**Provider Checklist-Outpatient – Imaging**

**Checklist: Ultrasound-Pelvis**

**(CPT Code: 76857)**

All Indications [**\*One has to be present**]

**\***Adnexal/pelvic mass by PE/KUB [**One has to be present**]

Newly discovered

Enlarging since last evaluation

**\***Suspected pelvic abscess [**Both have to be present**]

Pelvic pain > 24 hrs by Hx

Findings [**Two have to be present**]

Rebound tenderness

Temperature > 100.4 F (38.0 C)

WBC > 12,000/cu.mm (12x109/L)

**\***Acute abdominal/pelvic pain, unknown etiology ♦ [**All have to be present**]

Premenopausal woman

Lower abdominal tenderness

Pelvic examination nondiagnostic for etiology of pain

U/A or urine culture normal

Cervical cultures [Both]

Gonorrhea test negative

No chlamydia by DNA/antibody testing

**\***Chronic pelvic pain, unknown etiology [**All have to be present**]

Hx & PE nondiagnostic for etiology of pain

CBC normal

U/A or urine culture normal

Continued pain after Rx [**One has to be present**]

NSAID ≥ 4 wks

Depot medroxyprogesterone/OCP (Oral Cholecystogram) ≥ 8 wks

GnRH agonist ≥ 8 wks

Abx Rx x1 course

**\***Suspected ectopic pregnancy [**Both have to be present**]

Findings [**One has to be present**]

Abdominal/pelvic pain

Abnormal vaginal bleeding

Adnexal mass/tenderness by PE

Abnormal increase/lack of increase in quantitative HCG levels

HCG positive

**\***Suspected PID/tubo−ovarian abscess [**All have to be present**]

Lower abdominal pain

Cervical motion tenderness

Adnexal tenderness

HCG negative

Findings [**One has to be present**]

Temperature > 100.4 F(38.0 C)

WBC ≥ 12,000/cu.mm(12x109/L)

ESR ≥ 15 mm/hr

Purulent material by culdocentesis

Gonorrhea test positive

Chlamydia by DNA/antibody testing

> 5 WBCs per oil immersion field by Gram stain of endocervical smear

**\***Suspected ovarian cyst rupture ♦ [**Both have to be present**]

Sudden onset lower abdominal pain by

Abdominal tenderness/rebound

**\***Fibroids [**One has to be present**]

Initial assessment of uterine enlargement by PE

Known fibroids [**One has to be present**]

Uterus enlarging by PE

New onset abnormal bleeding

Tender fibroid by PE (recent onset)

**\***DUB in premenopausal woman [**All have to be present**]

910 Abnormal bleeding > 3 cycles

920 Vagina and cervix normal by PE

930 Continued abnormal bleeding after progestin/OCP x3 consecutive cycles

**\***Postmenopausal bleeding [**One has to be present**]

No HRT (Hormone Replacement Therapy)

Daily HRT ≥ 6 mos

Cyclic HRT ≥ 6 mos

**\***Assessment of follicle function with infertility [**All have to be present**]

Inability to become pregnant [**One has to be present**]

Age < 30 with inability to become pregnant > 1 yr

Age ≥ 30 with inability to become pregnant > 6 mos

Hx & PE normal

Male partner with normal sperm count and analysis

BBT (Basal Body Temperature) evaluation ≥ 12 wks

Ovulation confirmed by midluteal serum progesterone/endometrial Bx

TSH (Thyroid Stimulating Hormone) normal

**\***"Lost" IUD [**All have to be present**]

Sx/findings [**One has to be present**]

Patient desires removal of IUD

Pelvic pain

PID (Pelvic Inflammatory Disease)

Failed removal during pelvic exam

KUB (Kidney, Ureter, Bladder (Abdominal Plain Film)) nondiagnostic for location of IUD

**\***Cryptorchidism