

## CHAPTER-19

### STUDY ON CONVERSION OF OPD PATIENTS TO RADIOLOGY: A STUDY ON FINDING REVENUE LEAKAGES IN RADIOLOGY DEPARTMENT AT CK BIRLA HOSPITALS RBH, JAIPUR

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## **INTRODUCTION**

For hospitals to ensure ongoing profitability, they face two primary challenges. Firstly, there's a constant need to attract new patients, and secondly, maximizing revenue from each patient visit is a critical factor that often remains less understood due to inherent constraints. The Outpatient Department (OPD) serves as the initial point of contact for patients in multi- or super-specialty hospitals. Depending on the treatment plan outlined in OPD records, which mainly include prescriptions, patients can opt for diagnostic, pharmacy, or Inpatient (IP) services either within the hospital or from external providers offering similar services. Each lead from the OPD represents a potential new client. As healthcare managers, it is imperative to convert these leads into satisfied and loyal clients. The patient's journey starts from their initial interaction with the organization and concludes when they become a contented patient [1].

Previous research indicates that higher conversion rates correlate with increased revenue generated from the radiology department, enhanced diagnostic accuracy, and an overall improvement in patient care. Factors influencing radiology conversion rates include prolonged waiting times, the affordability of services, and the range of services offered [2].

## **RESEARCH OBJECTIVES**

1. To ascertain the count of patients recommended for radiology examinations in the outpatient department.
2. To compute the conversion rate indicating the percentage of OPD patients utilizing radiology services.
3. To investigate and understand the factors contributing to non-conversions.

## **RESEARCH METHODOLOGY**

The study was conducted at CK Birla Hospital RBH, Jaipur. The study population comprised patients of all age groups who were advised for radiology investigations from the hospital in the period from March 2023 to May 2023. All age groups, from pediatrics to geriatrics,

were included. Inclusion criteria includes patients paying through cash or insurance were considered. All departments, including ENT, cardiology, internal medicine, pulmonology, neurology, neurosurgery, gastroenterology, gynecology, spine surgery, nephrology, endocrinology, pediatrics, vascular surgery, internal medicine, urology, orthopedics, and oncology, were part of the study. Exclusion criteria includes situations requiring urgent radiology intervention were excluded. Data were collected from doctor coordinators through Google Sheets and prescriptions, as well as manually, throughout the entire process.

## **RESULTS & DISCUSSION**

During the period from March to May, all patients visiting the OPD were systematically recorded. When a patient initially visits the OPD for consultation or regular follow-up, the doctor decides whether radiology investigations are necessary. The patient is then given the choice to either proceed with the recommended radiology services or decline. If the patient chooses to avail the radiology services, it is considered a conversion of OPD patients to the Radiology department.

The primary objective of this conversion process was to minimize revenue leakage within the organization and cater to the maximum number of patients. Over the last three months, a substantial number of patients were successfully converted to radiology services. In March, the conversion rate was 76% of the total advised, and by May, it increased to 89%. Even specialties that previously had lower conversion rates experienced an improvement over the past three months.

Reasons for non-conversion were also identified, including financial issues related to patients, long waiting times for investigations, and limited resources. These factors played a role in the decision of some patients not to proceed with the recommended radiology services.

## **CONCLUSION**

To enhance the efficiency of the process, it was recommended to conduct regular training sessions and workshops for the personnel engaged in the various aspects of the procedure. Additionally,

implementing a Google sheet to comprehensively capture the details of all non-conversions will prove instrumental in facilitating a more effective monitoring system for these cases. Furthermore, fostering strong collaboration and open communication channels among key personnel, including saarthis, the billing department, and the radiology team, is crucial to prevent any potential confusion or delays throughout the entire process. These measures aim to optimize the overall workflow and improve outcomes in the conversion of patients from OPD to the radiology department.

## **REFERENCES**

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