## American College of Radiology ACR Appropriateness Criteria®

## **Female Infertility**

Variant 1: Female infertility. Evaluation of ovulatory function and ovarian reserve. Initial Imaging.

D. I	Appropriateness	COF	4 1 14 DD	n h h nn	D (	3.6 11			F	inal '	<u>Tab</u> u	latio	ns		
Procedure	Category	SOE	Adults RR	L Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
US pelvis transvaginal	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	2	13
		References		Study	Quality										
		27 (7211967)			4										
		28 (15705365)			M										
		29 (10389718)			3										
US pelvis transabdominal	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	1	6	7	0	0
MRI pelvis without IV contrast	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	6	6	1	0	0	1	2	10	0	0	0
		References		Study	Quality								•	•	
		26 (23292744)			3										
		25 (24661732)			4										
MRI pelvis without and with IV contrast	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	3	1	7	0	2	1	1	0	0
		References		Study	Quality										
		26 (23292744)			3										
		25 (24661732)		4											

Variant 2: Female infertility. Clinical features or history of polycystic ovary syndrome. Initial Imaging.

	Appropriate	ness							I	Final	Tabu	latio	ns		
Procedure	Category	SOE	Adults RRI	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
US pelvis transvaginal	Usually appropriat	e Limited	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	0	1	0	1	13
		References		Study	y Quality			•		•	•			•	-
		32 (1561343)	)		3										
		5 (24345633)	)		4										
MRI pelvis without IV contrast	May be appropriat	e Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	1	0	3	10	0	0	0
		References		Study	y Quality		•	•		•				•	
		26 (23292744	4)		3										
		25 (24661732	2)		4										
		30 (28742467	")		3										
US pelvis transabdominal	May be appropriat	Expert Consensus	O 0 mSv	O 0 mSv [ped]	6	6	0	0	1	0	2	8	3	0	0
US color Doppler pelvis	May be appropriat	e Limited	O 0 mSv	O 0 mSv [ped]	4	4	0	4	1	5	2	1	0	0	1
		References		Study	y Quality									•	
		31 (8567828)	)		3										
MRI pelvis without and with IV contrast	Usually no appropriat		O 0 mSv	O 0 mSv [ped]	3	3	3	1	7	0	2	1	0	1	0
		References		Study	y Quality										
		26 (23292744		3											
		25 (24661732		4											
		30 (28742467	<i>'</i> )		3										

Variant 3: Female infertility. History or clinical suspicion of endometriosis. Initial Imaging.

	Appropriateness	g 0 =							F	inal	Tabu	latio	ıs		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
US pelvis transvaginal	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	4	11
		References		Study	Quality										
		47 (9491875)			3										
		49 (25715375)			3										
		50 (22034232)			2										
		51 (20954166)			M										
		46 (25597884)			3										
		48 (29465552)			3			1			1				
MRI pelvis without IV contrast	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	0	2	1	8	2
		References		Study	Quality		<u> </u>								
		34 (14615553)			4										
		36 (8327693)			2										
		40 (23169738)			2										
		35 (2052726)			3										
		41 (15665220)			2										
		37 (24475842)			3										
		38 (29193230)			3										
		39 (15205479)			3			1	1	1	1				
US pelvis transabdominal	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	4	2	6	2	1
US pelvis transrectal	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	1	3	2	4	2	3
		References		Study	Quality		-								
		44 (1824581)			3										
		43 (15162229)			4										
		45 (24910933)			4										

US color Doppler pelvis	May be appropriate	Limited O 0 mSv		O 0 mSv [ped]	6	6	1	0	0	1	1	5	2	4	1
		References		Study	y Quality		•	•		•					
		43 (15162229)			4										
		42 (27054310)			4										
MRI pelvis without and with IV contrast	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	0	2	0	3	1	6	1	1
		References		Study	y Quality			•			•				
		34 (14615553)			4										
		36 (8327693)			2										
		40 (23169738)			2										
		35 (2052726)			3										
		41 (15665220)			2										
		37 (24475842)		3											
		38 (29193230)		3											
		39 (15205479)		1	3					1	1				
Fluoroscopy hysterosalpingography	May be appropriate	Limited	<b>⊕⊕</b> 0.1-1mS	Sv	5	5	0	1	4	2	6	1	0	0	0
		References		Study	y Quality										
		8 (22031261)			4										
		33 (1834842)			3										
US sonohysterography with tubal contrast agent	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	1	3	1	0	5	3	1	0	0
		References		Study	y Quality										
		53 (10207476)		2											
		55 (17636730)		4											
		42 (27054310)			4										
		54 (30244483)			3		•								
US sonohysterography	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	3	4	5	0	0	2	0	0	0

References	Study Quality
52 (17947378)	3

Variant 4: Female infertility. Suspicion of tubal occlusion. Initial Imaging.

