

American College of Radiology
ACR Appropriateness Criteria®

Pelvic Floor Dysfunction in Females

Variant 1: Vaginal protrusion or bulge, or clinically suspected pelvic organ prolapse. Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations								
							1	2	3	4	5	6	7	8	9
Fluoroscopy cystocolpoproctography	Usually appropriate	Limited	☢☢☢ 1-10 mSv		8	8	0	0	1	1	1	0	2	4	5
		References		Study Quality											
		11 (10397095)		3											
		23 (24506228)		1											
MR defecography	Usually appropriate	Strong	0 0 mSv	0 0 mSv [ped]	8	8	0	0	0	1	1	1	1	5	5
		References		Study Quality											
		27 (26867902)		3											
		31 (23541093)		3											
		30 (11997560)		2											
		33 (20544342)		4											
		15 (19188799)		3											
		28 (21427302)		3											
		41 (11425977)		1											
		39 (17043740)		3											
		42 (18193147)		3											
		37 (17954653)		4											
		43 (22068322)		4											
		26 (30241870)		3											

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		76 (18726938)			3											
CT pelvis with IV contrast	Usually not appropriate	Expert Consensus	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	3	3	3	4	3	1	1	2	0	0	0	
MRI pelvis without and with IV contrast	Usually not appropriate	Strong	○ ○ mSv	○ ○ mSv [ped]	3	3	3	4	4	2	0	1	0	0	0	
		References			Study Quality											
		61 (28083712)			3											
		37 (17954653)			4											
		63 (19450822)			3											
		64 (22395838)			2											
		65 (16298035)			3											
		62 (25727524)			3											
US pelvis transrectal	Usually not appropriate	Limited	○ ○ mSv	○ ○ mSv [ped]	3	3	2	4	3	0	3	1	1	0	0	
		References			Study Quality											
		70 (2652866)			3											
		71 (3056562)			4											
		72 (2697451)			4											
		73 (2665902)			4											
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	2	2	5	4	3	1	0	1	0	0	0	
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☹☹☹☹ 10-30 mSv	☹☹☹☹ 3-10 mSv [ped]	2	2	4	4	4	1	0	1	0	0	0	
MRI pelvis without IV contrast	Usually not appropriate	Expert Consensus	○ ○ mSv	○ ○ mSv [ped]	2	2	4	6	3	1	0	0	0	0	0	
US pelvis transabdominal	Usually not appropriate	Expert Consensus	○ ○ mSv	○ ○ mSv [ped]	2	2	5	7	0	2	0	0	0	0	0	

Variant 3: Female. Defecatory dysfunction (incontinence of stool or liquid or gas, straining during defecation, difficulty initiating defecation, incomplete evacuation, or splinting or digital maneuvers to defecate). Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations								
							1	2	3	4	5	6	7	8	9
Fluoroscopy cystocolpoproctography	Usually appropriate	Limited	☼☼☼ 1-10 mSv		8	8	0	0	0	0	1	1	2	4	6
		References		Study Quality											
		22 (21183491)		4											
		82 (7607027)		3											
		11 (10397095)		3											
		81 (8756846)		4											
		83 (10189475)		3											
MR defecography	Usually appropriate	Strong	○ ○ mSv	○ ○ mSv [ped]	8	8	0	0	0	1	2	0	1	5	5
		References		Study Quality											
		86 (21257836)		2											
		27 (26867902)		3											
		31 (23541093)		3											
		30 (11997560)		2											
		33 (20544342)		4											
		15 (19188799)		3											
		28 (21427302)		3											
		90 (16801366)		3											
		87 (20219700)		2											
		23 (24506228)		1											
		26 (30241870)		3											
		32 (26880893)		3											
		34 (29944912)		3											
		35 (28386692)		4											

MRI pelvis without and with IV contrast	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	4	4	3	2	2	3	2	1	1	0	0
		References		Study Quality											
		41 (11425977)		1											
MRI pelvis without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	3	3	3	3	2	2	3	0	1	0	0
US pelvis transvaginal	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	3	4	1	5	1	0	0	0	0
		References		Study Quality											
		99 (22374273)		4											
CT pelvis with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	2	3	6	3	0	1	1	0	0	0
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	2	5	6	2	0	0	1	0	0	0
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼ 3-10 mSv [ped]	2	2	4	7	2	0	0	1	0	0	0
Fluoroscopy voiding cystourethrography	Usually not appropriate	Expert Consensus	☼☼ 0.1-1mSv	☼☼ 0.03-0.3 mSv [ped]	1	1	8	3	2	1	0	0	0	0	0
US pelvis transabdominal	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	8	3	1	0	1	1	0	0	0

Variant 4: Female. Follow-up imaging after pelvic floor surgery. Subacute or chronic complications other than recurrent pelvic floor dysfunction. Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations								
							1	2	3	4	5	6	7	8	9
MRI pelvis without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	0	0	3	10	1
		References		Study Quality											

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Appendix Key

A more complete discussion of the items presented below can be found by accessing the supporting documents at the designated hyperlinks.

Appropriateness Category: The panel's recommendation for a procedure based on the assessment of the risks and benefits of performing the procedure for the specified clinical scenario.

SOE: Strength of Evidence. The assessment of the amount and quality of evidence found in the peer reviewed medical literature for an appropriateness recommendation.

- **References:** The citation number and PMID for the reference(s) associated with the recommendation.
- **Study Quality:** The assessment of the quality of an individual reference based on the number of study quality elements described in the reference.

RRL: Relative Radiation Level. A population based assessment of the amount of radiation a typical patient may be exposed to during the specified procedure.

Rating: The final rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

Median: The median rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

Final tabulations: A histogram showing the number of panel members who rated the procedure as noted in the column heading (ie, 1, 2, 3, etc.).

Additional supporting documents about the AC methodology and processes can be found at www.acr.org/ac.