$\begin{array}{c} \textbf{American College of Radiology} \\ \textbf{ACR Appropriateness Criteria}^{\circledR} \end{array}$

Congenital or Acquired Heart Disease

Variant 1: Child or adult. Repaired tetralogy of Fallot or pulmonary valve stenosis with concern for pulmonary valve dysfunction or branch pulmonary artery stenosis. Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

	Appropriateness	GOT.	A L IV DDI	ults 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
MRA chest without and with IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	4	2	2	6	7
MRI heart function and morphology without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	2	2	4	9	4
		References		Study	Quality										
		15 (7677083)			3										
		16 (32653300)			4										
		17 (33022183)			3										
MRI heart function and morphology without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	1	0	3	7	9
		References		Study	Quality				-						
		15 (7677083)			3										
		16 (32653300)			4										
		17 (33022183)			3										
CTA chest with IV contrast	Usually appropriate	Expert Consensus	��� 1-10 mSv	ଡେଡେଡେ 3- 10 mSv [ped]	7	7	0	0	1	0	5	2	8	5	0
CT heart function and morphology with IV contrast	Usually appropriate	Limited	≎≎≎≎ 10-3 mSv	0	7	7	0	0	0	0	2	4	6	4	5

		D. C.		G. 1	0 11:										
		References		Study	Quality										
		14 (26679548)			4										
		13 (26272851)			4				I	1	1		ı		_
Radiography chest	Usually appropriate	Limited	⊕ <0.1 mSv		7	7	0	0	0	2	3	3	8	4	0
		References		Study	Quality										
		9 (18377431)			4										
CTA coronary arteries with IV contrast	May be appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	6	6	0	0	0	2	5	4	8	1	0
MRA chest without IV contrast	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	6	6	1	0	0	2	5	5	4	3	1
Perfusion scan lung	May be appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	6	6	1	1	0	2	7	6	3	0	1
		References		Study	Quality										
		12 (24468055)			4										
Arteriography pulmonary	May be appropriate	Limited	≎≎≎≎ 10-30 mSv		5	5	0	0	0	5	11	4	0	0	0
		References		Study	Quality			•	•	•	•	•	•		
		12 (24468055)			4										
Arteriography coronary with ventriculography	May be appropriate	Limited	��� 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	5	5	0	0	0	2	16	2	0	0	0
		References		Study	Quality										
		9 (18377431)			4										
		10 (16638542)			4										
		11 (20837914)		1											
US echocardiography transesophageal	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	5	5	1	0	1	5	8	5	0	0	0
		References	Study	Quality											
		12 (24468055)		4											
		(

6 (22790360)	3
18 (15975339)	3

		10 (15) (1555)			-										
MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	7	6	3	4	1	0	0	0	0
MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	7	5	3	3	2	0	0	0	1
SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	୫୫୫୫ 10-30 mSv	����� 10-30 mSv [ped]	2	2	7	5	7	1	0	0	0	0	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	1	1	0	0	0	0	0	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	1	1	0	0	0	0	0	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	2	0	0	0	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	2	0	0	0	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	15	4	2	0	0	0	0	0	0

Variant 2: Child or adult. Transposition of the great arteries after atrial switch. Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

D 1	Appropriateness	COF	A L L DDI	D I DDI	D 4	3.6.11			F	inal '	Гаbu	latio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI heart function and morphology without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	9	9	0	0	1	0	1	0	2	4	13

