American College of Radiology ACR Appropriateness Criteria®

Workup of Pleural Effusion or Pleural Disease

Variant 1: Recent pneumonia with suspected parapneumonic effusion or empyema. Initial imaging.

D. I	Appropri	iateness	COE	ALL DD	т П	D I DDI	D. (*	3.6.11			I	inal	Tabı	ılatio	ns		
Procedure	Categ	gory	SOE	Adults RR	L	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CT chest with IV contrast	Usua approp		Strong	≎≎≎ 1-10 mSv)	���� 3- 10 mSv [ped]	8	8	0	0	0	0	1	0	2	5	5
			References			Study	Quality										
			18 (21622586)				2										
			20 (-3195839)				4										
			19 (21159803)				1										
			17 (26076488)				2										
			16 (28370693)			2											
			15 (33820639)			2											
			14 (35049844)				4										
			13 (28274565)				4										
Radiography chest	Usua approp		Strong	≎ <0.1 mS	Sv		8	8	0	0	0	0	0	1	3	3	6
			References			Study	Quality										
			28 (21651642)				2										
			29 (27613540)				3										
			27 (27793503)				2										
		26 (17278083)					4										
			25 (9356004)			4											

US chest	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	2	0	2	2	1	4	2	0
		References		Study	Quality				•		•				
		36 (19933660)			3										
		35 (11762545)			2										
		34 (30675767)			2										
		33 (27709281)			3										
		32 (19616366)			2										
		31 (11127008)			2										
		30 (33033148)			4										
		29 (27613540)			3										
		13 (28274565)			4			1	,						
CT chest without IV contrast	May be appropriate	Strong	��� 1-10 mSv	���� 3- 10 mSv [ped]	4	4	1	0	3	5	3	0	1	0	0
		References		Study	Quality										
		18 (21622586)			2										
		14 (35049844)			4										
		16 (28370693)			2										
		17 (26076488)			2										
MRI chest without and with IV contrast	Usually not appropriate	Strong	O 0 mSv	O 0 mSv [ped]	3	3	5	1	1	2	3	1	0	0	0
		References		Study	Quality										
		24 (21364472)			4										
		23 (32191736)			2										
		22 (33963675)			2										
		21 (28931146)			4	_									
CTA chest with IV contrast	Usually not appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	2	2	6	5	2	0	0	0	0	0	0
MRI chest without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	6	1	2	2	1	0	1	0	0

CT chest without and with IV contrast	Usually not appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	1	1	11	0	2	0	0	0	0	0	0	
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Variant 2: Recent minor blunt trauma with suspected pleural effusion. Initial imaging.

ъ	Appropriateness	COF	ALL DDI	D I DDI	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
CT chest with IV contrast	Usually appropriate	Moderate	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	8	8	0	1	0	0	1	0	4	4	3
		References		Study	Quality										
		40 (30287121)			2										
		39 (28130347)			4										
		38 (26169926)			3										
Radiography chest	Usually appropriate	Strong	� <0.1 mSv		8	8	0	0	0	0	0	0	5	2	6
		References		Study	Quality										
		46 (15082295)			2										
		47 (24626118)			2										
		49 (29433802)		C	Good										
		40 (30287121)			2										
		39 (28130347)			4										
		50 (31179075)			1		_	1					,		
CTA chest with IV contrast	May be appropriate (Disagreement)	Expert Opinion	��� 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	5	5	1	2	0	1	1	0	1	7	0
		References		Study	Quality										
		44 (27299139)		C	Good										
		43 (26440607)			1										
		42 (21045745)			2										

