**Provider Checklist-Outpatient –Imaging\_**

**Checklist: MRI Pelvis**

**(CPT code: 72195, 72196, 72197)**

 If suspected endometriosis, indicate AT LEAST TWO of the following: chronic, recurrent pelvic pain; dysmenorrhea; irregular menses; OR dyspareunia

 If follow−up endometriosis after medical Rx, indicate GnRH (Gonadotropin Releasing Hormone) agonist ≥ 8 wks, depot medroxyprogesterone/OCP(Oral Contraceptive Pill) ≥ 8 wks, OR danazol ≥ 8 wks

 If suspected adenomyosis, indicate sx/findings OR US nondiagnostic for adenomyosis. If indicating sx/findings indicate AT LEAST ONE of the following:

pelvic pain;

abnormal bleeding WITH BOTH vagina and cervix normal by PE AND continued abnormal bleeding indicating interferes with ADLs OR Hct < 27%(0.27) / Hb < 9.0 g/dL(90 g/L) unresponsive to iron Rx > 12 wks;

ureteral compression by US/IVP;

other associated symptoms WITH AT LEAST ONE of the following:

pelvic/abdominal pain/discomfort w/o other explanation;

urinary frequency/urgency w/o evidence of infection; OR dyspareunia;

OR infertility by Hx

If adnexal/pelvic mass by PE/KUB, indicate findings WITH newly discovered OR enlarging since last evaluation AND US nondiagnostic for etiology of mass

If suspected septate/bicornuate uterus, indicate

findings WITH infertility by Hx, spontaneous abortion by Hx OR cervical septum by PE; US nondiagnostic for septate/bicornuate uterus;

OR HSG (Hysterosalpingogram) WITH nondiagnostic for septate/bicornuate uterus OR contraindicated

 If cancer staging, indicate bladder cancer, rectal cancer, prostate cancer, cervical cancer OR endometrial cancer

If cryptorchidism, indicate BOTH testicle not palpable in scrotum/inguinal canal AND abdominal/pelvic US nondiagnostic for undescended testicle