References	Study Quality
22 (15851616)	3

MRA chest without and with IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	8	8	1	0	1	0	2	3	2	8	4
MRI heart function and morphology without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	1	0	5	8	6
		References		Study	y Quality										
		22 (15851616)			3				_						
CTA chest with IV contrast	Usually appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	1	1	1	3	5	7	3	0
CT heart function and morphology with IV contrast	Usually appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	1	3	2	7	4	4
MRA chest without IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	1	0	0	1	1	8	9	0
CTA coronary arteries with IV contrast	May be appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	5	5	0	2	0	6	8	3	1	0	0
US echocardiography transesophageal	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	5	5	0	1	0	3	7	7	2	0	0
Radiography chest	May be appropriate	Expert Consensus	≎ <0.1 mSv		5	5	0	1	0	4	13	2	0	0	0
Arteriography pulmonary	May be appropriate	Limited	���� 10-30 mSv		4	4	1	1	3	6	4	5	1	0	0
		References		Study	y Quality										
		21 (27372954)			4										
Arteriography coronary with ventriculography	Usually not appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	2	2	9	6	5	0	0	0	0	0	0
		References		Study Quality											
		21 (27372954)		4											
MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	8	8	4	0	0	0	0	0	0

MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	8	6	5	1	0	0	0	0	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	20	0	0	0	0	0	1	0	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	20	0	0	0	0	0	1	0	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	2	0	0	0	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	2	0	0	0	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	16	2	3	0	0	0	0	0	0
SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	୫୫୫୫ 10-30 mSv	����� 10-30 mSv [ped]	1	1	14	3	3	0	0	0	1	0	0

Variant 3: Child or adult. Transposition of the great arteries after arterial switch. Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

ъ 1	Appropriateness	COF	A L L DDI	n i nnr	D 41	3.6 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 heart function and morphology without and with IV contrast	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	1	2	0	1	4	13

References	Study Quality
28 (29748700)	3
21 (27372954)	4
26 (15591430)	2
27 (20452235)	2

MRA chest without and with IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	1	3	3	4	5	5
MRI heart function and morphology without IV contrast	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	0	0	3	0	4	8	6
		References		Study	Quality										
		28 (29748700)			3										
		21 (27372954)			4										
		26 (15591430)			2										
		27 (20452235)			2										
CTA chest with IV contrast	Usually appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	1	0	0	5	4	8	3	0
CT heart function and morphology with IV contrast	Usually appropriate	Expert Consensus	���� 10-30 mSv	0	7	7	0	0	0	1	3	2	7	5	3
MRA chest without IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	1	0	1	3	5	5	4	2
MRI heart function with stress without and with IV contrast	Usually appropriate	Limited 0.0 mSv		O 0 mSv [ped]	7	7	0	0	1	1	4	3	7	4	0
		References		Study	Quality										
		28 (29748700)			3										
		26 (15591430)			2										
		29 (20416135)			4		_								
Radiography chest	Usually appropriate	Expert Consensus	⊕ <0.1 mSv		7	7	0	0	1	2	5	1	10	1	0
CTA coronary arteries with IV contrast	May be appropriate	Moderate	��� 1-10 mSv	���� 3- 10 mSv [ped]	6	6	0	0	0	0	6	8	4	2	0
		References	Study	Quality											
		24 (29090351)		3											
		19 (28632651)		4											
		25 (19356445)			2										

		23 (33028389)		Good											
MRI heart function with stress without IV contrast	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	0	2	1	6	3	6	2	0
		References		Study	y Quality										
		28 (29748700)			3										
		26 (15591430)			2										
		29 (20416135)			4										
SPECT or SPECT/CT MPI rest and stress	May be appropriate	Limited	���� 10-30 mSv	����� 10-30 mSv [ped]	5	5	0	0	2	2	12	3	1	0	0
		References		Study	y Quality										
		30 (31119712)			4										
Arteriography pulmonary	Usually not appropriate	Expert Consensus	���� 10-30 mSv		3	3	3	3	7	2	4	1	0	0	0
Arteriography coronary with ventriculography	Usually not appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	3	3	4	2	6	4	2	2	0	0	0
		References		Study	y Quality										
		21 (27372954)			4										
US echocardiography transesophageal	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	3	3	4	2	5	3	4	2	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	3	3	8	2	2	1	6	1	1	0	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	0	1	0	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	0	1	0	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	2	0	0	0	0	0	0

MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	2	0	0	0	0	0	0	
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Variant 4: Child. Suspected or confirmed congenital or acquired coronary artery abnormality. Incomplete or inadequate assessment of coronary morphology after transthoracic echocardiography. Next imaging study.

