



*Think left and think right and think low and think high.
Oh, the thinks you can think of if only you try!*

—Dr Seuss

I Am on the Right Side

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The whole idea of humans having two sides is a problem for radiologists.

From the outset, we look at everything backwards. Remember the mind-bending idea the first time you wrapped your cortex around that fact? It takes the first half of a radiology residency to figure out that right is left and left is right (except for 3D VR images, which are NOT. Figure that out.).

This leads to an eternal issue for radiologists: it is a miracle we can drive correctly on the right, and direct people to our house (“Take a left at the big tree---uh, no, that’s a right at the big tree. Well, anyway, you’ll know.”). Those socks with R or L on them are just plain evil.

Consequently, we field hundreds of calls to fix the sides in a dictation. Most times, I just do it myself. I pull up the report and I find that I indeed was dictating the right side but called it left repeatedly. My bad.

Other times, I only pull the side error in the impression. Got it right everywhere else, but in the home stretch with the finish line in view, I threw a shoe. Reversed it. We have software built into the dictation system that’s supposed to fix this potential cause of extended work hours, or at least call it to your attention. The software, unfortunately, is nearly worthless.

OK, though. When was the last time you disagreed with the referrer about the side of the

pathology and **you** were right? You know what I mean. Request says one thing, findings say another. So, you do the obvious, natural thing (well, at least most of us do). You open the EMR and find out what the office note says. And, voila, the office note is wrong. Phone call inevitably results.

Them: “Hi. Calling you about the findings on Billy Bob. You said it’s left. That’s incorrect. Symptoms and my notes say it was right. Could you addend that? I’m seeing them this afternoon.”

Me: “Well, it is on the left on the study, and I did pull up your office notes. Indeed, you said right, so I pulled up the tech and nurse’s notes from the imaging center. Both talked to the patient and said left.”

Them: “No, that’s wrong. It’s the right. Like my office note. I’m looking at it now.”

Me: “Well, it’s **still** on the left on the study and I also pulled up the patient comment notes from their visit. They said they had a problem on the left. In fact, it’s right here, ‘My problem is my left ear.’”

Them: “Impossible. Let me look at my office note again.”

Me: “I also checked their audiogram. It was abnormal on the left.”

Them: “(long pause) Let me get back to you. Click.”

I take that as a victory. They are few, but we cherish them. I know that for the next month, I will always be wrong, but I did pull this one out.

Keep doing that good work. Mahalo.

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