

#### Diagnostic Imaging Quality Council Approved: 15NOV2023

Harmonized

A printed copy of this document may not reflect the current, electronic version on Lakeridge Health's Intranet, 'The Wave.' Any copies of this document appearing in paper form should ALWAYS be checked against the electronic version prior to use.

#### **Authorizing Prescriber(s)**

Radiologists working at Lakeridge Health (LH) Oshawa, Bowmanville, Port Perry and Ajax. Cardiologists working at Lakeridge Health Ajax who perform CT Cardiac Studies.

#### **Authorized to Whom**

Medical Radiation Technologists (MRT) employed at LH sites who have the knowledge, skill and judgement to protocol Computed Tomography (CT) requests.

#### **Patient Description/Population**

Any adult patient who has been assessed by the Most Responsible Practitioner (MRP) and has a completed CT request or electronic order.

#### Order and/or Procedure

The order and/or procedures are not presented in sequential order. Any one of or combination may be performed by the MRT upon receipt of the completed CT requisition. Refer to <a href="Table 1: Order Table Form">Table 1: Order Table Form</a> and <a href="Table 2: Scan Priority Levels">Table 2: Scan Priority Levels</a>, <a href="By Location and Exceptions">By Location and Exceptions</a>

#### Indications to the Implementation of the Directive

Any patient from the patient description/population who meets the criteria in the order table form and has a fully completed CT Request – must be clear, legible, include clinical history and/or symptoms and is signed/electronic signature by the MRP.

### **Contraindications to the Implementation of the Directive**

The Radiologist or Cardiologist must always be consulted if the MRT is unsure of the protocol or if the patient:

- is less than 18 years old (exception is non-contrast CT head)
- has a known allergy or sensitivity to intravenous contrast
- has prior imaging of the same body part within last month
- is pregnant

### **Documentation Requirements**

In addition to standard documentation practices, the MRT implementing this medical directive must ensure the following is included in the electronic health record:

Document Sponsor/Owner Group: : Diagnostic Imaging, Date Approved 15NOV2023

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- The name of this medical directive
- The procedure implemented
- The name of the implementer
- The date and time
- Signature of implementer including credentials/electronic signature

#### **Review/Evaluation Process**

Every two years as directed by the Diagnostic Imaging Program

#### References

College of Medical Radiation Technologists:

https://www.cmrito.org/pdfs/wymkas/performing\_procedures\_2018.pdf https://www.cmrito.org/programs/professional-practice/standards-of-practice/

The College of Physicians, Delegation of Controlled Acts

Ontario Health, DI WTIS Clinical Indication for Scan by Priority Level Examples. December, 2020 Version 3

Health Quality Ontario, Measuring Wait Times for Diagnostic Imaging <a href="https://www.hqontario.ca/System-Performance/Measuring-System-Performance/Measuring-Wait-Times-for-Diagnostic-Imaging">https://www.hqontario.ca/System-Performance/Measuring-System-Performance/Measuring-Wait-Times-for-Diagnostic-Imaging</a>



### **Diagnostic Imaging Quality Council Approved: 18MAR2022**

\*\*\*This table must not be used independently apart from the Medical Directive\*\*\*

### **Table 1: Order Table Form**

### Head and Neck

Protocol	Indication for Protocoling	Contraindications to Protocoling
CT Head	ED or IP request only:	Pregnancy
Non-contrast	Acute Headache	MRT unsure of protocol
	Head Injury	
	Stroke/TIA/bleed (any acute onset focal	
	neurological symptoms)	
	Chronic headache (greater than 1 month)	
	Dizziness, vertigo, syncope	
	Seizure	
CT Head	ED, IP or DRCC request only:	Pregnancy
With IV contrast	Brain metastasis	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Orbits Only	ED or IP request only:	Pregnancy
With IV contrast	Rule out abscess	MRT unsure of protocol
	Peri-orbital or orbital cellulitis	Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Sinuses	Chronic sinusitis	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Facial Bones	ENT, ED or IP request only:	Pregnancy
Non-contrast	Trauma	MRT unsure of protocol

