

SNMMI publishes appropriate use criteria for hepatobiliary scintigraphy in abdominal pain

August 3 2017

The Society of Nuclear Medicine and Molecular Imaging (SNMMI) has published appropriate use criteria (AUC) for hepatobiliary scintigraphy in abdominal pain. This is the third in a series of new AUC developed by SNMMI in its role as a qualified provider-led entity (PLE) under the Medicare Appropriate Use Criteria Program for Advanced Diagnostic Imaging. The other recently released AUC are for <u>bone scintigraphy in</u> prostate and breast cancer and for ventilation/perfusion (V/Q) imaging in pulmonary embolism, which is endorsed by the American College of Emergency Physicians. In addition, the AUC for F-18-FDG PET restaging and response assessment of malignant disease has been approved by the SNMMI Board and will soon be available online and will be published in *The Journal of Nuclear Medicine*.

The new AUC are intended to assist referring physicians and ordering professionals in fulfilling the requirements of the 2014 Protecting Access to Medicare Act (PAMA). Current regulations call for PAMA to require referring physicians to consult AUC developed by a PLE beginning January 1, 2018, to ensure cost-effective and appropriate utilization of advanced diagnostic imaging services. However, the Centers for Medicare & Medicaid Services recently proposed pushing back the start date for when providers will be required to consult AUC to January 2019.

Tc-99m-labeled hepatobiliary iminodiacetic acid (HIDA) scintigraphy is



an important adjunct to the evaluation of patients with <u>abdominal pain</u>. The proper use of HIDA scintigraphy requires an understanding of the physiology of the hepatobiliary system in both health and disease states, the metabolism of hepatobiliary radiopharmaceuticals, the sensitivity and specificity of currently used radiopharmaceuticals for biliary collecting system abnormalities during normal and abnormal hepatocellular function, the radiation dosimetry of hepatobiliary radiopharmaceuticals, and the accuracy and risks of alternative diagnostic studies.

This AUC was, therefore, developed by a workgroup composed of expert representatives from the Society of Nuclear Medicine and Molecular Imaging (SNMMI), the European Association of Nuclear Medicine (EANM), and the American Gastroenterological Association (AGA). The process included a systematic review of available evidence, individual and group ratings of the scenarios using a formal consensus process, and AUC recommendations based on final group ratings and discussions.

The SNMMI Guidance Oversight Committee is also developing AUC for gastrointestinal transit, infection imaging, PET <u>myocardial perfusion</u> <u>imaging</u>, prostate cancer imaging, somatostatin imaging, and thyroid imaging and therapy.

For the AUC on appropriate use criteria (AUC) for hepatobiliary scintigraphy in abdominal pain, go to <u>http://www.snmmi.org/ClinicalPractice/content.aspx?ItemNumber=1566</u> 9. For background and a detailed explanation of this development process, see <u>http://www.snmmi.org/ClinicalPractice/content.aspx?ItemNumber=1566</u> 5. Also, an abbreviated version of the AUC is published in *The Journal of Nuclear Medicine*.



Provided by Society of Nuclear Medicine

Citation: SNMMI publishes appropriate use criteria for hepatobiliary scintigraphy in abdominal pain (2017, August 3) retrieved 15 May 2024 from <u>https://medicalxpress.com/news/2017-08-snmmi-publishes-criteria-hepatobiliary-scintigraphy.html</u>

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