## American College of Radiology ACR Appropriateness Criteria®

## **Chronic Ankle Pain**

Variant 1: Chronic ankle pain. Initial imaging.

ъ.	Appropriat	teness	COF	4.1.14 DD	, D 1 DD1	D	3.6.31			F	inal [	Гаbи	latio	ns		
Procedure	Catego		SOE	Adults RR	L Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
Radiography ankle	Usually appropri		Limited	<b>⊕</b> <0.1 mS	v <0.03 v mSv [ped]	9	9	0	0	0	0	0	0	0	0	0
			References		Study	y Quality										
			19 (15378290)			2										
			20 (26606603)			3										
CT ankle with IV contrast	Usually appropri		Expert Consensus	<b>⊕</b> <0.1 mS	v 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without IV contrast	Usually appropri		Expert Consensus	<b>⊕</b> <0.1 mS	v 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without and with IV contrast	Usually appropri		Expert Consensus	<b></b> <0.1 mS	<b>��</b> 0.03-	1	1	0	0	0	0	0	0	0	0	0
MRI ankle without IV contrast	Usually appropri		Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
MRI ankle without and with IV contrast	Usually appropri		Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Bone scan ankle	Usually appropri		Expert Consensus	��� 1-10 mSv	⊕⊕⊕⊕ 3- 10 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0

US ankle	Usually not	Expert O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0	
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Variant 2: Chronic ankle pain. Multiple sites of degenerative joint disease in the hindfoot detected by ankle radiographs. Next study.

<b>D</b> 1	Appropria	ateness	COF	4 1 14 DDI	,	D I DDI	D 4	3.6.11			F	inal '	Tabu	latio	ns		
Procedure	Catego		SOE	Adults RRL		Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
Image-guided anesthetic injection ankle and hindfoot	May l	be riate	Limited	Varies		Varies	6	6	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			23 (27468671)				4										
			24 (19321101)				3										
			25 (25542943)				3										
			11 (23487336)				4										
			21 (8751679)				4										
			22 (9240528)				4		_								
MRI ankle and hindfoot without IV contrast	May l appropr	be riate	Limited	O 0 mSv		O 0 mSv [ped]	5	5	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			13 (11870444)				4										
			14 (20483139)				3										
			15 (19685050)				3										
CT ankle and hindfoot without IV contrast	May l appropr	be riate	Limited	� <0.1 mS\	v		4	4	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			5 (15686236)				2										
CT ankle and hindfoot with IV contrast	Usually appropr		Limited	� <0.1 mS\	v		1	1	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			5 (15686236)				2										

CT ankle and hindfoot without and with IV contrast	Usuall approp	Limited	<b></b> <0.1 mS	Sv	1	1	0	0	0	0	0	0	0	0	0
		References		St	ıdy Quality										
		5 (15686236)			2		_		_					_	
Radiographic arthrography ankle and hindfoot	Usuall approp	Expert Consensus	<b>� &lt;</b> 0.1 mS	Sv	1	1	0	0	0	0	0	0	0	0	0
MRI ankle and hindfoot without and with IV contrast	Usuall approp	Limited	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
		References		St	ıdy Quality										
		13 (11870444)			4										
		14 (20483139)			3										
		15 (19685050)			3		_								
Bone scan hindfoot/ankle	Usuall approp	Expert Consensus	��� 1-1 mSv	0	1	1	0	0	0	0	0	0	0	0	0
US ankle and hindfoot	Usuall approp	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT arthrography ankle and hindfoot	Usuall approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv	1	1	0	0	0	0	0	0	0	0	0
MR arthrography ankle and hindfoot	Usuall approp	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0

Variant 3: Chronic ankle pain. Ankle radiographs normal, suspected osteochondral lesion. Next study.