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		Patient less than 18 years old	
		Prior imaging of same body part within last month	
Temporal Mandibular	Dr. Laur referral only	Pregnancy	
Joints (TMJ)		MRT unsure of protocol	
Non-contrast		Patient less than 18 years old	
		Prior imaging of same body part within last month	
Neck/Face	ENT, ED or IP request only:	Pregnancy	
Non-contrast	Foreign Body	MRT unsure of protocol	
	Salivary duct stone	Patient less than 18 years old	
	,	Prior imaging of same body part within last month	
Neck	Malignancy workup, (re)staging	Pregnancy	
With IV contrast	Mass	MRT unsure of protocol	
	Retropharyngeal abscess	Patient less than 18 years old	
		Prior imaging of same body part within last month	
		Known allergy or sensitivity to intravenous contrast	
CT Angiography (CTA)		Pregnancy	
Carotids and Circle of	TIA/stroke work up	MRT unsure of protocol	
Willis (COW)	Prior to stroke prevention clinic referral	Patient less than 18 years old	
With IV Contrast		Prior imaging of same body part within last month	
		Known allergy or sensitivity to intravenous contrast	
Endovascular	ED or IP request only:	Pregnancy	
Treatment (EVT)	Code EVT	MRT unsure of protocol	
Candidate		Patient less than 18 years old	
(Code Stroke)		Prior imaging of same body part within last month	

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#### Thorax

Protocol	Indications for Protocoling	Contraindications to Protocoling
Low Dose	Lung nodule follow up	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
CT Chest	Malignancy workup, (re)staging	Pregnancy
With IV Contrast	Pleural effusion	MRT unsure of protocol
	Empyema	Patient less than 18 years old
	Pneumonia	Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Chest	Interstitial changes post covid	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
High Resolution CT	Respirologist referral only:	Pregnancy
(HRCT)	Emphysema	MRT unsure of protocol
Non-Contrast	Bronchiectasis	Patient less than 18 years old
	Interstitial lung disease	Prior imaging of same body part within last month
Pulmonary Angiogram	ED or IP request only:	Pregnancy
With IV Contrast	Pulmonary Embolism	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Chest CTA –	ED or IP request only:	Pregnancy
Dissection protocol	Rule out dissection	MRT unsure of protocol
Without and with IV		Patient less than 18 years old
Contrast		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Cardiac	Cardiologist referral only:	Pregnancy
With IV contrast	Rule out obstructive	MRT unsure of protocol
	coronary artery disease (CAD)	Patient less than 18 years old

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	Rule out coronary anomaly Assess presence, or patency of coronary bypass grafts (CABG) Assess for presence of congenital heart disease	Prior imaging of same body part within last month Known allergy or sensitivity to intravenous contrast
Pulmonary Vein (PVI) With IV Contrast LHAP ONLY	Cardiologist referral only: Assess pulmonary vein dimensions and configuration prior to planned Pulmonary Vein Isolation procedure	Pregnancy MRT unsure of protocol Patient less than 18 years old Prior imaging of same body part within last month Known allergy or sensitivity to intravenous contrast
Calcium Score	Cardiologist referral only: Cardiac risk stratification in patients without known coronary disease (i.e. for Coronary Calcium score) Assess for possible severe aortic stenosis (i.e. for Aortic Valve calcium score)	Pregnancy MRT unsure of protocol Patient less than 18 years old Prior imaging of same body part within last month

### Abdomen and Pelvis

Protocol	Indications for Protocoling	Contraindications to Protocoling
Abdomen Pelvis	Vascular surgeon referral only:	Pregnancy
Without IV contrast	Follow up of abdominal aortic aneurysm (AAA)	MRT unsure of protocol
Without oral contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
Routine	ED or IP request only:	Pregnancy
Abdomen Pelvis	Abscess	MRT unsure of protocol
With IV contrast	Appendicitis/diverticulitis	Patient less than 18 years old
+/- oral contrast	Small bowel obstruction	Prior imaging of same body part within last month
*Refer to Table 3: Oral	Post-op complications	Known allergy or sensitivity to intravenous contrast
<b>Contrast Checklist for</b>	Rule out leak	
CT Abdomen Pelvis	Malignancy workup, (re)staging -must include	
with IV contrast	organ of origin	
	Generalized pain NYD	

