Provider Checklist-Outpatient – Imaging

Checklist: Magnetic Resonance Imaging (MRI) Shoulder
(CPT Code: 73221, 73222, 73223)

All Indications [*One has to be present]

*Chronic monarticular joint pain [All have to be present]

Symptoms at shoulder [One has to be present]

Joint pain
Locking

Findings at shoulder [Two have to be present]

Pain with passive ROM
Limited ROM
Tenderness
Crepitus

Shoulder x-ray nondiagnostic for etiology of pain
Continued Sx/findings after Rx [Both have to be present]

NSAID [One has to be present]

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

OT/PT ≥ 6 wks

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

Symptoms at shoulder [One has to be present]

Joint pain
Locking

Findings at shoulder [Two have to be present]

Pain with passive ROM
Limited ROM
Clicking
Shoulder x-ray nondiagnostic for loose body

*Suspected acute rotator cuff tear [All have to be present]

Traumatic event by Hx ≤ 2 wks
Shoulder pain
Findings by PE [All have to be present]

Weakness of shoulder abduction
Passive ROM normal/passive ROM > active ROM
Subacromial tenderness

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Shoulder x-ray nondiagnostic for etiology of Sx/findings

*Suspected chronic rotator cuff tear/tendonitis [All have to be present]

Shoulder pain
Findings by PE [All have to be present]

Pain/weakness on resisted shoulder abduction/rotation
Passive ROM normal/passive ROM > active ROM
Tenderness over rotator cuff

Shoulder 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

OT/PT ≥ 6 wks
Subacromial corticosteroid injection [One has to be present]

-1 Ineffective
-2 Contraindicated/not tolerated/refused

Activity modification ≥ 6 wks
*Suspected avascular necrosis (osteonecrosis), humeral head [All have to be present]

Shoulder pain
Pain with passive ROM
Shoulder 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

OT/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

Shoulder x-ray nondiagnostic for osteomyelitis

*Suspected labral tear