

Breaking Free from First-Generation Workflow Orchestration



Customer Profile

Organization:

Zwanger-Pesiri Radiology

Practice Type: Large, independent outpatient imaging practice

Geography: Long Island

Scale



~80 radiologists



~3,500 studies per day



~1 million studies annually

Clinical Environment

- Subspecialty-driven reading
- Complex payer credentialing and referrer requirements
- Multi-site coverage with strict fairness and compliance expectations

When Practice Growth Exposes the Limits of Rules-Based Workflow

Zwanger-Pesiri Radiology (ZP) is a prominent, long-standing provider of diagnostic imaging services on Long Island, New York, operating 22 offices across Nassau and Suffolk counties. As the practice expanded, study distribution became increasingly complex. Each case had to be routed based on subspecialty, payer credentialing and licensure as well as oft-changing referrer preferences and coverage rules.

Since 2015, the organization relied on a first-generation workflow orchestrator from Primordial. While this solution helped move the practice toward automation, workflow grew more complex as the number and location of sites shifted and imaging volume increased. Over time Zwanger-Pesiri's infrastructure expanded to:

- 120+ worklists
- 2,000+ routing rules
- Continuous rule updates

Within this framework, PACS administrators spent significant time with hands-on monitoring to ensure the right radiologists were seeing the right studies at the right time.

FTEs Managing Worklists and Assigning Studies

"We had the equivalent of two full-time people whose job was managing radiologist worklists and manually assigning studies," said Lynn Chiesa, ZP's director of clinical applications. "Those resources weren't improving workflow; they were maintaining it."

Additional manual processes were required, explained Chiesa. One involved assignment of the same radiologists to read multiple exams performed on a single patient within a 24-hour period. Another involved an additional layer of "preferred readers"; a manual "blocking" of other radiologists from seeing any exams the referrer wanted a particular radiologist to read. "Several hours were required to set this up for each individual worklist," Chiesa said. "We put in countless of hours just to get our baselines in place. Many additional hours were required to make tweaks as radiologists and referrers transitioned."

ZP CEO and President Steven Mendelsohn, MD, said, "Some practices liken this scenario to an airport with a full cadre of air traffic controllers. New technologies such as AI-assisted monitoring, have helped redefine what's possible in modern aviation management. Many opportunities exist in our industry to leverage new orchestration solutions to improve both efficiency and safety."

The Hidden Strain: Data Normalization

ZP also faced challenges due to variation across data structures coming into their tech stack based on originating clinic sites. HL7 messages were inconsistent in naming conventions and metadata. When sites changed behavior or new volume was added, routing rules broke.

To overcome this challenge, ZP aligned staff to:

- Manually review study descriptions
- Create custom rules
- Handle exceptions on an ongoing basis

Normalization became a recurring operational burden, feeding rule sprawl and the need for constant human oversight. Again, ZP's first-generation orchestrator fell short in its automation capabilities.

Cherry Picking is Inefficient

With hundreds of worklists and overlapping queues, the practice defaulted to having individual radiologists prioritize studies for review. "Clinicians spent valuable time navigating workflows instead of reading," Dr. Mendelsohn stated.

"I can't even say how painful cherry picking is."

"To ensure fairness and compliance, we aligned site supervisors to monitor queues and override many of the assignments being made by our 'automated' system. We were back a brutal reality of human enforcement and all the costs and hassles that come with it."

The Shift to NewVue: Rules Had Limits

Searching for a next-generation worklist orchestration platform required careful evaluation to ensure the new solution would be both robust and cost-effective. "Clearly, we needed to reduce reliance on time-intensive manual work," said Chiesa. "More importantly, we needed to accommodate operational requirements of critical importance to our practice, such as managing insurance restrictions for newly credentialed radiologists and supporting frequent changes in preferred reader workflows."

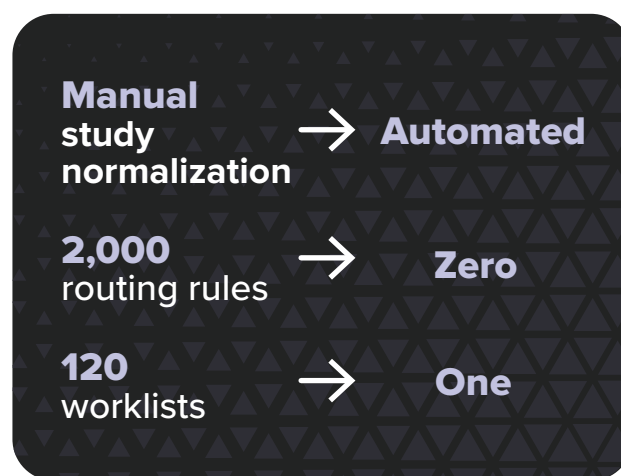
In 2025, ZP replaced its rule-based model with NewVue's Intelligent Worklist, the radiology industry's first solution to unify multiple PACS and workflows into one modern queue and auto-parse cases to individual radiologists based on intelligent review of credentials, subspecialty, coverage and priority.

Dr. Mendelsohn takes pride in being an early adapter of software that he believes provides significant value. "We've enjoyed collaborating with NewVue to ensure that we're optimizing the use of their solution in our environment," he states. "This sets the stage for a strong, long-term partnership."

