



## **Provider Checklist-Outpatient -Imaging**

### **Checklist: MRI Thoracic Spine (CPT codes: 72146, 72147, 72157)**

If suspected thoracic radiculopathy, indicate the following: severe unilateral weakness in nerve root distribution by PE; mild to moderate unilateral weakness including weakness in nerve root distribution by PE and conservative Rx ineffective; refractory severe pain including severe unilateral pain in nerve root distribution unrelieved by change in body position and specific interferes with ADLs; continued severe pain after Rx and specific administered Rx; mild to moderate pain including Weakness in nerve root distribution by PE and conservative Rx ineffective

If myelopathy present, describe specifically

If suspected nerve root compression by tumor, describe thoracic spine sx/findings and unilateral pain/weakness in nerve root distribution

Describe preoperative evaluation of osteomyelitis

If suspected osteomyelitis/disc space infection (gadolinium contrast recommended), describe localized thoracic spine pain by Hx and physical/clinical Findings

Describe if suspected thoracic cord injury with neurologic deficit at/distal to injury

Describe follow-up epidural abscess including new/worsening neurologic sx/findings; new/worsening pain at site; periodic evaluation of response to Rx w/o new/worsening sx/findings

If multiple sclerosis, describe suspected MS including MRI brain planned with/before spine study and symptoms/clinically isolated syndrome (CIS) as well as known MS with new/worsening symptoms

If suspected bone metastasis, indicate no neurologic sx/findings; present /findings and bone scan results

Indicate follow-up single bone metastasis after Rx