

**American College of Radiology
ACR Appropriateness Criteria®**

Endometriosis

Variant 1: Adult. Clinically suspected pelvic endometriosis. Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations								
							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	3	3	6

References	Study Quality
59 (34090310)	3
58 (35561121)	3
66 (32126302)	3
69 (32198902)	3
61 (33148442)	Good
60 (35144419)	Good
68 (35289968)	Good
7 (26919512)	Good
70 (31493569)	4
67 (33582378)	3
62 (29154402)	Good
63 (32083128)	3
54 (32083336)	Good
52 (34919760)	3
65 (29890654)	3
56 (26250349)	Good
57 (24165087)	3
40 (29465552)	3

[illegible]

		50 (21216125)		3											
US pelvis transabdominal	Usually not appropriate	Expert Consensus	0 0 mSv	0 0 mSv [ped]	3	3	0	1	7	2	1	0	1	0	0
CT pelvis with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	2	6	3	2	0	1	0	0	0	0
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	10	1	0	0	1	0	0	0	0
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	11	0	1	0	0	0	0	0	0

Variant 2: Adult. Clinically suspected pelvic endometriosis. Indeterminate or negative ultrasound. Next imaging study for characterization or treatment planning.

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	Strong	0.0 mSv	0.0 mSv [ped]	9	9	0	0	0	0	0	0	1	1	10

References	Study Quality
40 (29465552)	3
78 (27666420)	2
42 (25604906)	3
77 (23982288)	3
76 (31468155)	3
74 (32619220)	4
73 (31300849)	3
33 (32193592)	4
41 (33221957)	3
79 (33339775)	3
46 (35421318)	Good
75 (33625575)	3

		43 (34639248)		4											
MRI pelvis without IV contrast	Usually appropriate	Expert Consensus	0 0 mSv	0 0 mSv [ped]	7	7	0	0	1	0	1	1	5	4	0
CT pelvis with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	2	4	5	1	0	0	2	0	0	0
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	10	0	1	0	1	0	0	0	0
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	10	1	1	0	0	0	0	0	0

Variant 3: Adult. Clinically suspected rectosigmoid endometriosis. 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	Strong	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	3	9
		References		Study Quality											
		92 (28802956)		3											
		42 (25604906)		3											
		94 (24297583)		3											
		98 (22744354)		3											
		95 (31739271)		2											
		93 (32851441)		3											
		97 (34241976)		Good											
		91 (21822742)		3											
		96 (35107223)		3											
		MRI pelvis without IV contrast	Usually appropriate	Expert Consensus	O 0 mSv										O 0 mSv [ped]

US pelvis transrectal	Usually appropriate	Moderate	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	1	1	9	1	0
		References		Study Quality											
		40 (29465552)		3											
		99 (26051099)		Good											
		100 (32698994)		4											
US pelvis transvaginal	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	0	0	10	1	1
		References		Study Quality											
		102 (26213903)		Good											
		104 (22535651)		3											
		105 (34182605)		3											
		109 (29654939)		4											
		101 (33038269)		Good											
		103 (30007066)		2											
		106 (33857130)		3											
		107 (32007640)		3											
		108 (34990811)		3											
		US pelvis transabdominal and US pelvis transvaginal	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]									
		References		Study Quality											
		80 (29545217)		3											
Fluoroscopy contrast enema	May be appropriate (Disagreement)	Expert Opinion	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	5	5	0	2	4	2	1	3	0	0	0
		References		Study Quality											
		90 (28882922)		3											
		100 (32698994)		4											
CT pelvis with IV contrast	Usually not appropriate	Strong	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	3	3	1	5	4	0	0	2	0	0	0
		References		Study Quality											

		88 (26725882)		3											
		86 (24012208)		3											
		81 (27841773)		3											
		82 (25757812)		2											
		84 (24287396)		3											
		87 (24045261)		3											
		83 (32558775)		3											
		85 (32620408)		4											
		89 (31493726)		Good											
US pelvis transabdominal	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	5	0	2	2	3	0	0	0	0
		References		Study Quality											
		14 (27624497)		4											
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	12	0	0	0	0	0	0	0	0
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	11	1	0	0	0	0	0	0	0

Variant 4: Adult. Established postoperative endometriosis diagnosis. New or ongoing symptoms of endometriosis. Follow-up 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]	9	9	0	0	0	1	0	0	1	4	6
		References		Study Quality											
		110 (30770231)		4											
US pelvis transvaginal	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	1	2	4	2	1	2
		References		Study Quality											

		111 (32936475)		3											
US pelvis transabdominal and US pelvis transvaginal	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	0	1	6	5	0	0
		References		Study Quality											
		52 (34919760)		3											
MRI pelvis without IV contrast	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	0	2	0	3	1	6	0	0
US pelvis transabdominal	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	4	4	1	1	4	2	3	0	1	0	0
CT pelvis with IV contrast	Usually not appropriate	Expert Consensus	⚠⚠⚠ 1-10 mSv	⚠⚠⚠⚠ 3-10 mSv [ped]	3	3	3	2	4	2	1	0	0	0	0
CT pelvis without IV contrast	Usually not appropriate	Expert Consensus	⚠⚠⚠ 1-10 mSv	⚠⚠⚠⚠ 3-10 mSv [ped]	1	1	9	1	1	0	1	0	0	0	0
CT pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	⚠⚠⚠⚠ 10-30 mSv	⚠⚠⚠⚠ 3-10 mSv [ped]	1	1	10	0	1	0	1	0	0	0	0

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.