

# **Choosing CT or MRI**

## **ABDOMEN & PELVIS**

Area of Concern	Body Part	СТ	MRI		
Abdomen & Pelvis	Abdomen/ Pelvis	For generalized screening of abdominal pain, order CT Abdomen and Pelvis either W/ or W/O contrast. For more specific concerns, see individual organs below.			
	Liver/Biliary	CT Abdomen W/WO contrast for workup of the liver for known mass, lesion, or other abnormality. Consider MRI first.	If there is a known liver lesion or biliary system lesion, it is best to order an MRI Abdomen. If MRI is contraindicated, order CT Abdomen W/WO contrast.		
	Pancreas	For workup of the pancreas for known mass or worsening pancreatitis, order a CT Abdomen W/WO contrast	MRI/MRCP of Abdomen W/WO for cystic or solid pancreatic lesions.		
	Spleen	If there is no known abnormality but there is concern and a general screen is needed, order a CT Abdomen W/ contrast.	If there is a known spleen lesion it is best to order an MRI Abdomen W/WO contrast.		
	Kidneys	CT Abdomen/Pelvis W/O contrast if there is concern for renal stone. CT Abdomen W/WO for characterization of a known renal mass CT Abdomen /Pelvis W/WO (Urogram) for full evaluation of the collecting system, ureters, and bladder in case of hematuria (adult only)	MRI Abdomen W/WO if there is a known renal lesion for which characterization is required.		
	Adrenal Glands	If MRI is contraindicated, CT     Abdomen W/WO is recommended.	MRI Abdomen W/WO for evaluation of known adrenal gland pathology.		
	Bowel	CT Abdomen/Pelvis Enterography (W/ or W/O) for evaluation of small bowel focal or diffuse pathology.	MRI Enterography is an alternative.		
	Uterus/ Ovaries		If US of pelvis with transvaginal imaging finds suspicious lesions, MRI of the pelvis W/WO contrast for evaluation of the uterus and ovaries.		
	Bladder	CT Abdomen/Pelvis W/WO (Urogram) for evaluation of the collecting system, ureters, and bladder pathology (adult only).			

# **CT Scheduling Guide**

## **ABDOMEN & PELVIS**

Area of Concern	Body Part	Reason for Exam	IV Contrast	Exam to be Ordered	CPT Code
Abdomen	Abdomen General	<ul> <li>No IV contrast specifically requested by physician</li> <li>History of contrast allergy</li> <li>GFR &lt;40 ml/min</li> <li>Acute evaluation for:         <ul> <li>Retroperitoneal hemorrhage or follow-up hematoma, hemorrhage</li> <li>Renal Stones</li> <li>Hernia</li> <li>Abdominal pain</li> <li>Diverticulitis</li> <li>Appendicitis</li> <li>Colitis</li> </ul> </li> </ul>	No	CT Abdomen/Pelvis W/O contrast	74176
		<ul> <li>Abdominal pain</li> <li>Weight loss</li> <li>Appendicitis</li> <li>Diverticulitis</li> <li>Injury</li> <li>Colitis</li> <li>Bowel perforation</li> <li>Anastomotic leak</li> <li>Fever, including FUO</li> <li>Metastatic survey and follow-up</li> <li>Lymphoma</li> <li>Suspected intra-abdominal mass, non-localized</li> <li>Intra-abdominal abscess or fluid collection</li> </ul>	Yes	CT Abdomen/Pelvis W/ contrast	74177
	Liver	<ul> <li>HCC surveillance</li> <li>Cirrhosis</li> <li>Hepatitis</li> <li>Characterization of a focal liver lesion or mass seen on US or routine CT (consider MRI first, order CT only if MRI is contraindicated)</li> <li>Post-transplant evaluation</li> <li>Pre-op liver transplant and segmental liver resection</li> </ul>	Yes	CT Abdomen W/WO contrast	74170
		<ul> <li>Abnormal LFT's</li> <li>Splenic lesion (consider MRI if known splenic lesion)</li> </ul>	Yes	CT Abdomen W/WO contrast	74170
	Pancreas	<ul> <li>Acute pancreatitis</li> <li>Known pancreatic mass</li> <li>Known pancreatic neuro-endocrine (islet cell) tumor</li> </ul>	Yes	CT Abdomen W/WO contrast	74170