D 1	Appropri	ateness	COF	4 1 14 DD		D I DDI	D. (	3.7.11			F	inal '	Tabu	latio	ns		
Procedure	Categ		SOE	Adults RR	KL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI ankle without IV contrast	Usua approp	.*	Strong	O 0 mSv	/	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	0	0
			References			Study	Quality										

References	Study Quality
28 (8848747)	3
30 (18635628)	4

			29 (18779951)			3										
			31 (21826613)			4										
			5 (15686236)			2										
			6 (12682790)			2										
CT arthrography ankle	May approp		Limited	<b>≎</b> <0.1 mS	Sv	6	6	0	0	0	0	0	0	0	0	0
			References		Study	/ Quality										
			6 (12682790)			2										
MR arthrography ankle	May approp		Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	0	0	0	0	0	0
	•		References		Study	Quality		•								
			6 (12682790)			2										
Bone scan with SPECT or SPECT/CT ankle	May approp (Disagre	riate	Expert Opinion	<b>≎≎≎</b> 1-10 mSv	0	5	5	4	1	1	4	4	3	0	0	0
			References		Study	Quality										
			32 (21300809)			3										
			33 (21477540)			2										
			34 (25920051)			3										
			8 (21321364)			3										
CT ankle without IV contrast	May approp		Limited	<b>�</b> <0.1 mS	�� 0.03- 0.3 mSv [ped]	4	4	0	0	0	0	0	0	0	0	0
			References		Study	Quality										
			5 (15686236)			2										
Image-guided anesthetic injection ankle	Usuall approp		Expert Consensus	Varies	Varies	3	3	8	0	1	3	4	1	0	0	0
CT ankle with IV contrast	Usuall approp		Limited	<b>≎</b> <0.1 mS	© 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
			References		Study	Quality										
			5 (15686236)			2										

CT ankle without and with IV contrast	Usually approp	Limited	<b>≎</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
		References			Study	Quality										
		5 (15686236)				2										
US ankle	Usually approp	Expert Consensus	O 0 mSv	,	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Radiography ankle stress views	Usually approp	Expert Consensus	<b>� &lt;</b> 0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
MRI ankle without and with IV contrast	Usually approp	Strong	O 0 mSv	,	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
		References			Study	Quality										
		28 (8848747)				3										
		30 (18635628)				4										
		29 (18779951)				3										
		31 (21826613)				4										
		5 (15686236)				2										
		6 (12682790)				2										
Radiographic arthrography ankle	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0

Variant 4: Chronic ankle pain. Ankle radiographs normal or nonspecific, suspected tendon abnormality. Next study.

48 (21119941)

D 1	Appropri	iateness	COF	4.1.14 DD	_	D I DDI	D 41	3.6 11			F	inal '	Гabu	latio	ns		
Procedure	Categ		SOE	Adults RR	L	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI ankle without IV contrast	Usua approp		Limited	O 0 mSv	,	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	0	0
	•		References			Study	Quality		_								
			37 (15895226)				3										

			1												
		45 (19945971)			4										
		39 (8915043)			3										
		44 (15385290)			3										
		49 (21570324)			4										
		50 (23966263)			3										
		16 (3420263)			3										
US ankle	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		36 (9544608)			3										
		37 (15895226)			3										
		38 (16085620)			3										
		45 (19945971)			4										
		39 (8915043)			3										
		40 (11477244)			3										
		44 (15385290)			3										
		41 (26235856)			2										
		42 (22338951)			2										
		43 (25448138)			2										
		35 (24224598)			4										
		10 (23685674)			4										
		11 (23487336)			4										
US-guided anesthetic injection ankle tendon sheath	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		11 (23487336)			4										
MRI ankle without and with IV contrast	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		37 (15895226)			3										
		48 (21119941)			3										

		45 (19945971)				4										
		39 (8915043)				3										
		44 (15385290)				3										
		49 (21570324)				4										
		50 (23966263)				3										
		16 (3420263)				3										
CT arthrography ankle	Usually approp	Expert Consensus	<b>� &lt;</b> 0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
CT ankle with IV contrast	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without IV contrast	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	δv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without and with IV contrast	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	δv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Fluoroscopy tenography ankle	Usually approp	Limited	<b>� &lt;</b> 0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
		References			Study	Quality										
		51 (11159075)				4										
Radiographic arthrography ankle	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
MR arthrography ankle	Usually approp	Expert Consensus	O 0 mSv	′	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Bone scan ankle	Usually approp	Expert Consensus	��� 1-1 mSv	0	���� 3- 10 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Radiography ankle stress views	Usually approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0

Variant 5: Chronic ankle pain. Ankle radiographs normal or nonspecific, suspected ankle instability. Next study.

