Medical Imaging Recommendations Guide

For Healthcare Providers



This Page Intentionally Left Blank

Table of Contents

	Pages 3 - 4: Contrast Guidelines
Page	s 5 - 8: Body Imaging Recommendations
Page 9:	Musculoskeletal Imaging Recommendations
Page 10:	Neuroradiology Imaging Recommendations

Page 11: IR / Scheduling / Reports / Contact a Radiologist



Contrast Guidelines

Exam	Clinical Diagnosis	Contrast Usage
CT/CTA		
CT Abdomen/Pelvis	Eval Abdominal Organs, Abdomen Pain,	With IV Contrast
	Eval or F/u Cancer, Eval Hernia, Post-Trauma for Injury to Or	rgans
CT Abdomen/Pelvis	Kidney Stones, Contraindication to IV Iodine	Without IV Contrast
	(Allergy, Poor Kidney Function)	
CTA Abdomen/Pelvis	Known AAA, AAA Endograft for Leak,	Without & With IV Contrast
	Eval for Abdominal Aortic Dissection	
CT Chest (High-Res)	Eval Interstitial Lung Disease (ILD)	Without IV Contrast
CT Chest (Routine)	Eval Lung Mass/Abnormalities on X-ray,	With IV Contrast
	Susp. Primary Lung Cancer, Susp. Mediastinal Mass,	
	Susp. Lung Abscess/Empyema,	
	Initial Assessment of Pulmonary Nodules	
CT Chest (PE)	Pulmonary Embolism	With IV Contrast
CT Chest	Surveillance of Known Lung Nodules	Without IV Contrast
CTA Chest	Acute Aortic Syndromes, Including Aortic Dissection,	Without & With IV Contrast
	Intramural Hematoma Penetrating Atherosclerotic Ulcer,	
	Aortic Aneurysm	
CT Enterography	Crohn's Disease, Eval Small Bowel Polyps	With IV and Special Oral Contrast
CT Facial Bones	Trauma, Post-Op or Pre-Surgery Planning, Eval Hardware	Without IV Contrast
CT Facial Bones/Neck	Eval Facial Swelling/Redness, Rule-Out Abscess/Mass,	With IV Contrast
	Lymphadeonopathy	
CT Head	Headaches, Post-Trauma for Injury/Bleeds, Post-Op Eval,	Without IV Contrast
	Shunt or Other Placements	
CT Head	Eval Tumor(s)	With IV Contrast
(If MRI Contraindicated,	<u> </u>	
CTA Head or Neck	Eval Arteries in Brain for Poss. Aneurysms and/or Blockage,	With IV Contrast
	Eval for Stroke	
CT Liver w/ Pelvis	Eval Liver Masses, HCC, Elevated LFTs, Liver Failure	With IV Contrast
(Triphasic)		
CT Orthopedic/MSK		Without IV Contrast
CT Pancreas w/ Pelvis	Eval Pancreatic Masses	Without & With IV Contrast
CT Urogram	Renal Mass/Hematuria/UTIs, Rule-Out Urinary Tract Cancer	Without & With IV Contrast
CT Sinus	Acute/Chronic Sinusitis	Without IV Contrast
CT Soft Tissue Neck	Neck Mass, Soft Tissue Pathology, Neck/Facial Swelling/Redness	
CT Spine	Trauma, Post-Op Eval, DDD/Narrowing	Without IV Contrast
(If MRI Contraindicated)		
CT Temporal Bones) Hearing Loss, Ear Pain, Trauma	Without IV Contrast

Contrast Guidelines

Exam	Clinical Diagnosis	Contrast Usage
MRI/MRA		
All MRA/MRI Abdomen /Pelvis Exams	Adrenal, Aorta, Liver, Gynecologic Organs, Kidney, Pancreas, Penis/Scrotum, Prostate, Rectum/Anus, Renal Arteries	Without & With IV Contrast
MRCP	Suspected CBD stone	Without IV Contrast
MRI Brain	Headache, Dizziness, Confusion, Stroke	Without IV Contrast
MRI Brain	Tumor, Infection	Without & With IV Contrast
MR Enterography	Abdominal Pain, Crohn's Disease	Without & With IV and Special Oral Contrast
MRI/MRA Neck		Without & With IV Contrast
MRI Orthopedic/MSK		Without IV Contrast
MRI Orthopedic/MSK	Suspected Tumor or Infection	Without & With IV Contrast
MRI Spine	HNP, Pain, Extremity Weakness, Tenderness, Cauda Equina	Without IV Contrast
MRI Spine	Suspected Abscess, Tumor, Recent Spine Surgery	Without & With IV Contrast

NOTES:

• If pt has history of recent or active cancer, order exam without & with IV contrast.



