

# Superficial Analysis or Inappropriate Indications for Echocardiography?

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#### Dear editor,

We would like to make some considerations about the Brief Communication Inadequate Request of Transthoracic Echocardiography.

Guidelines<sup>2</sup>, extremely valuable tools for medical practice, should be used according to critical thinking and adapted to real world patients. Individuals at increased risk, if neglected, are exposed to social and economic costs much higher than those of any diagnostic investigation.

### **Keywords**

Echocardiography/Standards; Echocardiography/utilization; Guidelines/Standards; Guidelines/utilization.

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#### Replay

We thank the opportunity to respond to the considerations regarding our article titled Inadequate Request of Transthoracic Echocardiography. Please, find our comments below.

1. Medical societies worldwide have striven to improve the quality of medical testing. The initiatives of the American College of Cardiology, via the Imaging in FOCUS and Appropriate Use Criteria for Echocardiography<sup>2</sup>, and of the Radiology Society of North America, via Image Wisely<sup>3</sup>, are remarkable. The search for quality is essential in the asymmetric world we live in, where patients from the public health care system wait months for tests, such as echocardiographies, scans and tomographies.

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The medical ethics code<sup>3</sup> forbids physicians to disclose confidential data of their patients without consent. Thus, a simplistic analysis of test request forms is definitely inappropriate.

We consider of fundamental importance to analyze the incidence of echocardiographic abnormalities detected in patients whose indications to undergo that test were considered inappropriate<sup>1</sup>, in order to evaluate de actual accuracy and validity of each indication.

Finally, data that are superficially analyzed and presented might expose physicians even more to the increasing restriction of their activities and to legal traps.

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2. At the Universidade Federal Fluminense, we coordinate a research line about quality in imaging tests, which comprises the study of the best indications for the tests. We were the first to publish studies about the use of appropriateness criteria for echocardiography in Brazil<sup>4</sup> and the comparison of such criteria between the private and public health care systems<sup>5</sup>. Appropriateness criteria are extremely valuable tools for medical practice, allow improvement of quality, and are used by an increasing number of medical societies.

3. Our study was approved by the Committee on Ethics and Research, as reported in the article, and the indication for the test by the requesting physician was analyzed in

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an interview with the patient by the echocardiographer FCPB, who performed all the tests of the study<sup>5</sup>. Data were extensively analyzed, and the requesting physicians were contacted to clarify doubts, whenever possible. Describing the findings of the tests was not within the scope of the study.

4. Cardiology must lead the movement for quality. Knowing that of every 100 echocardiograms 8 are grade III indications of the Brazilian Guidelines for Echocardiography is important, because we can better manage access to the test, allowing patients with more solid indications to have priority access, improving test availability for users in need of it.

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Sincerely,

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