

ORDERING GUIDELINES: MRI

GENERAL INFORMATION:

- **Pregnant Patients** – May undergo MRI exam at any stage of pregnancy if the risk-benefit ratio to the patient warrants the study be performed. Present data has not conclusively documented any deleterious effects of MR imaging exposure to the fetus. MRI contrast agents will not be routinely provided to pregnant patients. Consult with radiologist.
- **.Safety Screening** – Must be done on every patient before every MRI exam to insure safety. Must be signed. Will be reviewed by MRI staff. **In some cases of implants, written documentation will be needed before patient can be cleared for MRI exams.** MRI staff will help to gather appropriate information.
- **Clothing Policy** - All patients will be changed into hospital attire to insure safety of patient and staff. No jewelry, body piercings, hearing aides, hair clips, cell phones or valuables will be allowed in scan room. Lockers are provided.
- **GFR** - Current GFR needed within 30 days prior to MRI exam for outpatients and non admitted ED patients, within 48 hours for all inpatients.
GFR must be 30ml/min or above to receive contrast. Consult with radiologist if below.
- **Contrast Assessment Form** - Must be filled out and signed by patient, health care proxy or physician. Witness signature is needed as well.
- **Weight Limits** - BMC MRI: 350 lbs MAC MRI: 350 lbs NBIC MRI: 550 lbs
- **Interpreter** - If the patient does not speak English, you **MUST** notify Central Scheduling when you make the appointment that an interpreter will be needed.
- **MRI Forms** - You may print out the **MRI questionnaire** forms (Pittsfield form) (North Adams form) to give to the patient. The patient should complete the questionnaire and bring it to his or her appointment.
- **Contacts** -

Berkshire Medical Center MRI Dept	413-447-2000	x3815
Medical Arts MRI Dept	413-499-8500	x3080
NBIC MRI Dept	413-664-5196	

MRI GUIDELINES			
NAME OF EXAM	COMMON INDICATIONS	ORDERING NOTES	PATIENT PREP
<u>MRI NEUROLOGICAL EXAMS:</u>			
BRAIN With & Without Contrast	Hx or ? mass/infection Hx Cancer/?Mets Hx or ? Meningioma Hx or ? Pituitary tumor Demyelination/optic neuritis ? AVM Seizure (Acute, Single) Attn Trigeminal Nerve Bell's Palsy/ Skull Base Tumor	Need signs and symptoms. NOT Seizure Protocol	
BRAIN Without	Hx or ? Stroke/Infarct Headaches Dizziness/Memory loss/Vertigo Depression/Mental Status Change Trauma/Concussion Normal Pressure Hydrocephalus	Trauma Protocol	
BRAIN With	Follow up if without contrast already done. Recommended by radiologist.		
Brain Seizure Protocol – With & Without	R/O Mesial Temporal Sclerosis (MTS) Intractable/Chronic seizures Pediatric seizure	Not for single seizure.	
Internal Auditory Canal – With & Without	Hearing loss/Vertigo ? Acoustic Neuroma/CP Angle Tumor Pulsatile Tinnitus	Also order MRA Head & Carotids if pulsatile tinnitus	

Orbits With & Without	Orbital Mass Optic Neuritis/ Attn Optic Nerve		
MRA Head Without (COW)	Aneurysm/Stroke Pulsatile Tinnitus		
MRV Head With	Venous Sinus Thrombosis		
Cervical Spine With & Without	Mass/Abscess/Mets Hx Cancer/MS Osteomyelitis		
Cervical Spine Without	Stenosis/? disc/Radiculopathy HNP		
Cervical Spine With	Follow up for contrast if prior without already done Recommended by Radiologist		
Neck (Soft Tissue) With & Without	Soft tissue neck mass ? stone	For Parotid Glands/Thyroid/Larynx Not for cervical spine	
MRA Carotids With	Carotid Artery Stenosis Stroke Pulsatile Tinnitus		
MRA Carotids With & Without	Carotid Dissection		
MRA Carotids Without		Only order if patient's GFR below 35	
Brachial Plexus With & Without	? Mets/Tumor/Pain		

