



## Emergency Neuro Image Transfer System

### **Acute Stroke Protocol (CT/ multiphase CTA)**

1. Emergent CT/multiphase CT angiogram studies are the primary diagnosis imaging modality to support a Telestroke and/or Endovascular Treatment (EVT) consultation for a patient presenting with acute stroke symptoms.
2. The minimum imaging set for initial Telestroke or EVT consultation has been defined by CorHealth Ontario in the [acute stroke CT/mCTA imaging protocol](#). Designated Telestroke and other selected hospitals within stroke regions are expected to use the minimal imaging set outline in the protocol.
3. Currently sites connected to ENITS *should* have adopted the **Push All** protocol for these studies.
4. Images are removed from ENITS after 7 days.
5. Disks should be sent for patients being transferred to a tertiary care center for additional intervention upon request.

### **Push All CT/ CT Angio Emergent Pelvic and Lower Extremity Exams**

6. **Emergent CT/ CT Angiogram** pelvic and lower extremity studies should be sent to ENITS as the primary diagnosis imaging modality to support a consult related to femoral occlusions and/ or lower limb ischemia.
7. Currently sites connected to ENITS have adopted the **Push All** protocol for emergent CT/ CT-Angiogram study sets.
8. Images are removed from ENITS after 7 days.
9. Disks should be sent for patients being transferred to a vascular/ cardiac center upon request.

Exams are removed from the ENITS archive after 7 days from initial receipt.



### **Push All CT/ CT Angio Emergent Abdominal / Thoracic Exams**

10. **Emergent CT/ CT Angiogram** studies are the primary diagnosis imaging modality to support the consult process for **Type A** or **Type B Aortic Aneurysms or Dissections** in the province.
11. Currently sites connected to ENITS have adopted the **Push All** protocol for emergent CT/ CT-Angio abdominal and chest (thoracic) exams
12. **Push all** refers to the process implemented by referring hospitals to push emergency CT/ CTA studies to ENITS directly from the modality.
13. Images are removed from ENITS after 7 days.
14. Disks should be sent for patients being transferred to a vascular/ cardiac center upon request.

### **Push All CT Emergent Head and Spines**

15. **Emergent CT heads** are the primary diagnosis imaging modality to support the consult process for all emergent neurosurgical and spinal cases in the province.
16. Currently sites connected to ENITS have adopted the **Push All** protocol for emergent CT head and spine (C,T and L) exams
17. **Push all** refers to the process implemented by referring hospitals to push emergency CT heads and spines to ENITS directly from the modality.
18. Images are removed from ENITS after 7 days.
19. Disks should be sent for patients being transferred to a neurosurgical center upon request.

### **On Demand MRI Emergent Spines**

1. On-demand refers to the selective process by the referring hospital to post emergent MRI spine exams to ENITS.
2. The on-demand process will be defined between the Diagnostic Imaging and Emergency / ICU department.

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## **ENITS Help desk**

1. If you are having any issues posting exams to ENITS, please contact the Help Desk by phone: [1-877-465-7167](tel:1-877-465-7167) or if local [519-685-8335](tel:519-685-8335)
2. The Help desk is available **24 hours/day X 7 days/week**
3. The Call Agent will document your access issue. Ensure that during the call, you communicate the following:
  - It is an **ENITS** call
  - The Hospital you are calling from
  - A thorough description of the problem
  - A call back #
4. In the event your request **does not require immediate attention**, please Email the ENITS Support at : [enits@lhsc.on.ca](mailto:enits@lhsc.on.ca):
  - Modify an existing modality
  - Add a new modality
5. Additional ENITS reference materials can be found SWODIN website via the following link:

<https://swodin.ca/ENITS>