

## **CT Scan/MRI Ordering Reference Guide**

The Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) Ordering Reference Guide is to provide guidance in ordering CT Scan and/or MRI scan. In many cases, the first line imaging maybe more appropriately an x-Ray (\*) and/or an ultrasound (±).

This reference guide intend is when the provider has pre-determined to order an CT Scan and/or MRI.

To Schedule an appointment call Preplanned Services: 614-546-4773(phone) and 614-546-4826 (fax)

	CT Scan/MRI				
BODY PART	SIGNS/SYMPTOMS	EXAM TO ORDER			
	Trauma, Cerebral Vascular Accident (CVA), Bleeding, Headache, Shunt Check, Alzheimer's, Memory Loss, Transient Ischemic Attack (TIA), Mental Status Change, Confusion, Seizure	CT Head without Contrast then after a CT Head without contrast was performed consider: MRI Brain Without Contrast for more severe symptoms or persistent symptoms			
BRAIN	Hearing Loss, Tumor, Elevated Prolactin Levels, Cranial Nerve Lesions, Dizziness, Vertigo, Multiple Sclerosis (MS), Arteriovenous Malformation (AVM), Pituitary Lesions, Seizures, Infection	MRI Brain without and with Contrast			
	Stroke, CVA, TIA	CT Head without Contrast then consider: MRI Brain without Contrast			
SINUSES	Pain, Congestions, Sinusitis	CT Sinus without Contrast			
	Infection, Mass	CT Orbits with Intravenous (IV) Contrast			
ORBITS	Trauma, Fracture, Foreign Body	CT Orbits without Contrast			
	Grave's Disease, Exophthalmus, Proptosis, Pseudo tumor, Vascular Lesions	MRI Orbits without and with Contrast			
FACIAL BONES	Trauma, Pain	CT Facial Bones without Contrast			
TEMPORAL BONES	Tinnitus, Cholesteatoma, Pain, Trauma	CT Temporal Bones without Contrast			
	Mass, Adenopathy	CT Neck with IV Contrast			
NECK	Infection, Pain, Vocal Cord Paralysis	MRI Neck without and with Contrast for problem solving or CT Contrast Allergy			
	Neural Tumor, Brachial Plexus Pathology	MRI Chest without Contrast			
	Hilar or Mediastinal Mass, Lung Cancer, Lymphoma, Sarcoid, Staging, Mesothelioma, Metastatic Work-Up	CT Chest with Contrast			
CHEST	Nodule, Cough, Pain	* CT Chest without Contrast			
CHESI	Interstitial Lung Disease, Idiopathic Pulmonary Fibrosis (IPF), Usual Interstitial Pneumonia (UIP)	* CT Chest, High Resolution, No Contrast.			
	Neural Tumor, Brachial Plexus Pathology	MRI Chest without Contrast			
	Pain, Colitis, Inflammatory Bowel Disease (IBD), Crohns, Appendicitis, Abscess, Tumor, Cancer	CT Abdomen and Pelvis with Oral and IV Contrast			
	Hematuria with Pain, Stone Survey	CT Abdomen and Pelvis without Oral and IV Contrast			
ABDOMEN and	Post Liver Embolization, Hemangioma, Hepatoma, Hepatitis, Cirrhosis, Pancreatitis, Pseudocyst	CT or MRI Abdomen without and with Contrast			
PELVIS	Biliary Obstruction, GB Stones, Jaundice, Abnormal Enzymes, Adrenal Mass	± MRI Abdomen with Contrast (MRCP)			
	IBD, Occult Gastrointestinal (GI) Bleeding, Diffuse Small Bowel Disease (SBD) (Gluten enteropathy)	CT Enterography usually after routine CT is inconclusive			
	Fibroid, Pre-Post Fibroid Embolization, Ovarian Mass, Endometrioma	± MRI Pelvis without and with Contrast			

Note: First line imaging maybe more appropriately an x-Ray (\*) and/or an ultrasound ( $\pm$ ).

