

Radiography skeletal survey	Usually not appropriate	Limited	☹☹☹ 1-10 mSv	☹☹☹ 0.3-3 mSv [ped]	1	n/a	0	0	0	0	0	0	0	0	0
		References		Study Quality											
		11 (3338047)		4											

Variant 2: Newly diagnosed. Stage I breast cancer. Asymptomatic. Rule out thoracic metastases. Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations								
							1	2	3	4	5	6	7	8	9
CT chest with IV contrast	Usually not appropriate	Limited	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0
		References		Study Quality											
		27 (21298335)		3											
CT chest without IV contrast	Usually not appropriate	Limited	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0
		References		Study Quality											
		27 (21298335)		3											
CT chest without and with IV contrast	Usually not appropriate	Limited	☹☹☹ 1-10 mSv	☹☹☹☹ 3-10 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0
		References		Study Quality											
		27 (21298335)		3											
FDG-PET/CT whole body	Usually not appropriate	Limited	☹☹☹☹ 10-30 mSv		2	n/a	0	0	0	0	0	0	0	0	0
		References		Study Quality											
		6 (27422453)		4											
		12 (15668281)		3											
		16 (29025377)		4											

Radiography chest	Usually not appropriate	Limited	☼ <0.1 mSv	☼ <0.03 mSv [ped]	1	n/a	0	0	0	0	0	0	0	0	0	
		References		Study Quality												
		11 (3338047)		4												
		12 (15668281)		3												
		23 (8164036)		4												
		24 (12000220)		3												
		25 (2714345)		4												
		26 (8182811)		1												

Variant 3: Newly diagnosed. Stage I breast cancer. Asymptomatic. Rule out abdominal metastases. Initial imaging.

Procedure	Appropriateness Category	SOE	Adults RRL	Peds RRL	Rating	Median	Final Tabulations									
							1	2	3	4	5	6	7	8	9	
CT abdomen with IV contrast	Usually not appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0	
		References		Study Quality												
		27 (21298335)		3												
		29 (3490743)		4												
CT abdomen without IV contrast	Usually not appropriate	Limited	☼☼☼ 1-10 mSv	☼☼☼☼ 3-10 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0	
		References		Study Quality												
		27 (21298335)		3												
		29 (3490743)		4												
CT abdomen without and with IV contrast	Usually not appropriate	Limited	☼☼☼☼ 10-30 mSv	☼☼☼☼☼ 10-30 mSv [ped]	2	n/a	0	0	0	0	0	0	0	0	0	
		References		Study Quality												
		27 (21298335)		3												

		References			Study Quality										
		68 (18477782)			1										
MRI breast without IV contrast bilateral	Usually not appropriate	Limited	0 0 mSv	0 0 mSv [ped]	1	n/a	0	0	0	0	0	0	0	0	0
		References			Study Quality										
		61 (23889950)			3										
		62 (22476755)			4										
		63 (17392385)			4										
		64 (20651211)			3										
		65 (28655029)			4										

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.