

**MRI Wrist Guidelines****DEPARTMENT: Utilization Management Physician Practice Guidelines****EFFECTIVE DATE: 05/08****DATE LAST REVIEWED: 04/22****SOURCES:** 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/>

**RECOMMENDED GUIDELINES:**

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

**Indications:**

- 1) 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
- 2) 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:
    - i) Initial staging.
    - ii) Monitoring response after treatment completed.
    - iii) Surveillance for tumor recurrence, including **ANY ONE** of the following:
      - (1) Every 3 months for years 1 and 2.
      - (2) Every 4 months for year 3.

- (3) Every 6 months for year 4 and 5.
- (4) Annually after 5 years.
- iv) Surveillance of benign tumor.
- 3) 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
- 4) 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:
    - i) Deep or large masses.
    - ii) Masses that cross anatomic boundaries.
    - iii) Concern for effect on adjacent anatomic structures.
    - iv) Vascular lesions, particularly in child and **ANY ONE** of the following:
      - (1) Growth.
      - (2) Change in color of overlying skin.
    - v) Causing pain.
    - vi) Progressively enlarging.
  - b) Soft tissue sarcoma and **ANY ONE** of the following:
    - i) Initial staging.
    - ii) Within 3 months after treatment completed.
    - iii) Post-treatment surveillance annually.
    - iv) Abnormal physical findings after treatment completed.
  - c) Soft tissue muscle abscess, when performed for planning of biopsy or surgical treatment.
- 5) 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)