Thoracic Spine With & Without	Mass/Abscess/Mets Hx Cancer/MS Osteomyelitis		
Thoracic Spine Without	Stenosis/? disc/Radiculopathy HNP		
Thoracic Spine With	Follow up for contrast if prior without already done Recommended by Radiologist		
Lumbar Spine With & Without	Mass/Abscess/Mets Hx Cancer/MS Osteomyelitis Hx back surgery		
Lumbar Spine Without	Sciatica/Radiculopathy/Pain Stenosis/HNP		
Lumbar Spine With	Follow up for contrast if prior without already done. Recommended by Radiologist		
Lumbar Plexus With & Without	Multiple levels of nerve root involvement at lumbar area	Should always be with & without	
Sacral Plexus With & Without	Multiple levels of nerve root involvement at the sacral area	Should always be with & without	

MRI ABDOMEN/PELVIS			
EXAMS:			
Abdomen With & Without	Liver/Kidneys/Pancreas/ Spleen ? Mets/Pancreatitis/Abnormal LFT's ? Hemangioma Follow up CT	Must specify organ to be imaged.	
Abdomen Without	Adrenals ?Pheochromocytoma/?Adenoma MRCP (Biliary System) ? Stone/Obstruction Sclerosing Cholangitis		Must be NPO for 6 hours
MR Enterography With & Without	MRI Small Bowel Irritable Bowel Syndrome/Crohn's Ulcerative Colitis		Must be NPO for 6 hours Arrive 1 hour 15 min early Will be given oral contrast to drink (Volumen) Will be given glucagon to slow intestine Will be given metoclopramide PO to help empty stomach contents Will be given MRI IV contrast
Prostate With & Without	? Mass/Elevated PSA/ ? Mets	Done with Endorectal coil inserted in rectum	Pt needs suppository night before. No biopsy within 4 weeks.
MRA Aorta With & Without	? Stenosis HBP	Must specify Abdominal/Thoracic or Renal	

MRV Aorta With & Without	Venous structure abnormality	Specify Portal Vein/Renal Vein/SMV	
<u>MRI PELVIS EXAMS:</u>			
Pelvis With & Without	? Mass/Mets/Abscess/ Bony Lesion Follow up bone scan ? Tumor/Mets of hip		
	Surgical Planning for Rectal Ca Hx of Rectal Cancer	Rectal Ca Protocol	
	Pelvic Contents – Male Pelvic Contents - Female		
Pelvis Without	Bilateral Hips/Pain/?AVN	Always do bilateral for ? AVN	
Hip Without	Unilateral Hip pain	Specify side	
Lower Extremity With & Without	? Mass/Lesion/infection/Abscess Follow up bone scan	Select area of interest – Femur/lower leg/ankle/foot/toes Specify side	
Lower Extremity Without	Pain/? tear/Injury	Specify area of interest – Femur/lower Leg/Ankle/Foot/Toes	
MRA Extremity With & Without	Stenosis/PVD	Specify area of interest	

Arthrogram With Contrast	? Tear/Pain	Booked in conjunction with Xray under Fluoroscopy. Must specify joint – Shoulder/Elbow/ Wrist/Knee/Hip	
Upper Extremity With & Without	? Infection/Lesion/Abscess Follow up bone scan	Select area of interest- Shoulder/Humerus/Elbow/Forearm/Wrist Hand/Fingers	
Upper Extremity Without	Pain/tear/Injury	Select area of interest If for Bicep Tear – Must specify proximal or distal area	
<u>MRI BREASTS EXAMS</u>			
Breasts Bilateral With & Without	Hx or ? Cancer/Mets Mass/Lump Screening/Dense breasts	Must be booked 7-14 days after start of LMP (unless Emergent)	
Breasts Without	? Implant rupture	Specify which side Specify what type of implant (Saline/Silicone)	
Breast Biopsy/Needle Localization With & Without	Follow up from prior imaging	Booked thru WIC/CWS Specify which side	Patient instructions given thru Women’s Imaging Center

MRI CARDIAC EXAMS

MRI Cardiac With & Without

Only booked thru Cardiologists. Contact
Dr Vikas Veeranna.