

Critical Results requiring physician notification
Department of Radiology

CNS	Chest	Abdomen/Pelvis	Bone
Cerebral hemorrhage/hematoma	Pneumothorax (any)	Ischemic bowel	Unstable spine fracture
Brain tumor with herniation	Aortic dissection or tear	Acute cholecystitis	Unexpected fracture anywhere in the skeleton
Acute stroke	Bronchial tear	Appendicitis	Metastatic bone lesion
Brain death	Foreign body	Portal venous air	Multiple fractures of different age
Depressed skull fracture	Malpositioned tubes/drains	Volvulus	Dislocation
Unstable cervical spine fracture	Undiagnosed lung cancer	Diaphragmatic rupture	Vascular
Spinal cord compression Intracranial, intraparenchymal, subdural or epidural abscess or mass	New metastatic disease	Unexpected hydronephrosis	DVT
Acute obstructive hydrocephalus	Pulmonary embolism	Intraabdominal arterial bleed	Unexpected vascular occlusion
Dural venous sinus thrombosis	Mediastinal hematoma or trauma	Traumatic visceral injury	
Spinal epidural hematoma	Aortic aneurysm > 5cm Ruptured aneurysm or impending rupture	Retroperitoneal hemorrhage Free Air in abdomen (if no recent surgeries) Bowel obstruction	General
Spinal epidural abscess Any extracranial head and neck abscess (tonsillar, retropharyngeal, etc)	Mediastinal emphysema	Necrotizing infection	Post op foreign body
Acute sinusitis with osteomyelitis (ie: Pott's puffy tumor)	Tuberculosis, acute and active	Ectopic pregnancy	Significant Line/ or Tube misplacement (e.g. feeding tube in airway)
		Placental abruption	Neck
		Placental Previa near term	Epiglottitis
		Tubo-ovarian abscess	Airway obstruction
		Testicular or ovarian Torsion	Internal carotid artery or vertebral artery dissection
		Fetal demise	Critical carotid stenosis

Radiologists must treat these conditions as 'critical' if:

1. There is a high degree of certainty that the patient has one of these conditions, **and**
2. There is a reasonable chance that the ordering provider or treating physician was not aware of the condition or abnormal finding when the test was ordered.
3. Results identified as critical should be reported to responsible physician within 1 hour of identification as critical.