

# Potential Critical Results List

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**Note: The following critical results list is considered neither completely inclusive of all potential critical results nor universally applicable to all potential presentations/variations of the included diagnoses. Rather, this is intended to serve as a guideline for radiologist reference, and clinical judgement still should be applied to each individual patient and each specific clinical scenario.**

## **Neuro:**

- ▶ Any result for a “code neuro” head CT (patient with stroke and candidate for thrombolytics)
- ▶ Acute intracranial or intraspinal hemorrhage
- ▶ New acute CVA for patients that may be candidates for stroke intervention
- ▶ Acute or significantly worsening brain herniation
- ▶ Brain tumor with significant or worsening mass effect
- ▶ Significantly depressed skull fracture or traumatic pneumocephalus
- ▶ Brain death/absent cerebral perfusion on nuclear brain scan
- ▶ Acute spinal cord compression
- ▶ Acute cervical spine fracture or unstable thoracic/lumbar spine fracture
- ▶ Epiglottitis or other cause of significant upper airway obstruction

## **Body:**

- ▶ Unsuspected, enlarging or tension pneumothorax
- ▶ Significant tracheal obstruction
- ▶ Unexplained pneumoperitoneum
- ▶ Hemoperitoneum
- ▶ Active GI bleeding
- ▶ High grade bowel obstruction or probable ischemic/strangulated bowel
- ▶ High-grade intra-abdominal organ injury and/or bowel injury post trauma
- ▶ Acute testicular/ovarian torsion

## **Cardiovascular:**

- ▶ Acute pulmonary embolism or high probability for PE on VQ scan
- ▶ Pneumopericardium, hemopericardium or tamponade
- ▶ Aortic or other arterial rupture or leaking aneurysm
- ▶ Acute arterial dissection
- ▶ Acute large or medium artery thrombosis
- ▶ Unsuspected acute venous thrombosis (e.g. diagnosed on CT for other indication)
- ▶ Larger acute myocardial infarction/ischemia on cardiac perfusion study

## **OB:**

- ▶ Ectopic pregnancy
- ▶ Placental abruption
- ▶ Uterine rupture
- ▶ Fetal distress, BPP<5

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**Pediatrics:**

- ▶ Findings suspicious for non-accidental trauma
- ▶ Midgut malrotation with volvulus
- ▶ Ileocolic or suspected pathologic intussusception

**Musculoskeletal:**

- ▶ Necrotizing fasciitis
- ▶ Suspected compartment syndrome
- ▶ Impending pathologic fracture

**Miscellaneous:**

- ▶ Significant misplacement of tubes or catheters (e.g., ET tube or enteric tube in bronchus)
- ▶ **Any other finding that the interpreting radiologist determines requires immediate physician notification**