ъ 1	Appropriateness	COE	A L L DDI	D I DDI	D 4	N.C. 11			F	inal	Tabu	latio	ıs		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI ankle without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		57 (15256624)			4										
		54 (12616009)			3										
		55 (14743024)			3										
		56 (11128010)			4										
		53 (25539277)			3										
		52 (22078461)			3										
		14 (20483139)			3										
		15 (19685050)			3		_	1	ı	1	1			ı	
MR arthrography ankle	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		12 (23622094)			4										
US ankle	May be appropriate	Strong	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	0	0	0	0	0	0
		References		Study	Quality										
		58 (20817846)			3										
		60 (7776043)			2										
		1 (26515772)			3										
		59 (24067992)			3										
		15 (19685050)			3										
Radiography ankle stress views	May be appropriate	Strong	<b>⊕</b> <0.1 mSv		6	6	0	0	0	0	4	6	3	4	0
		References		Study	Quality										
		1 (26515772)			3										

		61 (26869035)				2											
			3 (22224329)				3										
			4 (20493798)				4										
			15 (19685050)				3										
CT arthrography ankle	May b		Limited	<b>≎</b> <0.1 mS	Sv		5	5	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			58 (20817846)				3										
CT ankle with IV contrast	Usually appropri		Expert Consensus	<b>�</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without IV contrast	Usually appropri		Expert Consensus	<b>≎</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
CT ankle without and with IV contrast	Usually appropri		Expert Consensus	<b>�</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
Radiographic arthrography ankle	Usually appropri		Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
Image-guided anesthetic injection ankle	Usually appropri		Expert Consensus	Varies		Varies	1	1	0	0	0	0	0	0	0	0	0
MRI ankle without and with IV contrast	Usually appropri		Limited	O 0 mSv	/	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0

3

2 (24560546)

References	Study Quality
57 (15256624)	4
54 (12616009)	3
55 (14743024)	3
56 (11128010)	4
53 (25539277)	3
52 (22078461)	3
14 (20483139)	3

		15 (19685050)													
Bone scan ankle	Usually not appropriate	Expert Consensus	<b>⊕⊕⊕</b> 1-10 mSv	���� 3- 10 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0

## Variant 6: Chronic ankle pain. Ankle radiographs normal or nonspecific, suspected ankle impingement syndrome. Next study.

Procedure	Appropria	ateness	SOE	Adults RRI	.	Peds RRL	Datina	Median			F	inal '	Tabu	lation	ıs		
Procedure	Catego		SUE	Adults RRI	L	Peas KKL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI ankle without IV contrast	Usual appropi		Limited	O 0 mSv		O 0 mSv [ped]	9	9	0	0	1	0	2	2	2	1	8
			References			Study	Quality										
			73 (16949527)				3										
			68 (11856682)				4										
			64 (10550534)				4										
			67 (15488852)				4										
			76 (20729435)				4										
			62 (10796931)				4										
			75 (14696227)				2										
			74 (20727312)				3		_								
MR arthrography ankle	May l appropi		Limited	O 0 mSv		O 0 mSv [ped]	6	6	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			69 (11568338)				2										
			68 (11856682)				4					1					
CT arthrography ankle	May appropi		Limited	<b>ଡ</b> <0.1 mS	Sv		5	5	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			77 (20489099)				2										
US ankle	May lappropi	be riate	Limited	O 0 mSv		O 0 mSv [ped]	5	5	0	0	0	0	0	0	0	0	0

		References 70 (9275907) 72 (18064426)			Study	Quality											
			` '				3										
			72 (18064426)				3			1		_	1	1			
CT ankle without IV contrast	May approp		Limited	<b>≎</b> <0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	5	5	0	0	0	2	10	2	2	1	0
			References			Study	Quality										
			62 (10796931)				4										
Image-guided anesthetic injection ankle	May approp (Disagre	riate	Expert Opinion	Varies		Varies	5	5	0	3	3	4	4	1	0	2	0
			References			Study	Quality										
			78 (16362423)				4										
			79 (10847526)				3										
3-phase bone scan with SPECT or SPECT/CT ankle	Usually approp		Limited	<b>���</b> 1-10 mSv	0	���� 3- 10 mSv [ped]	2	2	8	2	0	3	3	0	0	0	0
			References			Study	Quality										
			7 (23211997)			_	3										
MRI ankle without and with IV contrast	Usually approp		Limited	O 0 mSv	′	O 0 mSv [ped]	2	2	8	3	4	2	0	0	0	0	0
			References			Study	Quality										
			73 (16949527)				3										
			68 (11856682)				4										
			64 (10550534)				4										
			67 (15488852)				4										
			76 (20729435)				4										
			62 (10796931)				4										
			75 (14696227)				2										
			74 (20727312)				3	_				_		_			
CT ankle with IV contrast	Usually approp		Limited	<b>� &lt;</b> 0.1 mS	Sv	�� 0.03- 0.3 mSv [ped]	1	1	14	2	0	0	0	0	0	0	0