Clinical Signs & Symptoms	Clinical Diagnosis	Imaging Modality
Abdomen/Pelvis		
Abdominal-Specific Indications		
Abdominal Pain or Mass	Mass or Inflammation	СТ
Acute Abdomen	Perforation, Free Air, Diverticulitis, Shortness of Breath, Ischemic Bowel, IBD, Omental Infarct	СТ
Right Lower Quadrant Pain	Appendicitis	1. CT 2. Ultrasound
Weight Loss	Occult Primary Cancer	1. CT 2. MR
Adrenal-Specific Indications		
Adrenal Mass	Cyst, Myelolipoma, Hemorrhage, Met, Lymphoma	1. CT (Adrenal Washout) Without & With IV 2. MR
Cushing's or Conn's Syndrome	Hyperplasia, Adenoma, Cancer	CT (Adrenal Washout)
Hypertension, Flushing, Rash	Pheochromocytoma	1. CT (Adrenal Washout) Without & With IV 2. MR
Non-Hyperfunctioning Adenoma	Met vs. Adenoma	CT (Adrenal Washout) Without & With IV AMR
Aorta-Specific Indications		
Pulsatile Abdominal Mass	Aortic Aneurysm: 1. Screening or F/u 2. Rupture 3. Pre-Op Planning 4. Post-Op F/u	1. Ultrasound 2. CT 3. CTA or MRA 4. CTA
Biliary-Specific Indications		
Abnormal Liver Function Test	Mass or Obstruction	1. Ultrasound 2. CT 3. MR Cholangiography/ MR Live
Cholangitis	Choledocholithiasis	1. Ultrasound 2. MRCP
Painless Jaundice	Biliary Obstruction	1. CT Pancreas 2. MR/MRCP
RUQ Pain	Acute Cholecystitis, Cholelithiasis, Biliary/Gallbladder Dysfunction	1. Ultrasound 2. CT 3. MRCP 4. HIDA (Nuc Med)

Clinical Signs & Symptoms Clinical Diagnosis Imaaina Modalitv Abdomen/Pelvis Gastroenterology-Specific Indications Abdominal Pain Known or Suspected Crohn's Disease, 1. CT Enterography or Other Inflammatory Bowel Disease 2. MR Enterography (vounger pts or previous significant radiation exposure) Chronic GI bleed CT Enterography Post-Prandial Pain/Nausea Gastric Outlet Obstn/Gastroparesis 2. Gastric Emptying (Nuc Med) Rectal Cancer (Known) Local Staging MR Rectal Pain, Fever Perineal Abscess, Perianal Fistula MR Liver-Specific Indications Abnormal Liver Function Test, Steatosis MR Fatty Infiltration 1. MR Hepatocellular Cancer/Mass Cirrhosis, Hepatitis B 2. CT Triphasic Hypervascular Liver Metastases Renal, Carcinoid, GTD, Thyroid, Melanoma, 1. MR Islet Cell Cancer Pancreas, Leiomyosarcoma, 2. CT Triphasic GI Tract Mass < 2cm Cyst vs. Met vs. Hemangioma MR Mass >2cm MR Hemangioma, Met, FNH, Adenoma Pancreas-Specific Indications Elevated Amylase-Lipase Acute Pancreatitis (T Islet Cell Tumor Pancreas **Endocrine Abnormality** 1. CT Pancreas 2. MR Pain, Steatorrhea Chronic Pancreatitis 1. CT Pancreas MRCP/MR Recurrent Pancreatitis Pancreas Divisum MRCP/MR Weight Loss, Back Pain Pancreatic Cancer 1. CT Pancreas



Suspected or Known (Staging)

MR/MRCP

Clinical Signs & Symptoms	Clinical Diagnosis	Imaging Modality
Abdomen/Pelvis		
Urologic-Specific Indications		
Complex Cyst on Ultrasound / CT	Hemorrhagic Renal Cyst	MR
Hematuria	Rule-Out Renal Cancer, TCC, Bladder Cancer	1. CT Urogram 2. MR
Hypertension	Renal Artery Stenosis	1. MR Angiography 2. CT Angiography, If Stent
Increase in PSA, Abnormal Digital Exam	Prostate Cancer	1. Multiparametric MR 2. Transrectal US Biopsy 3. CT
Pyuria, Fever, Flank Pain	Pyelonephritis/Hydronephrosis	1. US 2. CT Urogram
Renal Colic, Hematuria	Ureteral Stone	СТ
Scrotal Mass/Pain	Testicular Cancer	1. US 2. MR

