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## COLUMBUS BUSINESS FIRST

### EXCLUSIVE REPORTS

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## Doc practice brings imaging in-house

[Jeff Bell](#)

Business First

Dr. Gary Ansel still seems a bit amazed by the clarity of images generated by a new computed tomography scanner at [MidOhio Cardiology and Vascular Consultants](#).

"It's kind of mind-blowing," he said while viewing a highly detailed computer image of blood vessels in a patient's neck. "We can get some absolutely pretty pictures."

The nice thing, Ansel said, is the CT scans are being done at MidOhio's office building, rather than at a hospital or medical imaging center.

Such in-office testing is part of a developing national trend in which cardiology physician groups are trying to gain more control over their medical imaging requirements, Ansel said.

In MidOhio's case, the 20-physician practice recently began leasing \$3 million in imaging equipment for its 59,000-square-foot building off Olentangy River Road near [Riverside Methodist Hospital](#).

The equipment includes the CT scanner, a magnetic resonance imaging machine and positron emission tomography scanner.

"We've created a noninvasive vascular lab," said Ansel, a cardiologist whose specialties include treating peripheral vascular disorders, such as those in the legs and neck. "We end up being more efficient in diagnosing disease."

That includes making use of scans that detect blockages in blood vessels and the heart.

The images can help doctors detect congenital heart defects, and they serve as a road map for cardiologists plotting procedures such as cardiac catheterizations and placing pacemakers in patients.

Having the technology close at hand gives MidOhio's physicians better control of the scans they order for patients, Ansel said.

Patients enjoy the convenience of getting tests done at their cardiologist's office, he said. In addition, they sometimes can avoid more medically risky hospital-based procedures because of the rapid improvements in medical imaging equipment.

The equipment is becoming so sophisticated, Ansel said, that it may reduce some of the need for invasive procedures, such as angiograms and even low-risk diagnostic cardiac catheterizations.

"The most important thing is patient comfort and the noninvasive nature of these (vascular) studies," he said. "It's all quicker, safer and more comfortable for patients. That's what the public is demanding and the convenience they want."

### **Making it work**

While confident imaging equipment in their offices can improve patient care, cardiologists are less certain about whether the investment in the equipment will pay off from a business standpoint, said Suzanne Inglis, MidOhio's executive director.

"It's expensive and still unclear where it will all go," she said. "It's a big step for a physician practice."

Inglis said MidOhio's goal since opening its building in 2003 has been to be a full-service cardiovascular practice.

It already provides in-office services such as echocardiograms, nuclear imaging, stress tests and vein procedures.

The new CT scanner is providing images for MidOhio's doctors, she said.

The the MRI machine is used primarily for musculoskeletal scans by the Max Sports orthopedic specialists who are tenants in the company's building.

The positron emission tomography scanner produces three-dimensional images of the metabolic processes of the body. Its uses include spotting cancers and detecting whether heart tissue is alive.

Most of MidOhio's vascular and heart imaging procedures are reimbursed by insurance plans, Inglis said. The main exception is hearts scans that screen for calcium build-ups in arteries. Those cost patients \$199.

### **Helping other docs**

MidOhio will accept walk-in patients for heart scans, but Inglis said the practice tells patients they must have a family physician to whom the results can be shown for recommendations on follow-up care.

"We don't want to give information to patients without evaluation by a doctor," she said, adding MidOhio's primary marketing focus is on primary-care physicians who refer patients to its cardiologists.

A calcium screening can be a wake-up call for patients wondering if their family medical history and health habits put them at high risk for a heart attack, Ansel said.

He mentioned one patient who gave up cigar smoking and agreed to take a second cholesterol-lowering medicine after being shown a calcium build-up in his arteries.

Ansel also said the razor-sharp images generated by a CT scanner can change the attitudes of primary-care doctors as they develop treatment plans for patients.

"It gives them a clearer picture in their mind as to what patients have in them," Ansel said. "They can weigh the risk better for that patient."

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