CT Scan/MRI									
BODY PART	SIGNS/SYMPTOMS	EXAM TO ORDER							
	Pain, Trauma, Fracture, Fusion	* CT without Contrast of Specific Area							
CERVICAL, THORACIC and LUMBAR	Radiculopathy, Disc Herniation, Degenerative Disease	MRI without Contrast of Specific Area							
SPINE	Syrinx, Post-op Fusion, MS, Tumor, Cancer, Metastatic, Osteomyelitis, Myelopathy, Discitis, Compression Fracture with history of Malignancy, Epidural Abscess	MRI without and with Contrast of Specific Area							
	Fracture, Fusion, Malunion	* CT without Contrast of Body Part							
UPPER and LOWER EXTREMITIES -	Pain, Muscle/Tendon Tear	MRI without Contrast							
NON-JOINTS	Abscess, Cellulitis, Fasciitis, Osteomyelitis, Morton's Neuroma, Soft Tissue Tumor	MRI without and with Contrast of Body Part							
UPPER and LOWER EXTERMITIES -	Avascular Necrosis (AVN), Internal Derangement, Labral, Meniscal, Ligament and Cartilage Tears, Osteochondritis Dissecans (OCD)	* MRI without Contrast of Body Part							
JOINTS	Abscess, Cellulitis, Fasciitis, Osteomyelitis, Myositis, Tumor, Mass	MRI without and with Contrast of Body Part							
	Pain, Fracture	* CT Pelvis without Contrast							
PELVIS (BONY)	Muscle/Tendon Tear, Avascular Necrosis (AVN)	* MRI Pelvis without Contrast							
	Tumor, Mass, Osteomyelitis, Septic Arthritis	MRI Pelvis without and with Contrast							

CT/MR ANGIO								
BODY PART	SIGNS/SYMPTOMS	EXAM TO ORDER						
ABDOMEN AORTA	Aneurysm, Dissection, Post Stent Grafting, Renal Artery Stenosis, Mesenteric Stenosis	CTA Abdomen with IV Contrast						
PULMONARY ARTERIES	Pulmonary Embolism	CTA Chest Pulmonary Angiogram						
THORACIC AORTA	Thoracic Dissection	CTA Chest with IV Contrast						
CARDIAC	Screening Cardiac Calcium Scoring	CT Screening Cardiac Calcium Scoring						
LOWER EXTREMITIES	Peripheral Artery Disease	CTA Abdomen and Pelvis with Runoff with Contrast						
CAROTID	Stenosis, Bruit, TIA, CVA, Vascular Tumor	CT Neck with Contrast (Carotid Duplex may be first line study)						
BRAIN	Cerebral Aneurysm	CTA Head with Contrast  MRI Brain and MRA without Contrast						

Note: First line imaging maybe more appropriately an x-Ray (\*) and/or an ultrasound ( $\pm$ ).

For additional reference for Radiology Appropriateness: https://acseach.acr.org/list

## **Additional Ordering Notes:**

- CT Abdomen will only include from the top of the diaphragm to the top of the iliac crest. If the patient is experiencing any lower quadrant abdominal pain where appendicitis is suspected or there are concerns regarding the colon, small bowel and any pelvic organs pathology then CT of Pelvis must be ordered as well.
- Premedication is required for patients with a known contrast allergy, a history of severe allergic reaction and patients with asthma who use inhalers daily. Ordering physician will provider prescription for the premedication. Patient with asthma should bring rescue inhaler to the study.
- Contrast premedication protocol: Prescribe prednisone 50mg at 13, 7, and 1 hour prior to the exam and Benadryl 50mg 1 hour prior to exam
- Pacemaker, ocular metallic foreign bodies, mechanical ear implants, non-removable TENS units, any wire loop devises are all examples of devises that are incompatible with MRI.
- Discontinue Metformin the day of study and for 48 hour after the study has been completed.
- Renal function testing requirements for contrast enhanced studies:
  - "Stat" order necessary for blood draw to evaluate renal function (GFR/Cr) the day before or day of contrast enhanced study.
  - If patient with history of treatment with Diabetes or Hypertension medications or for patient 60 years or older, renal function must be evaluated within 6 weeks of contrast enhanced study.
  - For outpatient contrast enhanced CT/MRI, Creatine Guideline:
    - If GFR (Glomerular Filtration Rate) > 45 no further action necessary, proceed with contrast
    - If GFR (Glomerular Filtration Rate) 30 45 requires authorization by radiologists
    - If GFR (Glomerular Filtration Rate) < 30, IV contrast will not be given
- If you have any questions regarding MRI weight/height limits and which exam may be appropriate for your needs, please call one of our sites listed below and ask for the Radiologist.

Mount Carmel East: 614-234-6770 300 lbs./60 cm wide - 2 MRIs

500 lbs./70 cm wide - 1 MRI

Mount Carmel West: 614-234-5748

300 lbs./60 cm wide - 2 MRIs

Mount Carmel Lewis Center: 614-898-4020

Mount Carmel St. Ann's: 614-898-4020

300 lbs./60 cm wide - 2 MRIs

Mount Carmel Grove City: 614-234-5748

500 lbs./70 cm wide - 1 MRI

: 614-898-4020 Diley Ridge Medical Center: 614-234-6770

\*Actual capacity depends on patient's actual weight and height distribution

- To Schedule an appointment for CT Scan and/or MRI, physician order is required. The physician order must contain:
  - · Patient's Name and Date of Birth
  - · Patient's insurance information, including name of insurance carrier, ID number and group number
  - Prior authorization number or if prior authorization not necessary a reference number
  - Type of CT Scan and/or MRI with diagnosis and diagnosis code

Contact Preplanned Services via phone 614-546-4773 then fax order to 614-546-4826 (fax)

OR

Fax order to 614-546-4826 and Preplanned Service will contact the patient to schedule the CT Scan and/or MRI.