US chest	May be appropriat (Disagreeme	te Exp	ert Opinion	O 0 mSv	,	O 0 mSv [ped]	5	5	0	1	2	0	4	2	2	2	0
		References				Study	Quality										
		30	0 (33033148)				4										
		49	9 (29433802)			C	ood		_								
CT chest without IV contrast	May be appropriat		Limited	��� 1-10 mSv	0	���� 3- 10 mSv [ped]	4	4	0	2	1	6	3	0	1	0	0
		·	References			Study	Quality										
		4	1 (-3195840)				2										
CT chest without and with IV contrast	Usually no appropriat		Expert onsensus	��� 1-10 mSv	0	���� 3- 10 mSv [ped]	1	1	10	1	2	0	0	0	0	0	0
MRI chest without IV contrast	Usually no appropriat		Expert onsensus	O 0 mSv	,	O 0 mSv [ped]	1	1	8	0	1	2	1	1	0	0	0
MRI chest without and with IV contrast	Usually no appropriat		Expert onsensus	O 0 mSv	,	O 0 mSv [ped]	1	1	7	1	1	2	0	2	0	0	0
Image-guided aspiration chest	Usually no appropriat		Expert onsensus	Varies		Varies	1	1	10	2	1	0	0	0	0	0	0

Variant 3: Dyspnea, cough, or chest pain with suspected pleural effusion, noninfectious. Initial imaging.

D 1	Appropriateness	COF	A L L DDI	D I DDI	D 41	24.11			F	inal '	Гаbu	latio	ns		
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
Radiography chest	Usually appropriate	Limited	⊕ <0.1 mSv		9	9	0	0	0	0	1	0	2	3	7

References	Study Quality
7 (20696692)	4
59 (34447992)	4
60 (25572643)	2

CT chest with IV contrast	Usually appropriate	Strong	��� 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	7	7	0	0	0	0	2	2	3	6	0
		References		Study	y Quality										
		19 (21159803)			1										
		50 (31179075)			1										
		53 (28025056)			2										
		52 (30406935)			4										
US chest	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	2	2	1	5	1	1	1	0
		References		Study	y Quality										
		32 (19616366)			2										
		63 (33721865)			2										
		64 (-3195841)			4										
CT chest without IV contrast	May be appropriate	Limited	��� 1-10 mSv	���� 3- 10 mSv [ped]	4	4	2	1	1	3	5	1	0	0	0
		References			y Quality										
		54 (25881595)			2										
		55 (26150676)	İ		4										
CTA chest with IV contrast	Usually not appropriate	Strong	��� 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	3	3	3	3	1	1	5	0	0	0	0
		References		Study	y Quality			•	•						
		56 (17298456)			2										
		58 (30044259)			2										
		57 (27423676)			3										
CT chest without and with IV contrast	Usually not appropriate	Expert Consensus	��� 1-10 mSv	���� 3- 10 mSv [ped]	1	1	10	1	1	1	0	0	0	0	0
MRI chest without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	8	0	1	4	0	0	0	0	0

MRI chest without and with IV contrast	Usually approp		Strong	O 0 mSv	O 0 mSv [ped]	1	1	7	1	1	3	1	0	0	0	0
			References		Study	Quality										
		58 (30044259)				2										
			57 (27423676)			3										
		60 (25572643)				2										
			59 (34447992)			4										

Variant 4: Pleural effusion incidentally detected on incomplete thoracic imaging study. Next imaging study.

D 1	Appropriateness	COE	E Adults RRL Peds RRL	D 4	3.6.11			F	inal '	Tabu	latio	ns			
Procedure	Category	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CT chest with IV contrast	May be appropriate (Disagreement)	Expert Opinion	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	5	5	1	1	2	1	5	1	0	2	0
US chest	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	3	3	1	0	3	2	1	0	0
Radiography chest	May be appropriate (Disagreement)	Expert Opinion	 		5	5	2	1	1	2	5	1	0	0	1
CT chest without IV contrast	Usually not appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	3	3	4	1	2	2	3	0	1	0	0
MRI chest without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	2	2	6	2	0	3	0	1	0	1	0
CTA chest with IV contrast	Usually not appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	1	1	9	1	3	0	0	0	0	0	0
CT chest without and with IV contrast	Usually not appropriate	Expert Consensus	≎≎≎ 1-10 mSv	���� 3- 10 mSv [ped]	1	1	10	2	1	0	0	0	0	0	0
MRI chest without IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	8	0	0	3	1	0	1	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.