

Ten Things Physicians and Patients Should Question

As part of its ongoing efforts to ensure safe, effective and appropriate use of medical imaging, the American College of Radiology (ACR) identified a list of ten imaging exams whose necessity should be discussed before being ordered. The list, created as part of the Choosing Wisely® campaign, initiated by the American Board of Internal Medicine (ABIM) Foundation, provides evidence-based recommendations to support physicians working with patients to make wise choices about medical imaging care.

ACR recommendations address the following:

1. Imaging for uncomplicated headache absent specific risk factors for structural disease or injury
2. Imaging for suspected pulmonary embolism (PE) without moderate or high pre-test probability of PE
3. Pre-operative chest X-rays without specific reasons due to patient history or physical exam
4. Computed tomography (CT) to evaluate suspected appendicitis in children until ultrasound is considered an option
5. Follow-up imaging for adnexal (reproductive tract) cysts 5cm or less in diameter in reproductive-age women
6. Ultrasound imaging for incidental thyroid nodules found on CT, MRI or non-thyroid-focused neck ultrasound in low-risk patients unless the nodule meets age-based size criteria or has suspicious features.
7. Abdominal CT imaging that includes unenhanced CT followed by IV contrast-enhanced CT except for certain indications.
8. Abdominal CT imaging that includes a delayed post-contrast phase after the venous phase except for certain indications.
9. CT or MRI imaging for Pelvic Congestion Syndrome in patients that meet clinical and imaging criteria.
10. Follow-up imaging for nonobstructed, asymptomatic, isolated, short-segment jejunojejunal intussusception in adults.

Download patient-friendly resource here (PDF) (<http://www.choosingwisely.org/wp-content/uploads/2015/02/ACR-Choosing-Wisely-List.pdf>) .

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