\*\*See back of page of listing of available Mount Carmel Imaging Centers.\*\*

## **MOUNT CARMEL IMAGING SERVICES**



			Bone Density	Cardiovascular Ultrasound	СТ	Digital Mammography	Interventional Radiology	MRI	Nuclear Medicine	PET/CT	Stereotactic Breast Biopsy	Ultrasound	X-Ray
	1	Mount Carmel East <i>Hospital</i> 614-234-7400		X	X		X	ΧV	ΧV	X		X	X
	1	Mount Carmel East <i>Imaging Center</i> 614-234-7400			Χ			X				X	X
	2	Mount Carmel West 614-234-7400		X	Χ		X	X	ΧV	X		X	X
RS	3	Mount Carmel St. Ann's <i>Hospital</i> 614-234-7400		X	Χ		X	X	ΧV			X	X
IMAGING CENTERS	3	Mount Carmel St. Ann's <i>Imaging Center</i> 614-234-7400			Χ			Χ		X		X	X
	4	Mount Carmel New Albany 614-775-6350 and 614-234-7400	Χ	X	Χ		X	Χ				X	X
	5	Mount Carmel Grove City 614-234-7400			Χ			ΧV				X	X
_≧	6	Diley Ridge Medical Center* 614-838-7994	Χ		Χ	X		X				X	X
	7	Lewis Center MC Fitness & Health 614-234-7400			Χ			ΧV				X	X
	8	Mill Run 614-234-7400			Χ							X	X
	Λ	Mill Run <i>Mount Carmel MRI Center</i> 614-234-7400						X					
WOMEN'S HEALTH CENTERS	10	Mount Carmel East 614-234-2900	X			X					X	Χ	
	11	Mount Carmel West 614-234-2900	Χ			X					X	X	
N'S F	12	Mount Carmel St. Ann's 614-234-2900	Χ			X					X	ΧV	
NO MB	13	Mount Carmel Grove City 614-234-2900	Χ			Χ							
<b>&gt;</b>	14	Lewis Center MC Fitness & Health 614-234-2900	Χ			X							
CARDIOVASCULAR IMAGING SERVICES	15	Diley Ridge Mount Carmel Heart & Vascular Specialists 614-920-3410		Χ					٧				
	16	Downtown Mount Carmel Columbus Cardiology Consultants 614-224-2281		Χ					٧				
	17	Dublin Mount Carmel Columbus Cardiology Consultants 614-224-2281		Χ									
	18	East Mount Carmel Columbus Cardiology Consultants 614-224-2281		Χ					٧				
	19	Grove City Mount Carmel Columbus Cardiology Consultants 614-224-2281		Χ					٧				
	20	Lewis Center MC Fitness & Health 614-459-7676		X									
	21	Mount Carmel New Albany 614-234-7400		X									
	22	Westerville Mount Carmel Clinical Cardiovascular Specialists 614-459-7676		Χ					٧				

**V** MRI Breast Imaging offered at this location.

**√** Automated Breast Ultrasound offered at this location.

√ Nuclear Stress offered at this location.

## References

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- 3. Bourjeily G. Pulmonary embolus in pregnancy. *Lancet* 2010; 375:500-512.
- 4. Schembri GP<sup>1</sup>, Miller AE, Smart R. Radiation dosimetry and safety issues in the investigation of pulmonary embolism. *Semin Nucl Med.* 2010 Nov;40(6):442-54. doi: 10.1053/j.semnuclmed.2010.07.007.
- 5. Vogl, J.T., Reith, W., Rummeny, E.J., (eds.). Diagnostic and Intervential Radiology. Berlin: Springer, 2016.
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- 9. Gore, R.M., Levine, M.S., (eds.), Textbook of Gastrointestinal Radiology. Philadephia, PA: Elsevier/Saunders, 2015.
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- 12. Griffin, N., Grant, L., (eds.) Grainger & Allison's Diagnostic Radiology Essentials. Edinburg: Churchill Livingstone, 2013.

This reference guide outlines the recommendations of Mount Carmel Health Partners for this medical condition and is based upon the referenced best practices. It is not intended to serve as a substitute for professional medical judgment in the diagnosis and treatment of a particular patient. Decisions regarding care are subject to individual consideration and should be made by the patient and treating physician in concert.