

CT abdomen and pelvis without and with IV contrast	Usually not appropriate	Strong	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	1	1	9	1	2	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

CTA abdomen and pelvis with IV contrast	Usually not appropriate	Strong	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	1	1	11	0	1	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

CT pelvis with IV contrast	Usually not appropriate	Strong	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	1	1	9	1	1	0	0	1	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4

US scrotum	Usually not appropriate	Strong	○ 0 mSv	○ 0 mSv [ped]	1	1	6	2	2	1	0	0	0	0	0
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References	Study Quality
25 (17437771)	4
1 (11912400)	2
22 (27520544)	2
10 (37051970)	4
20 (35483126)	4
19 (35633853)	3
2 (27054210)	4

TRUS prostate	Usually not appropriate	Strong	○ 0 mSv	○ 0 mSv [ped]	1	1	10	0	1	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

Fluciclovine PET/CT skull base to mid-thigh	Usually not appropriate	Strong	⊗⊗⊗⊗ 10-30 mSv		1	1	11	1	0	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

CTA pelvis with IV contrast	Usually not appropriate	Strong	☼☼☼☼ 10-30 mSv		1	1	11	0	1	0	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

CTA abdomen and pelvis without and with IV contrast	Usually not appropriate	Strong	☼☼☼☼ 10-30 mSv	☼☼☼☼☼☼ 10-30 mSv [ped]	1	1	11	0	1	0	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

Fluciclovine PET/MRI skull base to mid-thigh	Usually not appropriate	Strong	☼☼☼ 1-10 mSv		1	1	11	1	0	0	0	0	0	0	0	0
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References	Study Quality
21 (16802198)	4
24 (32704074)	3
22 (27520544)	2
23 (29048208)	2
3 (32577619)	4
8 (34183196)	4
2 (27054210)	4

MRU without and with IV contrast	May be appropriate	Limited	0 0 mSv	0 0 mSv [ped]	5	5	0	0	1	0	8	2	0	0	0
		References	Study Quality												
		31 (38040458)	4												
CT abdomen and pelvis with IV contrast	May be appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	4	4	0	1	2	6	2	0	1	0	0
		References	Study Quality												
		29 (30924591)	4												
		30 (31897685)	4												
CT abdomen and pelvis without and with IV contrast	May be appropriate	Limited	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	4	4	3	1	1	4	2	0	1	0	0
		References	Study Quality												
		29 (30924591)	4												
		30 (31897685)	4												
CT pelvis with IV contrast	May be appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	4	4	0	0	2	5	3	1	1	0	0
		References	Study Quality												
		30 (31897685)	4												
		29 (30924591)	4												
CT pelvis without IV contrast	May be appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	4	4	2	1	2	5	2	0	0	0	0
		References	Study Quality												
		30 (31897685)	4												
		29 (30924591)	4												
CT pelvis without and with IV contrast	May be appropriate	Limited	☼☼☼☼ 10-30 mSv	☼☼☼☼ 3-10 mSv [ped]	4	4	0	0	0	8	3	0	0	0	0
		References	Study Quality												
		30 (31897685)	4												

			29 (30924591)		4													
MRU without IV contrast	May be appropriate	Limited	○ 0 mSv	○ 0 mSv [ped]	4	4	0	0	1	5	3	2	0	0	0			
			References		Study Quality													
			31 (38040458)		4													
CT abdomen and pelvis without IV contrast	Usually not appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	3	3	2	1	4	5	0	0	0	0	0			
			References		Study Quality													
			30 (31897685)		4													
			29 (30924591)		4													
CTA abdomen and pelvis with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	3	3	2	2	7	0	0	0	0	0	0			
MRI abdomen and pelvis without IV contrast	Usually not appropriate	Limited	○ 0 mSv	○ 0 mSv [ped]	3	3	3	2	3	3	0	0	0	0	0			
			References		Study Quality													
			5 (30903016)		4													
			13 (33955038)		4													
MRI abdomen and pelvis without and with IV contrast	Usually not appropriate	Limited	○ 0 mSv	○ 0 mSv [ped]	3	3	3	1	4	3	0	0	0	0	0			
			References		Study Quality													
			17 (33694277)		3													
			13 (33955038)		4													
			5 (30903016)		4													
			3 (32577619)		4													
CTA pelvis with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv		3	3	3	1	5	2	0	0	0	0	0			
CTA abdomen and pelvis without and with IV contrast	Usually not appropriate	Expert Consensus	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	3	3	3	0	5	2	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.