	Appropriateness	GOT		D 1 DD1		3.5 31			F	inal '	Tabu	lation	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CTA coronary arteries with IV contrast	Usually appropriate	Limited	⊕⊕⊕ 1-10 mSv	���� 3- 10 mSv [ped]	9	9	0	0	0	0	1	0	0	4	16
		References		Study	Quality										
		35 (33755749)			2										
MRA chest without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	1	0	0	0	1	5	9	4	0
		References		Study	Quality										
		36 (31371063)			3										
		38 (21921132)			2										
		37 (34540764)			3										
MRA chest without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	2	5	9	4	0
		References		Study	Quality										
		36 (31371063)			3										
		38 (21921132)			2										
		37 (34540764)			3										
MRI heart function and morphology without IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	1	5	4	7	3	0
MRI heart function and morphology without and with IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	4	5	8	3	0

Arteriography coronary with ventriculography	May approp		Limited	��� 1-10 mSv	0	���� 3- 10 mSv [ped]	6	6	0	0	0	2	3	6	4	1	5
			References			Study	/ Quality										
			33 (33614558)				2										
MRI heart function with stress without and with IV contrast	May approp		Limited	O 0 mSv	,	O 0 mSv [ped]	6	6	0	0	0	0	9	7	2	2	0
			References			Study	Quality										
			39 (32069111)				2										
			36 (31371063)				3										
CTA chest with IV contrast	May approp		Limited	��� 1-1(mSv	0	���� 3- 10 mSv [ped]	5	5	1	1	6	1	4	7	0	0	1
			References		•	Study	Quality										
			34 (28356445)			_	4										
CT heart function and morphology with IV contrast	May approp		Expert Consensus	���� 10-3 mSv	30	���� 3- 10 mSv [ped]	5	5	0	0	0	1	10	6	1	1	1
MRA abdomen without and with IV contrast	May approp		Expert Consensus	O 0 mSv	,	O 0 mSv [ped]	5	5	2	0	1	5	9	3	0	0	0
MRI heart function with stress without IV contrast	May approp		Limited	O 0 mSv	,	O 0 mSv [ped]	5	5	1	0	0	0	13	5	0	1	0
			References			Study	Quality										
			39 (32069111)				2										
			36 (31371063)				3										
SPECT or SPECT/CT MPI rest and stress	May approp (Disagre	oriate	Expert Opinion	���� 10-3 mSv	30	����� 10-30 mSv [ped]	5	5	0	0	2	1	4	3	8	2	0
			References			Study	Quality			-			_		_		
			40 (28385257)				4										
MRA abdomen without IV contrast	Usuall approp		Expert Consensus	O 0 mSv	,	O 0 mSv [ped]	3	3	9	2	2	3	3	1	1	0	0

US echocardiography transesophageal	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	3	3	5	0	10	1	3	1	1	0	0
Arteriography pulmonary	Usually not appropriate	Expert Consensus	���� 10-30 mSv		1	1	12	4	2	1	0	0	2	0	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	16	1	2	1	0	1	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	15	1	2	1	0	2	0	0	0
Radiography chest	Usually not appropriate	Expert Consensus	 		1	1	11	6	2	0	1	0	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	13	4	1	0	1	1	0	1	0

Variant 5: Child. Known single ventricle physiology. Preoperative evaluation for stage 2 single ventricle palliation. Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