NewVue's platform incorporates an LLM for exam data normalization. Now, instead of manually cleansing HL7 data, NewVue platform pulls data from existing systems and standardizes it.

Beyond this, with the NewVue platform in place, each of ZP's 22 practices no longer needs to individually rebuild and maintain thousands of static routing rules, Chiesa explains. "The system's embedded profiling-based approach streamlines assignment of the right cases to the right radiologist at the right time."

ZP's operational footprint changed dramatically. With NewVue, the practice went from:



"We set it up once and that's it. Now it just runs."

— Stephen Mendelsohn,
MD, CEO & President of
Zwanger-Pesiri Radiology

"Every radiologist reads from a curated queue. They're reading in order. We no longer ask, 'Is someone reading something they shouldn't?'" explained Dr. Mendelsohn.

With the days of radiologist cherry-picking behind them, ZP's leadership has confidence knowing that studies were being distributed correctly and equitably. This is an especially important foundation for radiologist retention and recruitment, he added.

Deployment and Training: Simpler Than Expected

While ZP replaced its reporting application and rolled out NewVue at the same time, Chiesa said that in retrospect, she would have preferred to phase these efforts -- not because NewVue was difficult to deploy, but because reporting change is inherently a more complex undertaking.

“Our build was incredibly easy. All we had to do was pull data from our existing systems.”

- Lynn Chiesa, *Director*

“Our radiologists have found the user interface to be significantly more intuitive. Training took no more than 10 minutes per physician,” Chiesa said.

Changing the reporting structure was a bit more complicated, Chiesa added. “Separating the two would have been an easier path for my team and the radiologists but it made sense for us to bundle the projects so that radiologists could learn both systems in a single session rather than taking time away for two,” she said.

New Operational Approach: Opportunity to Redeploy Talent

Before implementing NewVue’s Intelligent Worklist, ZP required the equivalent of two full-time IT staff to maintain workflow mechanics, update routing rules, normalize studies, monitor queues and assign cases. NewVue eliminated this maintenance burden, allowing these resources to be redirected to other strategic priorities.

“One challenge I didn’t anticipate was thinking through options to redeploy IT team members,” shared Chiesa. “I moved some team members to higher-value projects. They were happy to take on new, more important work. And leadership was pleased to see action happening on stalled projects.”

Automation Yields Financial and Workflow ROI

Chiesa cited meaningful ROI in two distinct areas, each tied to a specific workflow improvement.

First, by replacing its rules-based workflow model with NewVue’s profiling-based orchestration approach, the practice eliminated the ongoing burden of building, updating, and monitoring thousands of routing rules. They also reduced much of the manual normalization and exception handling that previously required dedicated staff attention.



2 FTEs × ~\$120,000
fully loaded cost



= ~\$240,000 annual
operational savings

Second, NewVue eliminated the requirement for radiologists to interrogate multiple worklists. Instead of navigating overlapping queues and deciding what to read next, each radiologist now works from a curated worklist containing only eligible, prioritized studies.



~80 radiologists, ~240
workdays, estimated
3% time-savings



~4,600 radiologist
hours of annual reading
capacity unlocked



approximately \$1.8M in
annual value at
\$400/hour

These figures reflect the combined value of simplifying radiologist workflow and reducing IT team effort requirements to maintain orchestration logic. They do not include additional gains such as reduced billing risk, faster site onboarding, or improved scalability as volume grows.

“In reducing manual queue navigation and manual study selection, we unlocked meaningful reading capacity across our practice radiologist team,” Dr. Mendelsohn stated.

Why It Matters

Like many radiology practices, ZP's operational infrastructure evolved into a system that required:

- Hundreds of worklists
- Thousands of brittle rules
- Manual normalization
- Continuous oversight

By bringing NewVue's Intelligent Worklist into its tech stack, ZP moved seamlessly and cost-effectively to next-generation orchestration with:



AI-based normalization



Policy-driven automation



Workflow that scales without adding staff



Increased satisfaction among clinical and administrative team members

ZP transformed a human-supervised workflow into one that runs seamlessly in the background. The IT effort once absorbed by rules management and routing was freed for higher-impact initiatives. Radiologists gained meaningful reading capacity through a simpler, more focused workflow experience.

“From an IT perspective, knowing we have additional platform capacity to grow into is extremely valuable.”

- Lynn Chiesa, *Director*

“Working with NewVue is like a breath of fresh air,” Chiesa said. “They have rock-solid technology and amazing people. Because several members of my team had done past projects with PeerVue, we had an instant foundation of trust. Their team worked quickly to guide us from kick-off to go-live. Since then, they’re always available to answer questions and brainstorm new ideas.”

NewVue's Intelligent Worklist is a core pillar of EmpowerSuite™, the company's cloud-native platform that brings curated clinical data, AI and voice tools, report creation, and other technologies together in an all-in-one Radiologist Cockpit designed to modernize radiology workflow without requiring rip-and-replace of existing PACS systems.

“We’ve found a solid, long-term partner. We look forward to working with our colleagues at NewVue to envision new opportunities.”

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RADIOLOGY**

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RADIOLOGY WORKFLOW JUST RUNS.

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