

## APPENDIX 5: Orders Unchanged after prompt

Case	rule name	Procedure	Indication
1	C06/C07/C08 Lumbar Spine Pain	X-ray Sacroiliac Joints	Degenerative Disease
2	L27 Pediatric Wheeze	X-ray Chest	Pneumonia
3	J22/J23/J24 Ankle and Foot Injury	X-ray Foot	Is there bony tenderness at the posterior edge or tip of either malleolus? : No
4	C06/C07/C08 Lumbar Spine Pain	X-ray Lumbar Spine	Does the patient suffer from any of the following serious features? - Sx Neurological deficit - Sx Sciatica - Sx Bladder/Bowel Dysfunction : No
5	G32/G33 Pancreatitis	CT Abdomen	Please indicate whether there was relevant prior imaging. : None
6	H06/H07/H09 Renal Calculi and Obstruction	US Pelvis	Please indicate whether there was relevant prior imaging. : None
7	E08/H02/H03/H16/H17/H18 Hypertension	US Abdomen	Ruptured Aneurysm
8	D19/D20/D21/J21 Knee Pain	X-ray Knee	Please indicate whether there was relevant prior imaging. : None
9	E08/H02/H03/H16/H17/H18 Hypertension	X-ray Chest	Congestive Heart Failure
10	L27 Pediatric Wheeze	X-ray Chest	Pneumonia
11	H01 Hematuria	MR Kidneys	Hepatic/Renal Cyst
12	A06/A07 Headache	CT Head	Do you specifically suspect either of the following? Select one. : Neither
13	H06/H07/H09 Renal Calculi and Obstruction	US Pelvis	Please indicate whether there was relevant prior imaging. : None
14	L23 Pediatric Acute Chest Infection	X-ray Chest	Pneumonia
15	L43 Pediatric Proven Urinary Tract Infection	NM Renal	Prior to imaging, a culture-positive clean specimen *(see definition) should be obtained. Definition: Clean Specimen: mid-stream clean capture or catheterized specimen. Most recent urinalysis results: : Culture positive (Proven Urinary Tract Infection)
16	H06/H07/H09 Renal Calculi and Obstruction	US Renal	Do you have a clinical suspicion of obstructive uropathy? : No
17	H14 Scrotal Mass or Pain	US Scrotal	Epididymal Cysts/Tumor
18	D24 Heel Pain	X-ray Foot	Many cases of heel pain will resolve over time via conservative methods (biomechanical and anti-inflammatory methods). Has the patient been through a course of conservative care? : No

19	F05/F08/F09 Upper Respiratory Infection	X-ray Chest	Please select from the following the condition that best applies. : Suspect upper respiratory tract infection
20	D19/D20/D21/J21 Knee Pain	MR Knee	Other: Tear
21	D24 Heel Pain	X-ray Foot	Many cases of heel pain will resolve over time via conservative methods (biomechanical and anti-inflammatory methods). Has the patient been through a course of conservative care? : Yes
22	D19/D20/D21/J21 Knee Pain	MR Knee	Please indicate whether there was relevant prior imaging. : Normal
23	D23 Hallux Valgus	X-ray Toes	Is the current imaging request for the presurgical assessment for bunion removal? : No
24	D19/D20/D21/J21 Knee Pain	X-ray Knee	Please indicate whether there was relevant prior imaging. : None
25	G32/G33 Pancreatitis	US Abdomen	Please indicate whether there was relevant prior imaging. : None
26	E08/H02/H03/H16/H17/H18 Hypertension	CT Kidneys	Hydronephrosis
27	L23 Pediatric Acute Chest Infection	X-ray Chest	Pneumonia
28	C01/L02 Congenital Disorders of the Spine	CT Lumbar Spine	Is the primary intent of imaging to delineate bone detail? : Yes
29	F10 Pleural Effusion	X-ray Chest	Pleural Effusion
30	C04/C05/D09 Spine Degenerative Disease	MR Thoracic Spine	Do any of the following conditions apply? - Clinical Presence of Neurological Signs - Suspicion of Metastases - Suspicion of Infection - Suspicion of Osteoporotic Collapse : No
31	E08/H02/H03/H16/H17/H18 Hypertension	US Abdomen	Inflammatory Bowel Disease
32	H06/H07/H09 Renal Calculi and Obstruction	US Renal	Please indicate whether there was relevant prior imaging. : None
33	E08/H02/H03/H16/H17/H18 Hypertension	X-ray Chest	Pulmonary Edema
34	E08/H02/H03/H16/H17/H18 Hypertension	US Renal	Hydronephrosis
35	C06/C07/C08 Lumbar Spine Pain	X-ray Lumbar Spine	Please categorize the patient using one of the following scenarios: : Persistent Symptoms after Conservative Therapy (4-6 weeks)
36	C06/C07/C08 Lumbar Spine Pain	CT Lumbar Spine	Please specify the type of back pain the patient is presenting with. (Select one) : Acute
37	E08/H02/H03/H16/H17/H18 Hypertension	US Abdomen	Gallstones