	Appropri	ateness	GOT			D 1 DD7		35.11			F	inal '	Tabu	latio	ns		
Procedure	Categ	ory	SOE	Adults RR	KL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRA chest without and with IV contrast	Usua approp		Expert Consensus	O 0 mSv	/	O 0 mSv [ped]	8	8	0	0	0	0	0	0	6	10	4
MRI heart function and morphology without IV contrast	Usua approp		Limited	O 0 mS\	/	O 0 mSv [ped]	8	8	0	0	0	1	2	1	4	8	5
			References			Study	Quality										
			42 (19616678)				2										
MRI heart function and morphology without and with IV contrast	Usua approp		Limited	O 0 mSv	,	O 0 mSv [ped]	8	8	0	0	1	1	1	0	2	8	8
			References			Study	Quality										
			42 (19616678)				2										

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CTA chest with IV contrast	Usually appropriate	Moderate	��� 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	0	5	5	6	4	1
		References		Study	Quality		•			•		•		•	
		44 (33078501)			2										
CT heart function and morphology with IV contrast	Usually appropriate	Limited	���� 10-30 mSv	**** 3- 10 mSv [ped]	7	7	0	0	1	1	4	2	4	5	4
		References		Study	Quality		•					•	•	•	
		43 (24930614)			4										
Arteriography pulmonary	Usually appropriate	Limited	���� 10-30 mSv)	7	7	0	0	2	0	6	1	6	5	1
		References		Study	Quality										
		41 (26356648)			4										
Arteriography coronary with ventriculography	Usually appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	0	0	0	11	8	1
		References		Study	Quality										
		42 (19616678)			2										
		41 (26356648)			4										
MRA chest without IV contrast	Usually appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	1	1	11	5	2
US echocardiography transesophageal	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	5	5	1	0	0	2	8	9	0	0	0
Radiography chest	Usually not appropriate	Expert Consensus	� <0.1 mSv		3	3	3	4	5	1	6	0	0	1	1
CTA coronary arteries with IV contrast	Usually not appropriate	Expert Consensus	��� 1-10 mSv	❤️❤️❤️ 3- 10 mSv [ped]	2	2	6	8	4	1	1	0	0	0	0
MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	10	9	1	0	0	0	0	0	0

MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	10	7	3	0	0	0	0	0	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	0	0	1	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	0	0	1	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	1	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	1	0	0	1	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	17	2	1	0	0	1	0	0	0
SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	≎≎≎≎ 10-30 mSv	����� 10-30 mSv [ped]	1	1	15	3	1	0	0	1	1	0	0

Variant 6: Child. Known single ventricle physiology. Preoperative evaluation for stage 3 single ventricle palliation (total cavopulmonary connection). Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

D 1	Appropria	ateness	COF	4 1 14 DD		D I DDI	D 41	24.11			F	inal '	Гаbu	latio	ns		
Procedure	Catego		SOE	Adults RR	L	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI heart function and morphology without IV contrast	Usual appropr		Limited	O 0 mSv	,	O 0 mSv [ped]	8	8	0	0	1	1	2	1	3	7	6
			References			Study	Quality										
			49 (-3194075)				4										
			50 (24254479)				4										
MRI heart function and morphology without and with IV contrast	Usual appropr		Limited	O 0 mSv	,	O 0 mSv [ped]	8	8	0	0	2	0	1	0	2	6	10
			References			Study	Quality		•	•		-		•	•		

	1		Г			1									
		49 (-3194075)			4										
		50 (24254479)			4						ı	ı	г		
CTA chest with IV contrast	Usua approp	Limited	��� 1-10 mSv		7	7	0	0	0	0	5	6	7	2	1
		References		Stud	y Quality										
		48 (27618316)			4										
CT heart function and morphology with IV contrast	Usua approp	Limited	≎≎≎≎ 10-3 mSv	30	7	7	0	0	1	0	2	3	8	4	3
		References		Stud	y Quality										
		47 (28889811)			3										
Arteriography pulmonary	Usua approp	Expert Consensus	���� 10-3 mSv	30	7	7	0	0	0	0	2	3	10	4	1
Arteriography coronary with ventriculography	Usua approp	Strong	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	0	0	1	11	7	1
		References		Stud	y Quality										
		45 (19660367)			2										
		46 (22077996)			2										
MRA chest without and with IV contrast	Usua approp	Expert Consensus	O 0 mSv	O 0 mSv [ped]	7	7	1	0	1	0	3	4	4	6	2
MRA chest without IV contrast	May approp	Expert Consensus	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	1	8	8	3	0	0
US echocardiography transesophageal	May approp	Expert Consensus	O 0 mSv	O 0 mSv [ped]	5	5	0	0	0	2	9	7	2	0	0
Radiography chest	May approp	Expert Consensus	⊕ <0.1 mS		5	5	0	1	3	4	10	2	0	0	0
CTA coronary arteries with IV contrast	Usually approp	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	3	3	5	3	8	2	0	2	0	0	0

MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	10	2	4	1	3	0	0	1	0
MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	9	2	5	0	3	0	1	1	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	0	1	1	0	0	0	1	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	17	1	1	1	0	0	0	0	1
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	1	0	0	0	1	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	1	0	0	0	1	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	17	1	3	0	0	0	0	0	0
SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	���� 10-30 mSv	����� 10-30 mSv [ped]	1	1	14	2	2	0	1	1	1	0	0

Variant 7: Child or adult. Known single ventricle physiology. Postoperative evaluation after stage 3 single ventricle palliation (total cavopulmonary connection). Incomplete or inadequate assessment of cardiovascular morphology and function after transthoracic echocardiography. Next imaging study.

n 1	Appropriateness	COF	A L L DDI	D I DDI	D 41	3.6 11			F	inal '	Гаbu	llatio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRI heart function and morphology without and with IV contrast	Usually appropriate	Moderate	O 0 mSv	O 0 mSv [ped]	9	9	0	0	0	0	2	0	3	3	13

References	Study Quality
53 (12234957)	3
55 (-3194077)	4
54 (28548989)	4

		56 (34934948)			2										
MRI heart function and morphology without IV contrast	Usually appropriate	Moderate	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	2	1	4	7	6
		References		Study	Quality		,		•						
		53 (12234957)			3										
		55 (-3194077)			4										
		54 (28548989)			4										
		56 (34934948)			2										
CTA chest with IV contrast	Usually appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	0	2	8	5	4	2
		References		Study	Quality										
		53 (12234957)			3										
		48 (27618316)			4										
		52 (-3194076)			4										
CT heart function and morphology with IV contrast	Usually appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	7	7	0	0	0	1	2	6	8	2	2
MRA chest without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	1	0	1	0	5	1	9	3	1
		References		Study	Quality										
		53 (12234957)			3										
		52 (-3194076)			4										
MRA chest without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	2	1	8	5	4
		References		Study	Quality										
		53 (12234957)			3										
		52 (-3194076)			4										
CTA coronary arteries with IV contrast	May be appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	6	6	0	0	0	0	9	8	3	0	0
		References		Study	Quality										
		52 (-3194076)			4										

Arteriography coronary with ventriculography	May be appropria	Limited	��� 1-1 mSv	0	���� 3- 10 mSv [ped]	6	6	0	0	0	0	10	8	2	0	0
		References			Study	Quality										
		 52 (-3194076)				4										
US echocardiography transesophageal	May be appropria	Expert Consensus	O 0 mSv	/	O 0 mSv [ped]	6	6	0	0	1	1	6	11	1	0	0
Arteriography pulmonary	May be appropria	Limited	���� 10- mSv	-30		5	5	0	0	0	0	13	5	2	0	0
		References			Study	Quality		•	•							
		52 (-3194076)				4										
Radiography chest	May be appropria	Expert Consensus	≎ <0.1 mS	Sv		4	4	3	2	5	5	4	0	0	1	1
MRI heart function with stress without IV contrast	Usually n appropria	Limited	O 0 mSv	/	O 0 mSv [ped]	3	3	7	2	7	2	2	0	1	0	0
		References			Study	Quality										
		57 (26917538)				2										
		58 (20631032)				3										
MRI heart function with stress without and with IV contrast	Usually n appropria	Limited	O 0 mSv	/	O 0 mSv [ped]	3	3	7	0	6	4	3	0	0	1	0
		References			Study	Quality										
		57 (26917538)				2										
		58 (20631032)				3										
SPECT or SPECT/CT MPI rest and stress	Usually n	Expert Consensus	���� 10- mSv	-30	����� 10-30 mSv [ped]	2	2	10	3	5	3	0	0	0	0	0
MRA abdomen without IV contrast	Usually n appropria	Expert Consensus	O 0 mSv	/	O 0 mSv [ped]	1	1	17	2	1	0	0	0	0	1	0
MRA abdomen without and with IV contrast	Usually n appropria	Expert Consensus	O 0 mSv	,	O 0 mSv [ped]	1	1	17	1	2	0	0	0	0	0	1

