



MRI Empowered PCa Pathway

Prostate Cancer and the New MRI-Directed Pathway

Urology and Radiology in Synergy

Urologists Need High-Quality Radiology Reports

The Diagnostic Pathway for Prostate Cancer Has Evolved

Worldwide urologic guidelines now point to mpMRI prior to every biopsy. This means Radiology's interpretation of mpMRI is critical to the prostate cancer pathway.

But, today's reporting results in missed biopsy targets.

Existing nomenclature carries different meanings between Radiology and Urology departments. For example, right-mid medial on a Radiologist's MRI may be dissimilar to right-mid medial on a Urologist's ultrasound image during biopsy.

Tools that ensure accurate communication between Radiology and Urology are critical to enhancing patient outcomes.



1 in 6 lesions are subject to misinterpretation.¹

17% of lesions are localized in different sectors by Radiology and Urology.¹

You are not wrong. Radiology and Urology are speaking two different languages.

As a result of differences in patient positioning during MRI acquisition and biopsy, one in six lesions are reported in a different sector than they appear during US-guided biopsy.¹ In fact, the average orientation difference between MRI and ultrasound biopsy is 12 degrees.¹



Do more with MRI.

MIM Symphony® allows Urologists and Radiologists to speak the same language. Radiologic findings are efficiently translated for targeted biopsies and an MRI empowered prostate care pathway.

Additional Resources

Download additional content below to learn more.

 [MIM Symphony Dx Brochure](#)

Footnotes

¹. J Piper, F Giganti, D Mirando, K Krawiec, AS Nelson, C Allen, MIM Software Inc, University College London Hospital; Evaluation of the impact of orientation differences between mpMRI and US in biopsy. Study presented at the European Society of Urogenital Radiology Association, Barcelona, SP