

**SELECT HEALTH NETWORK, INC.
PHYSICIAN PRACTICE GUIDELINES**

SUBJECT: MRI Wrist

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Date Revised: 5/09, 03/10, 5/11, 5/12, 5/13, 5/14, 8/15, 6/16, 6/17, 6/18, 6/19, 4/20

Source: Milliman Inc.

<https://acsearch.acr.org/docs/69418/Narrative/>
<https://acsearch.acr.org/docs/69418/EvidenceTable/>
<https://acsearch.acr.org/docs/69427/Narrative/>
<https://acsearch.acr.org/docs/69427/EvidenceTable/>
<https://acsearch.acr.org/docs/69421/Narrative/>
<https://acsearch.acr.org/docs/69421/EvidenceTable/>
<https://acsearch.acr.org/docs/69434/Narrative/>
<https://acsearch.acr.org/docs/69434/EvidenceTable/>
<https://acsearch.acr.org/docs/3094201/Narrative/>

General Guidelines: An MRI is not indicated for wrist pain alone.
A plain film of the wrist should be performed prior to MRI.

Indications:

- I. MRI wrist is indicated for wrist pain and **ANY ONE** of the following:
 - A. Pain unexplained by history and physical examination, with normal findings on plain x-rays.
 - B. Indeterminate lesions seen on plain x-ray or CT scan.
 - C. Suspected osteochondral injury.
 - D. Suspected osteonecrosis (ie, focal radiolucency or sclerosis on plain x-ray in a patient at risk).
 - E. Well localized increased uptake on bone scan.
 - F. Suspected occult fracture.
 - G. Suspected inflammatory arthritis
 - H. Suspected ligament or tendon injury

- II. MRI wrist is indicated for bone neoplasm and **ANY ONE** of the following:
 - A. Abnormal finding on plain x-ray or bone scan.
 - B. Palpable bone abnormality and normal findings on plain x-ray.
 - C. Known diagnosis of cancer located elsewhere, associated with unexplained signs or symptoms (ie, pain, abnormal finding on plain x-ray or bone scan).
 - D. Persistent pain of unclear etiology.
 - E. Ewing sarcoma or osteosarcoma and **ANY ONE** of the following:
 1. Initial staging.
 2. Monitoring response after treatment completed.
 3. Surveillance for tumor recurrence, including **ANY ONE** of the following:
 - a. Every 3 months for years 1 and 2.
 - b. Every 4 months for year 3.

- c. Every 6 months for year 4 and 5.
 - d. Annually after 5 years.
4. Surveillance of benign tumor.

- III. MRI wrist is indicated for soft-tissue or joint swelling and **ANY ONE** of the following:
- A. Suspected soft tissue infection/abscess
 - B. Cellulitis, ulcer, wound, injury and concern for osteomyelitis
 - C. History of prior surgery or instrumentation and concern of osteomyelitis/septic arthritis
 - D. Draining sinus tract
- IV. MRI wrist is indicated for soft tissue mass, suspected ganglion cyst, tumor, or other abnormality and **ANY ONE** of the following:
- A. Soft tissue mass and **ANY ONE** of the following:
 - 1. Deep or large masses.
 - 2. Masses that cross anatomic boundaries.
 - 3. Concern for effect on adjacent anatomic structures.
 - 4. Vascular lesions, particularly in child and **ANY ONE** of the following:
 - a. Growth.
 - b. Change in color of overlying skin.
 - 5. Causing pain.
 - 6. Progressively enlarging.
 - B. Soft tissue sarcoma and **ANY ONE** of the following:
 - 1. Initial staging.
 - 2. Within 3 months after treatment completed.
 - 3. Post-treatment surveillance annually.
 - 4. Abnormal physical findings after treatment completed.
 - C. Soft tissue muscle abscess, when performed for planning of biopsy or surgical treatment.
- V. MR Arthrogram is indicated for
- A. Loose body in joint space.
 - B. Ulnar sided wrist pain and suspected triangular fibrocartilage complex (TFCC) tear.
 - C. Suspected intrinsic ligament tear (i.e. lunotriquetral or scapholunate ligament tear)