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MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	2	0	0	0	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	2	0	0	0	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-30 mSv	���� 3- 10 mSv [ped]	1	1	13	3	1	3	0	0	1	0	0

Variant 8: Child or adult. Known or suspected anomalous pulmonary venous return with inadequate evaluation after transthoracic echocardiography. Next imaging study.

	Appropri	iateness	GOT	4.1.1. DD			.	3.5 31			F	inal '	Tabu	latio	ns		
Procedure	Categ	gory	SOE	Adults RRI	L Ped	ls RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CTA chest with IV contrast	Usua approp		Limited	≎≎≎ 1-10 mSv	' 10	●	9	9	0	0	0	0	0	2	6	3	10
			References			Study	Quality										
			64 (11044048)				3										
			65 (23341089) 66 (19506848)				2										
			66 (19506848)				3										
			67 (29550261)				4										
			67 (29550261) 68 (22236895)				4										
MRA chest without and with IV contrast	Usua approp	ally oriate	Limited	O 0 mSv		0 mSv ped]	9	9	0	0	1	0	0	0	3	6	11
			References			Study	Quality		-								
			68 (22236895)				4										
			69 (19184180)				4										
			70 (8126275)				4										
MRI heart function and morphology without and with IV contrast	Usua approp	lly priate	Limited	O 0 mSv		0 mSv ped]	8	8	0	0	0	0	0	2	8	6	4
			References			Study	Quality										
			68 (22236895)				4										

		71 (12804753)			2										
MRA chest without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	1	3	4	5	5	3
		References		Study	Quality		•	•		•		•			
		68 (22236895)		•	4										
		69 (19184180)			4										
		70 (8126275)			4										
MRI heart function and morphology without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	0	1	12	5	2
		References		Study	Quality										
		68 (22236895)	ı		4										
		71 (12804753)			2										
CT heart function and morphology with IV contrast	May be appropriate	Expert Consensus	���� 10-30 mSv	⊕⊕⊕⊕ 3- 10 mSv [ped]	6	6	0	0	0	0	10	6	4	0	0
MRA abdomen without IV contrast	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	5	5	0	0	1	4	10	4	1	0	0
MRA abdomen without and with IV contrast	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	5	5	0	0	1	1	13	3	2	0	0
US echocardiography transesophageal	Usually not appropriate	Limited	O 0 mSv	O 0 mSv [ped]	3	3	6	3	8	2	1	0	0	0	0
		References		Study	Quality										
		72 (1772706)			4										
		73 (9137235)			4										
		74 (16238553)			4										
Radiography chest	Usually not appropriate	Limited	⊕ <0.1 mSv		3	3	7	3	4	2	4	0	0	0	0
		References		Study	Quality										
		65 (23341089)			2										

