

CRITICAL RESULTS

- New Pulmonary Embolus
 - Ruptured Aortic Aneurysm
 - New Aortic Dissection
 - New Intracranial Hemorrhage
 - Potentially Life-Threatening Hemorrhage (any location)
 - Acute appendicitis (*Unexpected outpatient only*)
 - New Unexplained Pneumoperitoneum
 - New Unexplained/Unexpected Pneumothorax (*MD decision to call*)
 - Ectopic Pregnancy
 - Testicular Torsion
 - Ovarian Torsion
 - Potentially Life-Threatening Tube or Line Malposition/Misplacement (*MD decision to call*)
 - Pneumotosis Intestinalis
 - Pneumopericardium
 - Cervical Spine Fracture
 - CT Code Stroke (positive and/or negative)
 - Tuberculosis (**Not considered a Critical Result**)
- Call report to ordering providers office by radiologist or designee (does not need to be physician to physician discussion)

Dictation Criteria:

1. Call report immediately or within 30 minutes of interpretation
2. Reports must be called to one of the following caregivers: MD, DO, PA, NP, RN
3. Radiologist to include the Critical Results macro
4. Critical Results must be placed in the ***Impression Section*** of the report to meet guidelines.

Critical Results Macro

Critical results were called by myself at the time of interpretation on [<CurrentDate>] at [<CurrentTime>] to [<Ordering Provider>], who verbally acknowledged these results. |

Please Note the Following:

- RAV with MD, DO, NP, or PA is assumed through dialogue.
- RAV with RN – Radiologist should verbally acknowledge and have RN read-back understanding of the critical results before ending the call.
- Must enter time of call on report, to meet compliance.