		References				Study	Quality										
			62 (10796931)				4										
CT ankle without and with IV contrast	Usuall approp		Limited		Sv	�� 0.03- 0.3 mSv [ped]	1	1	14	0	2	0	0	0	0	0	0
			References		Study Quality												
			62 (10796931)			4											
Radiography ankle stress views	Usuall approp		Expert Consensus	<b>⊕</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0
Radiographic arthrography ankle	Usuall approp	y not oriate	Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	0	0	0	0

Variant 7: Chronic ankle pain. Ankle radiographs normal, pain of uncertain etiology. Next study.

D 1	Appropria	ateness	COF	4 1 14 DDI	.   .	n 1 ppr	D 4	37.11			F	inal '	<b>Fabu</b> l	lation	ıs		
Procedure	Catego		SOE	Adults RRI	L	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI ankle without IV contrast	Usual appropr	iate		O 0 mSv		O 0 mSv [ped]	9	9	0	0	0	0	0	0	0	0	0
			References			Study	Quality										
			82 (17015602) 80 (21343690)				3										
			80 (21343690) 81 (17000238)				4										
			81 (17099238)		4												
			13 (11870444)				4										
CT ankle without IV contrast	May t appropr		Limited	<b>≎</b> <0.1 mS		�� 0.03- 0.3 mSv [ped]	5	5	0	0	0	0	11	4	2	0	0
			References			Study	Quality										
			85 (15333345)				3										
			80 (21343690)				4										
Bone scan with SPECT or SPECT/CT ankle	May t appropr (Disagree	riate	Expert Opinion	��� 1-10 mSv	) (	���� 3- 10 mSv [ped]	5	5	2	3	3	2	4	3	0	0	0

		References	Study	y Quality											
		86 (21540716)		4											
Image-guided anesthetic injection ankle	May be appropriate	Strong	Varies	Varies	4	4	5	1	1	2	5	1	1	0	0
		References		Study	y Quality										
		87 (21941219)	)		3										
		88 (19587626)	)		1										
		89 (19258984)			1										
US ankle	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	4	4	5	2	0	6	3	0	0	0	1
		References		Study	y Quality										
		84 (18451390)			4										
		83 (17179329)			4						_				
CT arthrography ankle	Usually not appropriate	Expert Consensus	<b>≎</b> <0.1 mSv	,	1	1	0	0	0	0	0	0	0	0	0
CT ankle with IV contrast	Usually not appropriate	Limited	<b>⊕</b> <0.1 mSv		1	1	16	0	0	0	0	0	0	0	0
		References		Study	y Quality										
		85 (15333345)	)		3										
		80 (21343690)			4										
CT ankle without and with IV contrast	Usually not appropriate	Limited	<b>⊕</b> <0.1 mSv		1	1	16	0	0	0	0	0	0	0	0
		References		Study	y Quality										
		85 (15333345)	3												
		80 (21343690)		4											
Radiographic arthrography ankle	Usually not appropriate	Expert Consensus	<b></b> <0.1 mSv	,	1	1	0	0	0	0	0	0	0	0	0
MR arthrography ankle	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0

MRI ankle without and with IV contrast	Usuall approp	Limited	Limited O 0 mSv		O 0 mSv [ped]	1	1	0	0	0	0	0	0	0	0	0
		References			Study	Quality										
		82 (17015602)														
		80 (21343690)				4										
		81 (17099238)		4												
		13 (11870444)				4										
Radiography ankle stress views	Usuall approp	Expert Consensus	<b>≎</b> <0.1 mS	Sv		1	1	0	0	0	0	0	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.