CTA coronary arteries with IV contrast	Usually not appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	2	2	10	2	4	1	3	1	0	0	0
Arteriography pulmonary	Usually not appropriate	Expert Consensus	���� 10-3 mSv	0	2	2	6	5	8	0	1	0	0	0	0
Arteriography coronary with ventriculography	Usually not appropriate	Limited	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	2	2	5	6	7	2	0	0	0	0	0
		References		Study	Quality										
		61 (16784931)	1		3										
		62 (6235060)			4										
		63 (16580428)	1		4										
		60 (27831520)			4										
MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	10	3	4	3	1	0	0	0	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	19	0	2	0	0	0	0	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	18	1	2	0	0	0	0	0	0
MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	11	3	5	2	0	0	0	0	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���� 10-3 mSv	0	1	1	19	0	1	1	0	0	0	0	0
SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	୫୫୫୫ 10-3 mSv	⊕⊕⊕⊕⊕ 0 10-30 mSv [ped]	1	1	17	2	2	0	0	0	0	0	0

Variant 9: Child or adult. Suspected aortic coarctation with inadequate evaluation after transthoracic echocardiography. Next imaging study.

, n	Appropriateness	TOD	A L L DDI	D 1 DD1	D 4	36.11			F	inal '	Tabu	ılatio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9

ъ .	Appropriaten	ess cor	A L L DDI	D I DDI	D 4	3.7.11			F	inal '	Tabu	latio	ns		
Procedure	Category	ess SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CTA chest with IV contrast	Usually appropriate	Limited	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	8	8	0	0	1	0	1	0	4	6	9
		References		Study	Quality										
		78 (28377475)			4										
		77 (14975985)			3										
		79 (25714305)			4										
MRA chest without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	0	1	5	4	10
		References		Study	Quality										
		81 (15699283)			3										
		79 (25714305)			4										
		80 (8489869)			3										
		82 (21861960)			3									_	
MRA chest without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	1	0	0	1	1	3	7	4	4
		References		Study	Quality										
		81 (15699283)			3										
		79 (25714305)			4										
		80 (8489869)			3										
		82 (21861960)			3										
MRI heart function and morphology without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	1	5	9	4	1
		References		Study	Quality		-								
		75 (21947983)			4										
MRI heart function and morphology without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	0	2	10	6	2
		References		Study	Quality										
		75 (21947983)			4										

CT heart function and morphology with IV contrast	May be appropriate (Disagreement)	Expert Opinion	���⊕ 10-30 mSv	≎≎≎≎ 3- 10 mSv [ped]	5	5	1	4	3	2	7	3	0	0	0
Arteriography coronary with ventriculography	May be appropriate	Limited	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	5	5	0	1	2	4	9	4	0	0	0
		References		Study	y Quality										
		76 (7585760)			2										
US echocardiography transesophageal	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	3	3	7	1	9	2	1	0	0	0	0
Radiography chest	Usually not appropriate	Expert Consensus	 <0.1 mSv		3	3	7	1	7	2	3	0	0	0	0
CTA coronary arteries with IV contrast	Usually not appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	2	2	10	2	3	3	2	0	1	0	0
Arteriography pulmonary	Usually not appropriate	Expert Consensus	���� 10-30 mSv		1	1	13	4	2	0	0	2	0	0	0
MRA abdomen without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	17	1	1	1	0	0	1	0	0
MRA abdomen without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	17	0	2	1	0	0	0	1	0
MRA neck without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	17	0	3	0	0	0	1	0	0
MRA neck without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	17	0	3	0	0	0	0	1	0
MRI heart function with stress without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	12	2	6	0	0	0	1	0	0
MRI heart function with stress without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	11	3	6	0	0	0	0	1	0
FDG-PET/CT heart	Usually not appropriate	Expert Consensus	���⊕ 10-30 mSv	���� 3- 10 mSv [ped]	1	1	18	1	1	1	0	0	0	0	0

SPECT or SPECT/CT MPI rest and stress	Usually not appropriate	Expert Consensus	���� 10-30 mSv	����� 10-30 mSv [ped]	1	1	16	1	4	0	0	0	0	0	0	
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Variant 10: Child. Known aortopathy or connective tissue disease. Surveillance of the aorta after inadequate or incomplete evaluation by transthoracic echocardiography. Next imaging study.

