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**
- **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.**

Revised 10/26/2026