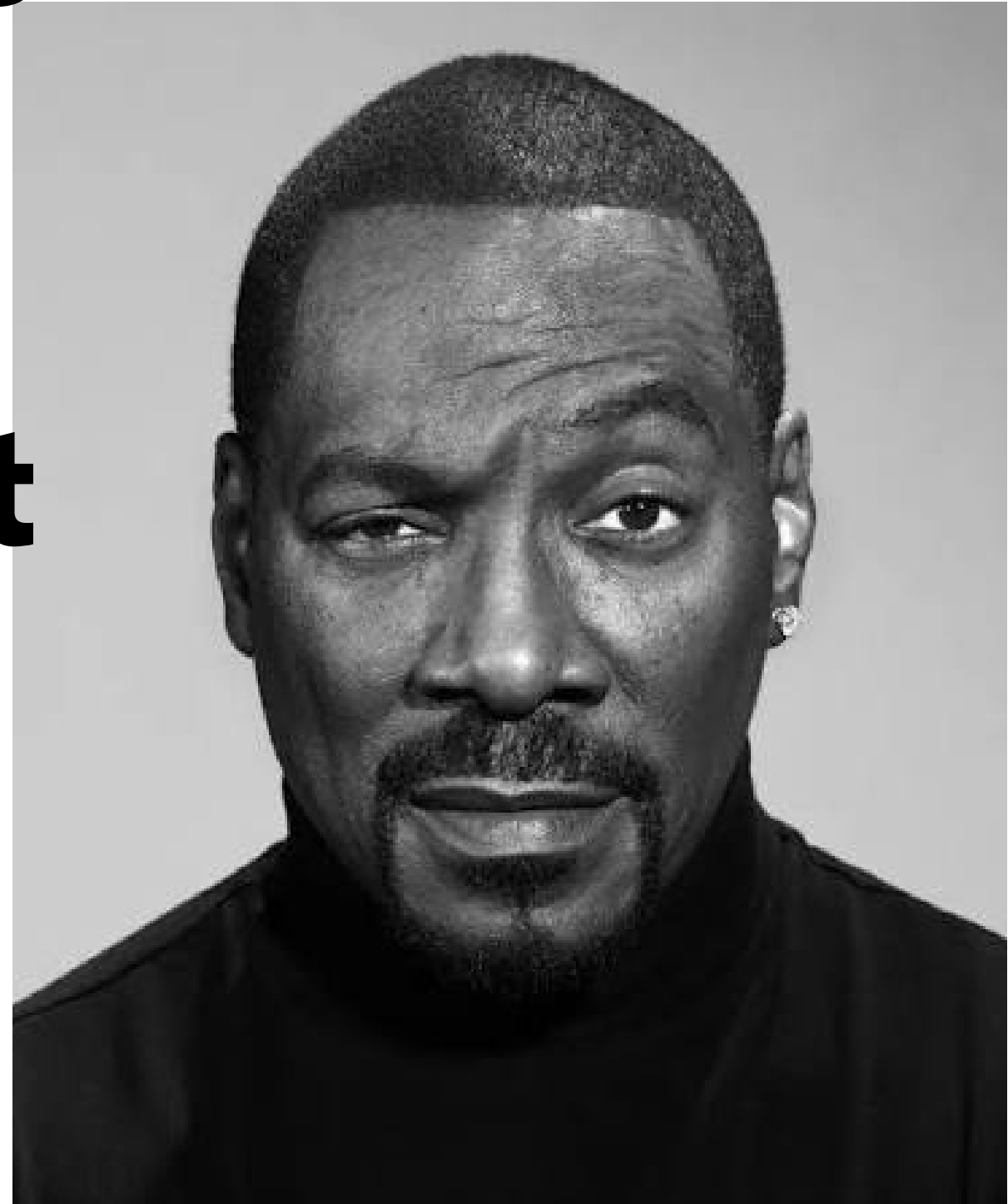


Choosing Wisely Guidelines

Neck Ultrasound

Don't order a neck ultrasound to investigate a complaint of odynophagia or globus sensation.

**When the doctor asks
for a gall bladder
study and the patient
has had a
cholecystectomy**



Quiz

A bilateral shoulder ultrasound is a useful test for bilateral shoulder pain.

1. *True*

2. *False*

Quiz

A patient with clinical evidence of a hamstring tear with limp, bruising and swelling with full active knee flexion and hip extension requires:

- 1. an MRI*
- 2. an ultrasound*
- 3. physiotherapy*
- 4. empathy*

Quiz

A subcutaneous, painless, soft, mobile mass with a palpable edge is most likely to be:

- 1. sarcoma*
- 2. epidermoid cyst*
- 3. lipoma*
- 4. sebaceous cyst*

Quiz

An ultrasound is required for the diagnosis of a lipoma.

1. *True*

2. *False*



**Some final
thoughts**

Imaging is not a substitute for a physical exam.

Soft tissue injuries (ie bruises) don't require an ultrasound. Because of wait times, patients are showing up with their injuries resolved.

Just because we can order tests doesn't mean we should.

Ordering a thyroid, abdomen and right shoulder ultrasound on the same patient means you're fishing.

The first words out of your mouth should not be, “we should get an ultrasound.”

We’re never going to get to the sick if we’re scanning the worried well.

SYNDROME



If everything is urgent, nothing is.

Disney presents a PIXAR movie



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Practising Wisely:

Reducing unnecessary testing and treatment

May 27, 2026



Practising Wisely | Reducing Unnecessary Testing and Treatment

Practising Wisely: Reducing unnecessary tests and treatments is an interactive workshop designed for health professionals working in primary care. Through case-based learning, it addresses overdiagnosis and overtreatment, and explores various clinical tools to foster positive changes in practice. This would also be an excellent complement to the Choosing Wisely Canada National Meeting taking place on **May 25 & 26** in **Toronto**.

**YOU GET AN ULTRASOUND, AND YOU
GET AND ULTRASOUND!!!**



**EVERYBODY GETS AN
ULTRASOUND!!**



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