D 1	Appropriateness	COF	A L L DDI	D I DDI	D (1	3.5 31			F	inal '	Tabu	latio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
MRA chest without and with IV contrast	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	9	9	0	0	1	0	0	0	0	6	14
		References		Study	Quality										
		91 (32453278)			2										
		92 (32531300)			4										
		93 (32167203)			2				_						
CTA chest with IV contrast	Usually appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	8	8	0	0	0	0	3	3	3	4	8
MRA chest without IV contrast	Usually appropriate	Strong	O 0 mSv	O 0 mSv [ped]	8	8	0	0	1	0	2	1	5	6	6
		References		Study	Quality										
		91 (32453278)			2										
		92 (32531300)			4										
		93 (32167203)		1	2		_								
MRA abdomen without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	1	0	0	2	12	5	0
		References		Study	Quality										
		86 (20687249)			4										
MRA abdomen without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	0	2	0	13	4	1
		References		Study	Quality										

		86 (20687249)			4										
MRA neck without IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	1	0	1	1	12	5	0
		References		Study	y Quality		•	•		•				•	
		94 (21730308)			2										
MRA neck without and with IV contrast	Usually appropriate	Limited	O 0 mSv	O 0 mSv [ped]	7	7	0	0	0	1	0	1	11	6	1
		References		Study	y Quality										
		94 (21730308)			2										
MRI heart function and morphology without and with IV contrast	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	6	6	0	0	0	1	7	8	3	1	0
		References		Study	y Quality		•	•		•				•	
		95 (2913733)			4										
		96 (31342116)		3											
		97 (20861133)		3											
CTA coronary arteries with IV contrast	May be appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	5	5	0	0	0	3	8	5	4	0	0
MRI heart function and morphology without IV contrast	May be appropriate	Limited	O 0 mSv	O 0 mSv [ped]	5	5	0	0	0	3	8	6	2	1	0
		References		Study	y Quality										
		95 (2913733)			4										
		96 (31342116)			3										
		97 (20861133)			3										
US echocardiography transesophageal	May be appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	4	4	4	1	3	7	4	1	0	0	1
CT heart function and morphology with IV contrast	Usually not appropriate	Limited	��� 10-30 mSv	≎≎≎≎ 3- 10 mSv [ped]	3	3	1	4	6	4	4	1	0	0	0
		References		Study Quality											
		90 (19375878)		2											

Radiography chest	Usually not appropriate		Limited	≎ <0.1 mS	Sv n	<0.03 nSv ped]	3	3	5	3	6	4	2	0	0	0	0
			References			Study Quality											
			98 (20591885)		4												
Arteriography pulmonary	Usually not appropriate		Expert Consensus	≎≎≎≎ 10- mSv	30		2	2	8	5	3	3	0	1	0	0	1
Arteriography coronary with ventriculography	Usually not appropriate		Limited	��� 1-10 mSv	⁾ 10	❤❤ 3- mSv ped]	2	2	8	3	5	2	1	1	0	0	0
			References		Study Quality												
			89 (27733430)			2											
MRI heart function with stress without and with IV contrast	Usually not appropriate		Expert Consensus	O 0 mSv		0 mSv ped]	2	2	11	5	5	0	0	0	0	0	0
MRI heart function with stress without IV contrast	Usually not appropriate		Expert Consensus	O 0 mSv		0 mSv ped]	1	1	13	3	5	0	0	0	0	0	0
FDG-PET/CT heart	Usually not appropriate		Expert Consensus	���� 10- mSv	³⁰ 10	®® 3- mSv ped]	1	1	17	0	2	1	0	0	0	0	1
SPECT or SPECT/CT MPI rest and stress	Usually approp		Expert		30 10 n	0-30 nSv ped]	1	1	17	1	3	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.