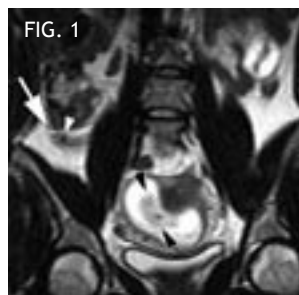


MRI Rules Out Acute Appendicitis In Pregnancy

Until now, in cases where appendicitis is strongly suspected and ultrasound is inconclusive, computed tomography (CT) has been the method physicians rely on for further investigation. However, this technique involves the use of ionizing radiation, which is less desirable during pregnancy because of potential harm to the fetus.

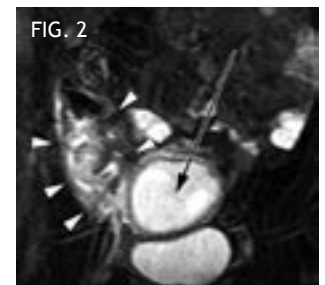
MRI can potentially spare thousands of women and their developing fetuses from exposure to radiation by minimizing the need for CT to rule out appendicitis. Abdominal pain is a common complaint during pregnancy, and physicians are challenged with recognizing situations where emergency surgical intervention is necessary. Appendicitis is the most common cause of belly pain requiring emergency surgical treatment in pregnant women.

FIGURE 1: A 26-year-old woman in 11th week of pregnancy with right lower quadrant pain and clinical suspicion of appendicitis. Coronal T2-weighted image shows inflamed appendix (arrow). At base of appendix, rounded intraluminal structure without signal intensity (white arrowhead) is seen, representing appendicolith, which



was confirmed by surgery and pathology. Fetus (black arrowheads) is clearly visible.

FIGURE 2: A 33-year-old woman in 13th week of pregnancy with two days of right lower quadrant pain and clinical suspicion of appendicitis. T2-weighted coronal fat-suppressed image clearly shows inflammatory changes around appendix (arrowheads) as areas with high signal intensity. Enlarged uterus (arrow) is also seen. Appendix itself is not clearly visible in this image.



Appendicitis occurs when the appendix becomes acutely inflamed and develops a severe infection. The importance of ruling out this and other conditions that may require surgical intervention is paramount to avoid unnecessary delays in treatment and subsequent risks to both mother and developing fetus. ■

Dear Colleague:

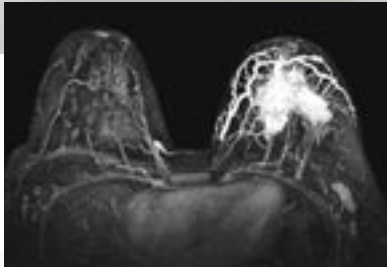
I'm pleased to send you this issue of "Update" from Stevens Radia Imaging Center. I am here to be of service to you in any way I can, including consultation on cases and helping decide which modality will give the best results. Your questions/ comments are welcome. My cell number is (206) 799-1297.

Brian McCallie, M.D., Medical Director

MRI in Pregnancy at Stevens Radia Imaging Center

Indications

- Flank pain
- Abdominal or RLQ pain – Possible appendicitis
- Indeterminate ovarian mass
- Pelvic mass versus fibroid



Physician Survey Results Just In

Recently, 113 physicians in the Edmonds, Lynnwood and surrounding medical community responded to our survey. We asked about satisfaction and utilization, and here's what they said:

When asked, "Would you refer your colleagues, family and friends to Stevens Radia?" all responded they would.

Generally, we sought to find out "What would you like us to know about our services?" Providers responded with these comments:

- ❖ "Keep up the good work."
- ❖ "I enjoy our affiliation."
- ❖ "Excellent/quick access to radiologist for consultation."
- ❖ "Needs are met."
- ❖ "No patient complaints."
- ❖ "So far, great quality."
- ❖ "Services are great."

The main criteria physicians use when selecting an imaging center are:

- ❖ Quick scheduling of patients
- ❖ Quality and accuracy of reports
- ❖ Speed in receiving results

New Technology on the Way

Stevens Radia Imaging Center has upgraded its 1.5T magnet to an 8-channel Siemens MR platform with new coils to provide better quality and faster scans. Stevens Radia purchased a foot-ankle extremity coil and a multi-channel breast coil. Scanning will begin in March 2007.

Says Medical Director Brian McCallie, MD, "The upgrade improves the image quality of some exams, while speeding up other exams to improve patient convenience."

Adds Kathy Vasen, Manager of Stevens Radia Imaging Center, "We're excited to add these coils to our MRI. They will enhance our services by allowing better exams and, for the breast coil in particular, we can put many women at ease who have the need for MRI. For example, MRI has been shown to detect small breast lesions that are sometimes missed by mammography and this technology can successfully image the dense breast common in younger women, as well as breast implants." Breast MRI has several established clinical indications, including disease staging, monitoring response to therapy in breast cancer patients and screening patients at high-risk for breast cancer. Vasen notes that the high-resolution detail makes MRI an invaluable tool in early diagnosis and evaluation of tumors. ■

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