Chest		
Abnl CXR-Hilar or Mediastinal Mass	Lung Cancer, Lymphoma, Sarcoid	CT
Abnl CXR-Interstitial Lung Disease	IPF, UIP, Sarcoid	CT w/ high resolution thin sections
Abnl CXR-Nodule	Lung Cancer, Metastasis, Granuloma	СТ
Abnl CXR-Pleural Fluid and/or Mass	Empyema, Pleural Mass, Mesothelioma	СТ
Dysphagia	Rule-Out Esophageal Cancer	CT or Esophogram
Known Lung Nodule ≥10mm	Characterize, Rule-Out Malignancy	PET/CT
Lung Cancer (Known)	Staging	PET/CT
Non-Cardiac Chest Pain	Aortic Dissection	CT Angiogram
SOB, Dyspnea, Chest Pain	Pulmonary Embolus	CT Angiogram



Clinical Signs & Symptoms	Clinical Diagnosis	Imaging Modality
Pelvis/Abdomen	Cilincul Diagnosis	imaging modulity
General Indications		
Mass, Leg Swelling	Lymphadenopathy, Tumor	СТ
Posterior Buttock/Leg pain	Lumbosacral Plexopathy	1. MR 2. CT
Gynecologic		
Cervical Cancer	Local Staging	1. MR 2. CT
Endometrial Cancer	Local Staging	1. Ultrasound 2. MR 3. CT
Elevated BETA HCG	Gestational Trophoblastic Disease	1. Ultrasound 2. MR 3. CT
Abdominopelvic Mass (Suspected), Ascites, Increase in CA 125 Antigen	Rule-Out Ovarian Neoplasm	1. CT 2. MR
Adnexal Mass (Known)	Characterize	1. Transvaginal Ultrasound 2. MR
Infertility	Congenital Anomaly	1. Ultrasound 2. MR
Infertility	Tubal Patency	Hysterosalpingogram
Pelvic Pain, Anemia	Ectopic Pregnancy	Ultrasound
Pelvic Pain, Fever, Leucocytosis	Tubo-Ovarian Abscess	1. Ultrasound 2. CT
Pelvic Pain, Menorrhagia	Leiomyoma vs. Adenomyosis	1. Ultrasound 2. MR

Thyroid			
Thyroid Nodule or Goiter	Rule-Out Thyroid Cancer	US, Possible Biopsy	
Hyper/Hypothyroidism	Assess Thyroid Function	I-123 Thyroid Scan (Nuc Med)	
Thyroid Cancer (Known)	Initial Staging	1. Ultrasound 2. CT	
Thyroid Cancer (Known)	Restaging	1. PET/CT 2. CT	

Hyperplasia, Polyp, Cancer

Abnormal Post Uterine Bleeding

1. US w/ Possible Hysterosonography

2. MR

Musculoskeletal Imaging - Recommendations Guide

Clinical Signs & Symptoms	Clinical Diagnosis	Imaging Modality
Musculoskeletal		
Ankle	Pain, Occult Fracture, Osteochondritis Dissecans, Achilles Tendon Tear, Tendon Tears, Tendonitis, Avascular Necrosis, Infection/Osteomyelitis, Tumor/Mass	MR
Ankle	Impingement	MR Arthrogram
Ankle	Complex Fracture	CT
Elbow	Pain, Occult Fracture, Distal Biceps Tendon Tear, Epicondylitis, Avascular Necrosis, Tumor/Mass, Infection/Osteomyelitis	MR
Elbow	Collateral Ligament Tear	MR
Elbow	Complex Fracture	CT
Foot	Pain, Occult Fracture, Infection/Osteomyelitis, Tumor/Mass, Plantar Fasciitis, Tarsal Coalition, Tendon Tears, Tendonitis, Avascular Necrosis	MR
Foot	Complex Fracture	CT
Hip	Pain, Occult Fracture, Avascular Necrosis, Infection/Osteomyelitis, Tumor/Mass, Bursitis, Myositis/Tendonitis	MR
Hip	Acetabular Labral Tear, Impingement	MR Arthrogram
Hip/Pelvis	Complex Fracture, Painful Arthroplasty	CT
Knee	Pain, Occult Fracture/Contusion, Avascular Necrosis, Meniscal Tear, Cruciate Ligament Tear, Collateral Ligament Tear, Osteochondritis Dissecans, Infection/Osteomyelitis, Tumor/Mass	MR
Knee	Internal Derangement—MR Contraindicated	CT Arthrogram
Knee	Complex Fracture, Painful Arthroplasty	CT
Shoulder	Rotator Cuff Tear, Occult Fracture, Pain, Tendonitis, Bursitis, Impingement Syndrome, Proximal Biceps Tendon Tear, Avascular Necrosis, Tumor/Mass, Infection/Osteomyelitis	MR
Shoulder	Glenoid Labrum Tear	MR Arthrogram
Shoulder	Internal Derangement—MR Contraindicated	CT Arthrogram
Shoulder	Complex Fracture, Painful Arthroplasty	CT
Wrist	Pain, Occult Fracture, Avascular Necrosis, Carpal Tunnel Syndrome, Tumor/Mass, Infection/Osteomyelitis	MR
Wrist	TFCC/Interosseous Ligament Tear	MR Arthrogram
Wrist	Complex Fracture	CT
Known Myeloma		1. PET/CT
Suspected Skeletal Metastasis	Bone Pain	1. Bone Scan (Nuc Med)
Suspected Soft Tissue Mass or Ab	scess	1. MR 2. CT (if MR contraindicated)
Ulcer/Infection	Rule-Out Osteomyelitis	MR CT (if MR contraindicated or hardware present) Bone Scan (Nuc Med)