# **CT Scheduling Guide**

### **ABDOMEN & PELVIS**

Area of Concern	Body Part	Reason for Exam	IV Contrast	Exam to be Ordered	CPT Code
Abdomen & Pelvis	Bowel	<ul> <li>Suspected small bowel tumor</li> <li>Crohn's disease (IBD)</li> <li>Celiac sprue</li> <li>Unexplained iron deficiency anemia</li> <li>Suspected small bowel ischemia</li> <li>Malabsorption</li> </ul>	Yes	CT Abdomen/Pelvis W/ contrast (Enterography)	74177
		<ul> <li>Non-specific GI symptoms</li> <li>Change in bowel habits</li> <li>Irritable Bowel Syndrome</li> <li>Bowel obstruction</li> <li>Diarrhea</li> <li>Constipation</li> <li>Gastric Mass</li> <li>Distention/bloating</li> </ul>	Yes	CT Abdomen/Pelvis W/ contrast	74177
Genitourinary (Kidney, Bladder, Adrenal)	Renal	<ul> <li>Known renal mass</li> <li>Post-partial nephrectomy follow-up</li> <li>Characterization of focal renal mass, complex cyst or indeterminate lesion seen on US or routine abdominal or chest CT</li> </ul>	Yes	CT Abdomen W/WO contrast	74170
	Renal stone	<ul><li>Renal stone</li><li>Post-lithotripsy follow-up</li><li>Flank pain suspected stone disease</li></ul>	No	CT Abdomen/Pelvis W/O contrast	74176
	Adrenal	<ul> <li>Characterization of an adrenal nodule</li> <li>Adrenal hemorrhage</li> <li>Pheochromocytoma</li> <li>Conn's syndrome</li> </ul>	Yes	CT Abdomen W/WO contrast	74170
	Urinary System (Kidneys to Bladder)	<ul> <li>Bladder Cancer</li> <li>Microscopic or gross hematuria</li> <li>Evaluation for urinary tract anomalies</li> <li>Post cystectomy evaluation</li> </ul>	Yes	CT Abdomen/Pelvis W/WO contrast (Urogram)	74178
		<ul><li>Pyelonephritis</li><li>Renal abscess</li><li>Psoas abscess</li></ul>	Yes	CT Abdomen/Pelvis W/ contrast	74177

# CT Premedication for Patients with Contrast Allergy

#### **REQUIRES PREMEDICATION**

**MILD REACTION HISTORY:** Patients with history of mild prior allergic reaction to iodinated contrast (*such as hives, rash, pruritis, itchy or scratchy throat*) must be pre-medicated prior to IV contrast CT scan.

Required premedication protocol - for mild reactions only; Must be ordered by referring/primary medical provider.

• Prednisone:

40 mg PO to be taken 12 hours, and 2 hours prior to exam (two doses, 80 mg total)

### NO PREMEDICATION REQUIRED

**PHYSIOLOGIC REACTION HISTORY:** Patients with prior history of physiologic reactions to iodinated contrast (*such as nausea, vomiting, isolated chest pain, vasovagal reaction, or dizziness*) and patients with history of shellfish allergy do not require premedication.

### MAY NOT BE SEEN AT IMAGING HEALTHCARE SPECIALISTS

**SEVERE LIFE THREATENING REACTION HISTORY (ANAPHYLAXIS):** For patients with prior history of severe life-threatening reaction to iodinated contrast (*such as anaphylactic shock, laryngeal edema, severe swelling*); speak with a radiologist before ordering the exam. Consider non contrast CT, or alternate imaging modality. **Patients with known severe reactions will not be seen for a contrast exam at IHS.** 

## **Imaging Healthcare Specialists**

# **CT Locations**

- Oceanside (Tri-City) 3601 Vista Way
  - Ste 101 Oceanside, CA 92056
- 2 Encinitas 477 N. El Camino Real,
  - 477 N. El Camino Real Bldg A, Ste 102 Encinitas, CA 92024
- 12620 Monte Vista Road Ste A Poway, CA 92064
- 4 La Jolla (Golden Triangle) 4150 Regents Park Row Ste 195 La Jolla, CA 92037

- San Diego (Alvarado)
  - 6386 Alvarado Court Ste 121 San Diego, CA 92120
- **A** Hillcrest
  - 150 W. Washington Street San Diego, CA 92103
- **7** Chula Vista

333 H Street Ste 1095 Chula Vista, CA 91910