	Appropriateness	COF		ılts RRL Peds RRL Rating Medi					F	inal	Tabu	latio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
Fluoroscopy hysterosalpingography	Usually appropriate	Limited	�� 0.1-1mSv		8	8	0	0	0	1	1	0	2	5	6
		References		Study	Quality										
		58 (9885610)			1										
		56 ()			4										
		11 (16549607)			4										
		57 (7641899)			M										
US sonohysterography with tubal contrast agent	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	1	2	3	1	7
		References		Study	Quality										
		65 (19685552)			3										
		53 (10207476)			2										
		55 (17636730)			4										
		66 (1584936)			2										
		42 (27054310)			4										
		54 (30244483)			3										
US pelvis transvaginal	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	1	0	1	7	1	4
		References		Study	Quality										
		64 (17625419)			4										
		63 (-3127398)			4										
		62 (27753111)			3										

MRI pelvis without IV contrast	May approp	be oriate	Limited	O 0 mSv	,	O 0 mSv [ped]	5	5	0	0	2	1	7	3	0	1	0
	•		References			Study	Quality		•								
			34 (14615553)				4										
			61 (28184447)				2										
			59 (27933478)				4										
	_		60 (9680577)			3											
US pelvis transabdominal	May approp	be oriate	Expert		,	O 0 mSv [ped]	5	5	0	0	0	3	5	2	3	1	0
MRI pelvis without and with IV contrast	May approp	be oriate	Limited O.0 mSv		O 0 mSv [ped]	4	4	1	2	3	4	3	1	0	0	0	
			References			Study	Quality										
			34 (14615553)				4										
			61 (28184447)				2										
			59 (27933478)				4										
			60 (9680577)				3										
US sonohysterography	Usuall approp		Expert Consensus	O 0 mSv	,	O 0 mSv [ped]	3	3	1	3	8	0	0	1	0	1	0

Variant 5: Female infertility. Recurrent pregnancy loss. Initial Imaging.

ъ 1	Appropriateness	COF	A L L DDI	D I DDI	D 4	3.4 11			F	inal '	Гаbu	latio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI pelvis without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	1	2	0	3	5	4

References	Study Quality
72 (23065174)	4
74 (7867273)	4
67 (18161399)	3
73 (10632403)	4

		75 (11476785)			2										
		76 (20101638)			3										
MRI pelvis without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	3	0	3	6	2
		References		Study	Quality		•		•			•			
		72 (23065174)			4										
		74 (7867273)			4										
		67 (18161399)			3										
		73 (10632403)			4										
		75 (11476785)			2										
		76 (20101638)			3										
US sonohysterography	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	1	3	1	4	6
		References		Study	Quality		•								
		71 (15653584)			4										
		83 (11728660)			3										
		87 (18314520)			4										
		85 (23269704)			4										
		86 (20970387)			3										
		76 (20101638)			3										
		52 (17947378)		1	3				1						
US pelvis transvaginal	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	1	0	0	3	4	7
		References		Study	Quality										
		74 (7867273)			4										
		79 (22643500)			3										
		84 (20052665)			3										
		83 (11728660)			3										
		67 (18161399)			3										
		68 (10064410)			3										
		69 (15505312)		3											

		81 (23312248)				3										
		80 (12780419)				4										
		76 (20101638)				3										
		82 (25195158)				3										
US pelvis transabdominal	Usually appropriate	Expert Consensus	O 0 mSv	O 0 r [pe		7	7	0	1	0	0	1	5	4	3	1
Fluoroscopy hysterosalpingography	May be appropriate (Disagreement)	Expert Opinion	�� 0.1-1mS	Sv		5	5	0	1	1	5	4	1	1	1	0
		References			Study	Quality										
		71 (15653584)				4										
		70 (10685551)			2											
		67 (18161399)			3											
		68 (10064410)				3										
		69 (15505312)				3										
US color Doppler pelvis	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 r [pe		5	5	0	4	0	0	1	8	1	0	0
		References			Study	Quality										
		78 (12899492)				4										
		77 (26023602)				3										
US sonohysterography with tubal contrast agent	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 r [pe		5	5	0	5	2	1	4	0	2	0	0
		References			Study	Quality										
		42 (27054310)				4										

## **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.