38	D19/D20/D21/J21 Knee Pain	X-ray Knee	Please select one of the following to provide information about relevant prior imaging. : None
39	H06/H07/H09 Renal Calculi and Obstruction	US Renal	Do you have a clinical suspicion of obstructive uropathy? : No
40	C04/C05/D09 Spine Degenerative Disease	CT Lumbar Spine	Degenerative Disease
41	D19/D20/D21/J21 Knee Pain	X-ray Knee	Has the patient experienced recent knee trauma? : No
42	D19/D20/D21/J21 Knee Pain	X-ray Knee	Has the patient experienced recent knee trauma? : No
43	D19/D20/D21/J21 Knee Pain	X-ray Knee	Has the patient experienced recent knee trauma? : No
44	D24 Heel Pain	X-ray Foot	Many cases of heel pain will resolve over time via conservative methods (biomechanical and anti-inflammatory methods). Has the patient been through a course of conservative care? : No
45	E04 Pulmonary Embolism	X-ray Chest	Please select one of the following to provide information about relevant prior imaging. : Normal
46	C06/C07/C08 Lumbar Spine Pain	X-ray Lumbar Spine	Please categorize the patient using one of the following scenarios: : Persistent Symptoms after Conservative Therapy (4-6 weeks)
47	C02 Myelopathy	CT Cervical Spine	Disc Herniation
48	C02 Myelopathy	MR Entire Spine	N/A
49	D19/D20/D21/J21 Knee Pain	MR Knee	Is the patient experiencing any locking or limited range of motion in the knee? : Yes
50	G30 Biliary Disease	CT Abdomen	Please select one of the following to provide information about relevant prior imaging. : Abnormal
51	A11/A12/L05 Ear Problems	CT Head	Other: brainstem
52	E04 Pulmonary Embolism	X-ray Chest	Please select one of the following to provide information about relevant prior imaging. : Abnormal
53	E04 Pulmonary Embolism	X-ray Chest	Please select one of the following to provide information about relevant prior imaging. : Abnormal
54	F04 Routine Pre-operative CXR	X-ray Chest	Is the patient undergoing planned cardiothoracic surgery in the near future? : No
55	#N/A =CAR rule no longer linkable to case	X-ray Lumbar Spine	Disc Herniation
56	#N/A	X-ray Knee	Meniscus Injury(Type : Tear)
57	#N/A	CT Sinuses	Sinusitis(Stage : Recurrent)
58	#N/A	CT Abdomen	Crohn's Disease
59	#N/A	MR Knee	Joint Impingement(Type : Soft Tissue)
60	#N/A	CT Chest	N/A
61	#N/A	US Abdomen	Gallstones

62	#N/A	CT Lumbar Spine	Pain(Duration : Acute)
63	#N/A	X-ray Lumbar Spine	Pain(Duration : Acute)
64	#N/A	X-ray Abdomen	Constipation
65	#N/A	CT Head	Other: neurology
66	#N/A	CT Sinuses	Polyyps
67	#N/A	X-ray Foot	Inability to Bear Weight
68	#N/A	X-ray Sacrum/Coccyx	Fracture
69	#N/A	X-ray Lumbar Spine	Neurological Deficit(Specify : Focal)
70	#N/A	X-ray Foot	Fracture
71	#N/A	X-ray Chest	Asthma
72	#N/A	CT Lumbar Spine	Claudication
73	#N/A	US Knee	Meniscus Injury(Type : Cyst)
74	#N/A	CT Abdomen	Other: possible colon tumor
75	#N/A	X-ray Chest	Metastatic Disease
76	#N/A	MR Shoulder	Joint Impingement(Type : Soft Tissue)
77	#N/A	X-ray Knee	Arthritis(Type : Osteoarthritis)
78	#N/A	X-ray Chest	Cardiac Arrhythmia(Type : Atrial Fibrillation)
79	#N/A	X-ray Shoulder	Joint Impingement(Type : Soft Tissue)
80	#N/A	MR Shoulder	Joint Impingement(Type : Soft Tissue)
81	#N/A	X-ray Foot	Fracture
82	#N/A	X-ray Chest	Pulmonary Edema
83	#N/A	X-ray Lumbar Spine	Spondylolisthesis
84	#N/A	X-ray Foot	Arthritis(Type : Osteoarthritis)
85	#N/A	X-ray Knee	Fracture
86	#N/A	X-ray Chest	Respiratory Tract Infection
87	#N/A	X-ray Knee	Arthritis(Type : Osteoarthritis)
88	#N/A	X-ray Shoulder	Other: Tendinitis
89	#N/A	CT Head	Other: brain tumor
90	#N/A	US Renal	Acute Glomerulonephritis
91	#N/A	X-ray Knee	Arthritis(Type : Osteoarthritis)
92	#N/A	X-ray Chest	Pulmonary Edema