Radiology Questionnaire

CT of the Abdomen

Providers can expedite a request by submitting a prior authorization request through e-referral and completing the appropriate questionnaire. If all questions are answered, e-referral will determine the status of the case based on the provider's response. If the case pends and BCN cannot authorize it, BCN will contact the provider for additional clinical information.

Code*	Description	
74150	Computed tomography, abdomen; without contrast material	
74160	Computed tomography, abdomen; with contrast material	
74170	Computed tomography, abdomen; without contrast material followed by with contrast material and further sections	
1.	Does the patient have prior abnormal imaging study, requiring follow-up CT?	☐ Yes ☐ No
2.	Does the patient have palpable abdominal pain (pain when the abdomen is touched)?	☐ Yes ☐ No
3.	Does the patient have unexplained abdominal mass?	☐ Yes ☐ No
4.	Does the patient have enlarged abdominal organs?	☐ Yes ☐ No
5.	Does the patient have unexplained weight loss (greater than 10% body weight)?	☐ Yes ☐ No
6.	Does the patient have unexplained jaundice (yellow skin), elevated liver enzymes?	☐ Yes ☐ No
7.	Does the patient have symptoms of abdominal bleeding (blood in stool, black or tarry stool, tiredness, pale skin, shortness of breath)?	☐ Yes ☐ No
8.	Does the patient have symptoms of abdominal abscess (fever of unknown origin, abdominal pain)?	☐ Yes ☐ No
9.	Does the patient have clinical symptoms of appendicitis?	☐ Yes ☐ No
10.	Does the patient have clinical symptoms of diverticulitis (a digestive disease accompanied by nausea, vomiting, cramping, pain, constipation, diarrhea, etc.)?	☐ Yes ☐ No
11.	Does the patient have clinical symptoms of bowel obstruction (abdominal pain, nausea, vomiting, diarrhea, constipation, etc.)?	☐ Yes ☐ No
12.	Does the patient have suspected complications of inflammatory bowel disease?	☐ Yes ☐ No
13.	Does the patient have suspected pancreatitis or clinical complications of pancreatitis?	☐ Yes ☐ No
14.	Does the patient have unexplained hematuria (blood in the urine)?	☐ Yes ☐ No
15.	Does the patient have suspected kidney stones?	☐ Yes ☐ No
16.	Does the patient have symptoms of abdominal aortic aneurysm (pulsing sensation in the abdomen, rigid abdomen, nausea, vomiting, rapid heart rate when rising to stand, abdominal mass)?	☐ Yes ☐ No

17.	Does the patient have suspected abdominal aortic dissection (tear in the wall of the aorta)?	☐ Yes ☐ No
18.	Does the patient have suspected abdominal hernia (an abdominal protrusion due to weak abdominal muscles)?	☐ Yes ☐ No
19.	Does the patient have significant abdominal trauma or injury?	☐ Yes ☐ No
20.	Does the patient have history of malignancy (cancer), for follow-up surveillance (no prior CT for six months)?	☐ Yes ☐ No
21.	Does the patient have recent abdominal MRI study (within three months)? If you still want a CT, please call 800-392-2512.	☐ Yes ☐ No
22.	Does the patient have current pregnancy (CT generally contraindicated)? If you still want a CT, please call 800-392-2512.	☐ Yes ☐ No
23.	References:	
24.	Moss A, Gamsu G, Genant HK. Computed tomography of the body with magnetic resonance imaging: abdomen and pelvis. 2nd ed. 1992.	
25.	Lee JK, Sagel SS, Stanley RJ. Computed body tomography with MRI correlation. 3rd ed. 1998.	
26.	ACR Practice Guidelines and Technical Standards 2007.	
27.	ACR Appropriateness Criteria, Sept. 2007.	