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Trauma	ED or IP request only:	Pregnancy
Abdomen Pelvis	Acute Trauma with suspicion of visceral injury or	MRT unsure of protocol
With IV Contrast	pelvic fracture (stabbing, MVC, gunshot)	Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Renal Colic	Renal colic	Pregnancy
Non-contrast	Flank pain +/- hematuria	MRT unsure of protocol
	r/o renal stones	Patient less than 18 years old
		Prior imaging of same body part within last month
Renal Colic Ultra Low	Urologist referral only:	Pregnancy
Dose	Follow-up known renal or collecting system stone	MRT unsure of protocol
Non-contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
Urogram	Urologist referral only:	Pregnancy
With IV contrast	Gross Hematuria,	MRT unsure of protocol
	Micro hematuria	Patient less than 18 years old
	Hematuria Not Otherwise Specified (NOS)	Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Renal Mass	Initial workup or follow up of renal mass	Pregnancy
With IV contrast	Follow up known renal cell carcinoma (RCC) or	MRT unsure of protocol
	renal cancer	Patient less than 18 years old
	Follow up post radiofrequency ablation (RFA)	Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Adrenal	Initial workup/characterization or follow up of	Pregnancy
Non-contrast	adrenal nodule or mass	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Enterogram – Single	Gastroenterologist or	Pregnancy
With IV contrast	General Surgeon referral only:	MRT unsure of protocol
	Extent of involvement of Crohn's disease	Patient less than 18 years old
	Query Crohn's disease	Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Enterogram – Dual	Gastroenterologist or	Pregnancy
With IV contrast	General Surgeon referral only:	MRT unsure of protocol

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	GI Blood loss/anemia	Patient less than 18 years old
	And/or query small bowel mass	Prior imaging of same body part within last month
	(Negative gastroscopy and colonoscopy)	Known allergy or sensitivity to intravenous contrast
Bowel/Mesenteric	ED or IP request only:	Pregnancy
Ischemia	Bowel or mesenteric ischemia and patient is	MRT unsure of protocol
With IV contrast	greater than 60 years old	Patient less than 60 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Active GI Bleed	ED or IP request only:	Pregnancy
With IV contrast	Active GI Bleed	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Colonography	Query polyp	Pregnancy
Non-contrast	Colon cancer screening	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Abdomen and Pelvis	Vascular surgeon referral only:	Pregnancy
CTA	Abdominal Aortic Aneurysm (AAA)	MRT unsure of protocol
With IV contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
Abdomen/Renal	Query renal artery stenosis	Pregnancy
Arteries CTA		MRT unsure of protocol
With IV contrast		Patient less than 18 years old
LHAP Only		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast

### **Combination Scans**

Protocol	Indications	Contraindications to Coding
CT Neck, Chest	Malignancy workup, (re)staging	Pregnancy
With IV contrast	- must include organ of origin	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month

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		Known allergy or sensitivity to intravenous contrast
CT Neck, Chest,	Malignancy workup, (re)staging	Pregnancy
Abdomen	- must include organ of origin	MRT unsure of protocol
With IV contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
CT Neck, Chest,	Malignancy workup, (re)staging	Pregnancy
Abdomen and Pelvis	- must include organ of origin	MRT unsure of protocol
With IV contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
CT Chest and	Malignancy workup, (re)staging	Pregnancy
Abdomen	- organ of origin must be lung or esophagus	MRT unsure of protocol
With IV contrast		Patient less than 18 years old
LHO,LHB,LHP Only		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
CT Chest, Abdomen,	Malignancy workup, (re)staging	Pregnancy
Pelvis	- must include organ of origin	MRT unsure of protocol
With IV contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast
CT Chest, Abdomen	Cancer staging/follow-up for Hypervascular	Pregnancy
Pelvis	primary malignancy	MRT unsure of protocol
With IV contrast	(RCC, neuroendocrine, melanoma, chorio CA,	Patient less than 18 years old
(arterial phase upper	thyroid)	Prior imaging of same body part within last month
abdomen)	- must include organ of origin	Known allergy or sensitivity to intravenous contrast
Whole Body	Oncology request only	Pregnancy
(Myeloma)		MRT unsure of protocol
With IV contrast		Patient less than 18 years old
		Prior imaging of same body part within last month
		Known allergy or sensitivity to intravenous contrast

