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.

	Appropria	ateness	COL		-	D 1 DD1					I	inal	Tabu	ilatio	ns		
Procedure	Catego	ory	SOE	Adults RR	L	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
CT chest with IV contrast	Usual appropr	ly iate	Strong	ତତତ 1-1(mSv	0	≎≎≎≎ 3- 10 mSv [ped]	8	8	0	0	0	0	1	0	2	5	5
			References			Study	v Quality										
			17 (26076488)				2										
			13 (28274565)			4											
			16 (28370693)				2										
			18 (21622586)				2										
			18 (21622586) 14 (35049844)				4										
			15 (33820639)				2										
			19 (21159803)				1										
			20 (-3195839)				4		_								
Radiography chest	Usual appropr	ly iate	Strong	֎ < 0.1 mS	Sv	Image: wide of the second	8	8	0	0	0	0	0	1	3	3	6
			References			Study	v Quality										
			26 (17278083)				4										
			29 (27613540)				3										
			27 (27793503)				2										
			28 (21651642)				2										
			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										
		29 (27613540)			3										
		33 (27709281)			3										
		36 (19933660)			3										
		13 (28274565)			4										
		30 (33033148)			4										
		31 (11127008)			2										
		32 (19616366)			2										
		34 (30675767)			2										
		35 (11762545)			2		-			1					
CT chest without IV contrast	May be appropriate	Strong	ତେତତ 1-10 mSv	֎֎֎֎ 3- 10 mSv [ped]	4	4	1	0	3	5	3	0	1	0	0
		References		Study	/ Quality										
		17 (26076488)			2										
		16 (28370693)			2										
		18 (21622586)			2										
		14 (35049844)			4		-								
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										
		22 (33963675)			2										
		23 (32191736)			2										
		21 (28931146)			4										
		24 (21364472)			4										-
CTA chest with IV contrast	Usually not appropriate	Expert Consensus	ଢେଢଢ 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	ଡଡଡ 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.

	Appropri	ateness			-	D 1 DD1					I	inal	Tabu	latio	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	lly oriate	Moderate	ତତତ 1-1(mSv	0	**** 3- 10 mSv [ped]	8	8	0	1	0	0	1	0	4	4	3
			References			Study	Quality										
			38 (26169926)				3										
			39 (28130347)				4										
	-		40 (30287121)			_	2					_	_				
Radiography chest	Usua approp	lly oriate	Strong	ଝ < 0.1 mସ	Sv		8	8	0	0	0	0	0	0	5	2	6
			References			Study	Quality										
			47 (24626118)			-	2										
			39 (28130347)				4										
			40 (30287121)				2										
			46 (15082295)				2										
			49 (29433802)			C	Good										
			50 (31179075)				1										
CTA chest with IV contrast	May approp (Disagre	be oriate ement)	Expert Opinion	ଝେଝଡ 1-1(mSv	0	ତତତତ 3- 10 mSv [ped]	5	5	1	2	0	1	1	0	1	7	0
			References			Study	/ Quality										
			43 (26440607)				1										
			42 (21045745)				2										
			<u>42 (21045745)</u> <u>44 (27299139)</u>			0	Good										

US chest	May be appropriate (Disagreement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	1	2	0	4	2	2	2	0
		References		Study	V Quality										
		30 (33033148)			4										
		49 (29433802)		(Good										
CT chest without IV contrast	May be appropriate	Limited	ତତତ 1-10 mSv	≎≎≎≎≎ 3- 10 mSv [ped]	4	4	0	2	1	6	3	0	1	0	0
		References		Study	Quality					-					-
		41 (-3195840)			2										
CT chest without and with IV contrast	Usually not appropriate	Expert Consensus	ଷଷଷ 1-10 mSv	≎≎≎≎≎ 3- 10 mSv [ped]	1	1	10	1	2	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	1	2	1	1	0	0	0
MRI chest without and with IV contrast	Usually not appropriate	Expert Consensus	O 0 mSv	O 0 mSv [ped]	1	1	7	1	1	2	0	2	0	0	0
Image-guided aspiration chest	Usually not appropriate	Expert Consensus	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.

	Appropr	iateness								I	'inal '	Tabu	Ilatio	ns		
Procedure	Categ	gory	SOE	Adults RRL	Peds RRL	Rating	Median	1	2	3	4	5	6	7	8	9
Radiography chest	Usua approp	ally priate	Limited	≎ <0.1 mSv	v <0.03 v mSv [ped]	9	9	0	0	0	0	1	0	2	3	7
			References		Study	y Quality										
			7 (20696692)		4											
			60 (25572643)			2										
			59 (34447992)		4											

CT chest with IV contrast	Usua	lly	Strong	ଙେଙ 1-10 mSv	֎֎֎֎ 3- 10 mSv	7	7	0	0	0	0	2	2	3	6	0
	approp				[ped]											
			References		Study	Quality										
			52 (30406935)			4										
			53 (28025056)			2										
			19 (21159803)			1										
			50 (31179075)		-	1			<u> </u>		1		1			<u> </u>
US chest	May approp (Disagre	be oriate ement)	Expert Opinion	O 0 mSv	O 0 mSv [ped]	5	5	0	2	2	1	5	1	1	1	0
			References		Study	Quality										
			32 (19616366)			2										
			63 (33721865)		2											
			64 (-3195841)			4										
CT chest without IV contrast	May approp	be priate	Limited	େଡେଡ 1-10 mSv	**** 3- 10 mSv [ped]	4	4	2	1	1	3	5	1	0	0	0
			References		Study	Ouality										
			54 (25881595)			2										
			55 (26150676)			4										
CTA chest with IV contrast	Usually approp	y not oriate	Strong	ତତତ 1-10 mSv	≎≎≎≎ 3- 10 mSv [ped]	3	3	3	3	1	1	5	0	0	0	0
			References		Study	Quality										
			57 (27423676)			3										
			58 (30044259)			2										
			56 (17298456)			2			_							
CT chest without and with IV contrast	Usuall ₂ approp	y not oriate	Expert Consensus	ଡେଡ େ 1-10 mSv	ଡଡଡଡ 3- 10 mSv [ped]	1	1	10	1	1	1	0	0	0	0	0
MRI chest without IV contrast	Usuall	y not oriate	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	Usuall approp	y not priate	Strong	O 0 mSv	1	O 0 mSv [ped]	1	1	7	1	1	3	1	0	0	0	0
			References			Study	Quality										
		60 (25572643)					2										
			57 (27423676)				3										
			58 (30044259)				2										
			59 (34447992)				4										

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

	Appropriateness	COL							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	ଝଝଝ 1-10 mSv	ହନ୍ତହ 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	愛 < 0.1 mSv		5	5	2	1	1	2	5	1	0	0	1
CT chest without IV contrast	Usually not appropriate	Expert Consensus	ଡେଡେ 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	ଝେଝେ 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	ଝେଝେ 1-10 mSv	ଝଝଝଝ 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.