

MRI HIP APPROPRIATENESS CHECKLIST

This checklist is required for all outpatient MRI Hip referrals

Please include this form with MRI requisition and fax to 705-523-7026

Referring Physician Name: Date:	Patient Name: Date of Birth (YYYY/MM/DD): Gender: MRN/HCN:
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CHECK ANY/ALL THAT APPLY:

The purpose of an MRI for hip is primarily for surgical planning. In most cases, using MRI does not add useful information for patients with moderate-to-severe osteoarthritis (OA), especially for those with chronic degenerative conditions. An x-ray is recommended to identify OA. Complete the checklist for patients 40 years of age and older referred for an MRI hip. One or more of the following must apply in order to be eligible for an MRI hip:

A. Clinical Information <input type="checkbox"/> MRI was recommended on a previous imaging report (attach report) <input type="checkbox"/> Previous knee or hip surgery (provide details/report in Section E) <input type="checkbox"/> Suspected infection <input type="checkbox"/> Suspected tumour <input type="checkbox"/> Osteonecrosis/Avascular Necrosis <input type="checkbox"/> Patient has had an x-ray within the past 6 months and referring clinician has confirmed mild or no evidence of osteoarthritis in the hip <input type="checkbox"/> Suspected labral tear <input type="checkbox"/> Other: _____	B. <input type="checkbox"/> Previous Hip Imaging Modality: _____ When: _____ Where: _____
C. Consider MRI if <i>all</i> of the following are present: <input type="checkbox"/> Absent or mild osteoarthritis <input type="checkbox"/> Persistent unexplained pain > than 3 months <input type="checkbox"/> Failed conservative therapy for 6-12 weeks (physiotherapy and anti-inflammatories) <input type="checkbox"/> Patient is surgical candidate	
D. MRI is <i>NOT</i> recommended for: Osteoarthritis <i>MRI is unlikely to alter patient management (Please see section F)</i>	
E. Additional Clinical Information Please provide any additional information relevant to this request. <i>Include surgical reports and previous relevant imaging if not performed at HSN</i>	
F. Alternative For a diagnosis of OA, consider conservative treatment including active rehabilitation/physiotherapy. If treatment is not effective, refer to the Hip/Knee Rapid Access Clinic (NEJAC) for a complete assessment and self-management plan, which includes a pathway to an Orthopedic Surgeon if appropriate. <i>For NEJAC referrals ONLY fax to: 1-855-567-7969</i>	

Referring Physician Signature

Date