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Protocol	Indications for Protocoling	Contraindications to Protocoling
Cervical Trauma	ED or IP request only:	Pregnancy
Non-contrast	Trauma	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Lumbar Trauma	ED or IP request only:	Pregnancy
Non-contrast	Trauma	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month

### Extremity

Protocol	Indications for Protocoling	Contraindications to Protocoling
Pelvis	ED or IP request only:	Pregnancy
Non-contrast	Trauma, Fracture	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Hip – Unilateral	ED or IP request only:	Pregnancy
Non-contrast	Trauma, Fracture	MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Shoulder	Trauma, Fracture	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Knee	Trauma, Fracture	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month
Extremity	Trauma, Fracture	Pregnancy
Non-contrast		MRT unsure of protocol
		Patient less than 18 years old
		Prior imaging of same body part within last month

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Table 2: Scan Priority Levels, By Location and Exceptions

Priority Level	Description		
Priority 1 Within 24 hours of order received	Emergent – An examination necessary to diagnose and/or treat disease or injury that is immediately threatening to life or limb.		
Priority 2 Within 48 hours of order received	Urgent – An examination necessary to diagnose and/or treat disease or injury and/or alter treatment plan that is not immediately threatening to life or limb.  Includes all inpatients except where imaging is unrelated to patient admission based on clinical indication.		
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Priority 3 Within 10 days of order received	Semi-Urgent – An examination necessary to diagnose and/or treat disease or injury and/or alter treatment plan, where provided clinical information requires that the examination be performed sooner than the Priority 4 benchmark period.		
Priority 4 Within 28 days of order received	Non-Urgent – An examination necessary to diagnose/treat disease or injury, where the provided clinical information does not require the study to be performed within the semi-urgent time frame (Priority 3 benchmark period of 10 days.)		
Timed – Specified Date Procedure	An examination to be completed after a medically specified time (or future date) period.		

Source: Ontario Health, DI WTIS Clinical Indication for Scan by Priority Level Examples. December, 2020 Version 3

### Scan Priority Levels Location & Exception Rules

Priority 1 = Emergency Department

Priority 2 = In-Patients

Priority 3 = Urgent Out-Patients – Requisition indicates Urgent or Stat

Priority 4 = Out-Patients with the Exception of: Re-staging, Empyema, Pneumonia, Query Crohn's disease acute exacerbation, Gross Hematuria (Urologist request) are priority 3

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### Table 3: Oral Contrast Checklist for CT Abdomen & Pelvis with IV Contrast

Indication	Omnipaque	Water	Readi -Cat
BMI less than or equal to 25	<b>✓</b>		
Age less than or equal to 18	<b>√</b>		
History of GI Cancer (including cancers of the esophagus, stomach, small intestine and colon)	<b>√</b>		
Ovarian Cancer	<b>✓</b>		
Peritoneal Cancer (including mesothelioma)	✓		
Recent abdominal surgery to rule out leak	<b>√</b>		
Complex bowel pathology to rule out fistula, abscess	✓		
Contraindication to IV contrast (due to renal failure)	✓		
Bowel Ischemia		✓	
Bowel Obstruction		✓	
Omnipaque allergy and NOT allergy prepped			<b>√</b>
For all other cases: 900ml H <sup>2</sup> O a	s tolerated, do	not delay ima	aging

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