



*National Imaging Associates, Inc.	
Clinical guidelines URGENT/EMERGENT CRITERIA	Original Date: November 2009
Guideline Number: NIA_CG_100	Last Revised Date: March 2023
	Implementation Date: January 2024

GENERAL INFORMATION

- *It is an expectation that all patients receive care/services from a licensed clinician. All appropriate supporting documentation, including recent pertinent office visit notes, laboratory data, and results of any special testing must be provided. If applicable: All prior relevant imaging results and the reason that alternative imaging cannot be performed must be included in the documentation submitted.*
- *Where a specific clinical indication is not directly addressed in this guideline, medical necessity determination will be made based on widely accepted standard of care criteria. These criteria are supported by evidence-based or peer-reviewed sources such as medical literature, societal guidelines and state/national recommendations.*

INDICATIONS FOR EMERGENT STUDIES

The requested study is required to render immediate medical attention needed to prevent loss of life, limb, or risk of significant morbidity/permanent disability.^{1, 2}

Conditions that demonstrate immediate medical attention include, **but are not limited to:**

- Conditions that impair bodily functions that support life (airway, breathing & circulation)
- Conditions that are consistent with (or precipitate) any type of shock (e.g., hypovolemic or cardiogenic)
- Conditions that are consistent with a disorder that damages tissue in a substantial fashion (e.g., compartment syndrome or thrombus/embolus)

INDICATIONS FOR URGENT STUDIES

For the evaluation of a condition that requires prompt medical intervention to prevent additional consequences to the health/wellbeing of the member. This includes preventing the medical condition from precipitating an emergency situation.²

Conditions that demonstrate a requirement for prompt medical attention include, **but are not limited to:**

- Any condition that cannot be postponed for a period of time (24 hours) without risking progression to an emergent condition^{3,4}
 - Any condition that cannot be postponed for a period of time (24 hours) without risking loss of life, limb, or risk of permanent disability³
-

BACKGROUND

NIA reviews certain imaging studies for the existence of an urgent/emergent situation. This type of medical necessity review is only conducted for those requests where the date of service has passed (a retrospective review). The indications below can be applied to all imaging modalities managed by NIA.

The indications presented herein are not intended to limit the peer clinical reviewer from using his/her independent clinical judgment. A case-by-case evaluation of the member's clinical presentation should be conducted when determining the presence of an emergent or urgent clinical situation.

REFERENCES

1. Chaturvedi A, Vargas D, Ocazonez D. CT for evaluation of acute pericardial emergencies in the ED. *Emerg Radiol*. Jun 2018;25(3):321-328. doi:10.1007/s10140-018-1590-2
2. ESR guidelines for the communication of urgent and unexpected findings. *Insights Imaging*. Feb 2012;3(1):1-3. doi:10.1007/s13244-011-0135-y
3. American Academy of Urgent Care Medicine (AAUCM). What is Urgent Care Medicine? Accessed December 1, 2022. <https://aaucm.org/what-is-urgent-care-medicine/>
4. American College of Emergency Physicians. Five Things Physicians and Patients Should Question. Five More Things Physicians and Patients Should Question. Choosing Wisely Initiative ABIM Foundation. Updated June 18, 2018. Accessed December 1, 2022. <https://www.choosingwisely.org/wp-content/uploads/2015/02/ACEP-Choosing-Wisely-List.pdf>

POLICY HISTORY

Date	Summary
March 2023	General Information moved to beginning of guideline with added statement on clinical indications not addressed in this guideline
March 2022	No significant changes

Reviewed / Approved by NIA Clinical Guideline Committee

Disclaimer: *National Imaging Associates, Inc. (NIA) authorization policies do not constitute medical advice and are not intended to govern or otherwise influence the practice of medicine. These policies are not meant to supplant your normal procedures, evaluation, diagnosis, treatment and/or care plans for your patients. Your professional judgement must be exercised and followed in all respects with regard to the treatment and care of your patients. These policies apply to all Evolent Health LLC subsidiaries including, but not limited to, National Imaging Associates (“NIA”). The policies constitute only the reimbursement and coverage guidelines of NIA. Coverage for services varies for individual members in accordance with the terms and conditions of applicable Certificates of Coverage, Summary Plan Descriptions, or contracts with governing regulatory agencies. NIA reserves the right to review and update the guidelines at its sole discretion. Notice of such changes, if necessary, shall be provided in accordance with the terms and conditions of provider agreements and any applicable laws or regulations.*

