Provider Checklist-Outpatient – Imaging

Checklist: Magnetic Resonance Imaging (MRI) Knee
(CPT Code: 73721, 73722, 73723)

All Indications [*One has to be present]

*Acute knee pain secondary to trauma [Both have to be present]

Sx/findings at knee [Two have to be present]

- Joint effusion/swelling
- Limited ROM
- Acute muscle spasm limiting PE

No fracture by x-ray

*Suspected unstable meniscal tear [One has to be present]

- Knee locking by Hx/PE
- McMurray's test positive

*Suspected stable meniscal tear by Sx/findings [Both have to be present]

Knee Sx/findings [Two have to be present]

- Effusion by PE
- Joint line tenderness
- Pain with flexion and rotation

Continued Sx/findings after Rx [All have to be present]

NSAID [One has to be present]

- 1 Rx ≥ 3 wks
- 2 Contraindicated/not tolerated

PT ≥ 4 wks
Activity modification ≥ 4 wks
*Suspected cruciate ligament injury [Both have to be present]

  Knee giving way by Hx
  Grade II/III instability of ACL/PCL by PE

*Suspected multiligamentous injury [Both have to be present]

  Grade II/III instability by PE [One has to be present]

    LCL
    MCL
    Posterolateral complex

  Grade II/III instability of ACL/PCL by PE

*Suspected LCL injury with grade II/III instability of LCL by PE

*Suspected MCL injury [Both have to be present]

  Grade II/III instability of MCL by PE
  Continued instability after Rx [Both have to be present]

    Brace ≥ 6 wks
    Activity modification ≥ 6 wks

*Knee complaints, unknown etiology [All have to be present]

  Sx/findings [One has to be present]

    Joint pain
    Limited ROM
    Crepitus
    Joint line tenderness
    Effusion by PE
    Giving way by Hx

  Knee x-ray nondiagnostic for etiology of Sx/findings
  Continued Sx/findings after Rx [All have to be present]

  NSAID [One has to be present]

    - 1 Rx ≥ 3 wks
    - 2 Contraindicated/not tolerated
PT ≥ 4 wks  
Activity modification ≥ 4 wks

*Suspected intra-articular loose body [All have to be present]

Symptoms at knee [One has to be present]

Joint pain  
Locking  
Giving way by Hx

Findings at knee [Two have to be present]

Pain with passive ROM  
Limited ROM  
Clicking

Knee x-ray nondiagnostic for loose body

*Suspected osteochondritis dissecans [All have to be present]

Symptoms at knee [One has to be present]

Joint pain  
Giving way by Hx

Findings at knee [Two have to be present]

Pain with passive ROM  
Limited ROM  
Clicking  
Effusion by PE

Knee x-ray nondiagnostic for osteochondritis dissecans

*Suspected tumor involving soft tissue [One has to be present]

Bone tumor eroding through cortex by x-ray  
Palpable periarticular/intra-articular mass with negative x-ray
*Suspected avascular necrosis (osteonecrosis), knee [All have to be present]

Knee pain
Pain with passive ROM
Location [One has to be present]

Femoral condyle
Tibial plateau

Knee x-ray nondiagnostic for avascular necrosis
Continued pain after Rx [Both have to be present]

NSAID [One has to be present]

-1 Rx ≥ 4 wks
-2 Contraindicated/not tolerated

PT ≥ 6 wks

*Suspected quadriceps tendon injury [All have to be present]

Injury to the area by Hx
Symptoms [Both have to be present]

Pain in suprapatellar area
Inability to actively extend knee/bear weight

Findings [All have to be present]

Pain with passive ROM
Tender quadriceps tendon
No palpable defect in tendon

No patellar fracture by x-ray

*Suspected Baker's cyst [All have to be present]

Pain in posteromedial knee increased with activity
No locking/giving way by Hx
Findings [Both have to be present]

Popliteal mass
Knee exam otherwise normal
US nondiagnostic for Baker’s cyst
Continued Sx/findings after Rx [**Both have to be present**]

**NSAID [One has to be present]**

-1 Rx ≥ 4 wks
-2 Contraindicated/not tolerated

PT ≥ 6 wks

*Suspected osteomyelitis [**Both have to be present**]

Findings [**One has to be present**]

- ESR > 30 mm/hr
- Temperature > 100.4 F(38.0 C)
- WBC > 10,000/cu.mm(10x10^9/L)
- Blood culture positive
- C-reactive protein > 10 mg/L

Knee x-ray nondiagnostic for osteomyelitis