Neuroradiology Imaging - Recommendations Guide

Clinical Signs & Symptoms Clinical Diagnosis Imaging Modality

Brain/Head

Any brain/head order with a diagnosis of aneurysm or family history of aneurysm will have an MRA of the Circle of Willis (COW) in addition to the routine brain scan.

Head/Brain		
Acute Headache	Subarachnoid Hemorrhage	СТ
Cranial Nerve Dysfunction	Neuritis, Tumor	MR
Fever and Headache	Brain Abscess, Encephalitis	MR
Fluctuating Neurologic Symptoms	Multiple Sclerosis, Lyme Disease	MR
Galactorrhea, Elevated Prolactin	Pituitary Adenoma	MR Pituitary
Head, Neck, Vascular Work-Up	TIA, Stroke	MRA Carotid and Circle of Willis (COW) CTA if MRA Contraindicated
Head Trauma	Subdural Hematoma, Parenchymal Hemorrhage	СТ
Headache With Neurologic Deficit	Tumor	MR
Headache Without Neurologic Deficit	Tension Headaches	CT
Known Malignancy With Neurologic Deficit	Metastasis, Carcinomatosis	MR
Progressive Neurologic Symptoms	Tumor	MR
Seizures	Congenital Anomaly, Tumor	MR
Temporal Visual Field Cut	Pituitary Adenoma	MR Pituitary
Transient Ischemic Attack/Stroke (Symptoms less than 6 hours)	Bleed/Infarct	1. CT 2. MR
Transient Ischemic Attack/Stroke (Symptoms greater than 6 hours)	Bleed/Infarct	MR

Eye, Ear, Nose and Throat		
Double Vision, Diplopia	Neuritis, Tumor	Brain and Orbit MR
Facial Pain, Draining Nose	Sinusitis	Sinus CT
Infection, Draining Ear	Cholesteatoma	Temporal Bone CT
Proptosis	Orbital Mass	CT Orbit and Pituitary Region
Tinnitus, Sensorineural Hearing Loss	Acoustic Neuroma	MR
Lymphadenopathy/Mass (Neck)		1. CT 2. MR
Head & Neck Cancer (Known)	Staging/Restaging	PET/CT

Spine		
Myelopathy	Spinal Stenosis	MR
Progressive Spinal Cord Symptoms	Transverse Myelitis, Cord Tumor	MR
Radiculopathy	Osteophyte, Disc Protrusion	MR
Spine Pain With Known Malignancy	Metastasis	MR
Trauma	Fracture	СТ

Interventional Radiology (IR)

The Interventional Radiologists from Midwest Radiology perform a variety of procedures at various hospitals in the Twin Cities and surrounding communities, including

- Chemotherapy access port placement
- Tumor ablation, tumor embolization, biopsies & drainage
- Uterine fibroid embolization
- Stenting, angiography, and angioplasty for peripheral vascular disease

To schedule a consultation for your patient, call the IR Nurse at:
North Metro 763.792.1981 • South Metro 952.345.4179 • East Metro 651.917.9930

Outpatient Imaging Scheduling Information

West Metro Scheduling: 763.792.1999 East Metro Scheduling: 651.632.5700

Images & Reports

Images and report viewing is available. For access, please contact our IT department at 651.292.2100 or via e-mail at: Portal.Help@MidwestRadiology.com.

Contact a Radiologist

To speak with a radiologist, please contact:

West Metro (7 am to 10 pm - 7 days per week): 763.792.1973 East Metro (7 am to 10 pm - 7 days per week): 651.602.7237

West Metro & East Metro (10 pm to 7 am - 7 days per week): 651.602.7237

Website

www.MidwestRadiology.com