

<b>Imaging Findings</b>	<b>Cause</b>
<b>Bone Abnormalities</b>	
Discontinuous cortex and displaced bone fragment on XR, CT, or MR (XR may not show the fracture, especially in the acute phase); abnormal marrow signal on MR	Fracture
Ulnar minus variant on XR, CT, and MR; dense lunate on XR, CT; small lunate XR, CT, and MR; abnormal SI on MR	Avascular necrosis of the lunate (Keinbock's)
Ulnar plus variant on XR, CT, and MR; abnormal marrow signal on MR	Ulnar abutment syndrome
	Bone tumor
<b>Joint Abnormalities (DRUJ, RC, CMC)</b>	
Discontinuous cortex, displaced bone fragments, and displaced bones on XR, CT, or MR; abnormal marrow signal on MR	Fracture/dislocation of the carpus
Osteophytes, joint space narrowing, subchondral sclerosis or cysts, joint effusion on XR, CT, and MR; focal articular cartilage defects on MR, CT-arthrography, and MR-arthrography	Osteoarthritis
Loss of joint space, erosions, and joint effusion on XR, CT, and MR; abnormal marrow SI MR	Rheumatoid arthritis
Chondrocalcinosis and/or soft tissue calcifications on XR, CT, MR; secondary osteoarthritis on XR, CT, and MR	Crystal arthropathy (gout, CPPD)
<b>Extra-articular Soft Tissue Abnormalities</b>	
Soft tissue mass on XR, CT, and MR	Ganglion cyst
Soft tissue swelling on XR, CT, and MR; fluid in the tendon sheaths and abnormal tendon SI on MR	Tenosynovitis
Discontinuous TFC on MR; contrast leak across TFC on arthrography and MR arthrography	TFC tear
Wide interosseous space, ulnar -plus variant on XR, CT, and MR; discontinuous ligaments and leak from compartment of injection on arthrography and MR-arthrography	Interosseous ligament tears
	Tendon tear
Reactive changes along the radial cortex on XR, CT, and MR; thick irregular tendons on MR	De Quervain's tenosynovitis
Imaging usually not necessary. Swelling and abnormal SI of the nerve on MR.	Carpal tunnel syndrome / median neuropathy
Deformed Guyon canal from prior trauma on CT or MR	Ulnar neuropathy
Demineralization on XR and CT; abnormal marrow SI on MR; diffuse abnormal uptake on nuclear medicine bone scan	Complex regional pain syndrome

## **DICTIONARY TEMPLATE WITH PROMPTS FOR WRIST RADIOGRAPHS PERFORMED FOR WRIST PAIN**

### **WRIST RADIOGRAPHS**

**INDICATION:** Wrist pain.

**COMPARISON:** [Check priors to see if following a known lesion.]

**TECHNIQUE:** []

**Bones:** [Discontinuity of cortex or displaced fragment (fracture). Periostitis (De Quervain's tenosynovitis). Erosion (inflammatory arthropathy). Osteophytes or subchondral cysts (osteoarthritis). Focal increased density or decreased size (avascular necrosis of the lunate, avascular necrosis of the proximal pole of the scaphoid following fracture).]

**Joints:** [Widened interosseous spaces (interosseous ligament tear). Abnormal alignment of the distal articular surfaces of the radius and ulna (ulnar-plus or ulnar-minus variance). Narrowed joint space(s) (arthritis). Osteophytes (osteoarthritis). Chondrocalcinosis or synovial calcification (crystal arthropathy).]

**Extra-articular soft tissues:** [Calcification, especially of the triangular fibrocartilage (crystal arthropathy). Soft tissue swelling (tenosynovitis, complex regional pain syndrome). Focal soft tissue mass (ganglion).]

**IMPRESSION:** []

## **DICTATION TEMPLATE WITH PROMPTS FOR WRIST MRI PERFORMED FOR WRIST PAIN**

### MRI WRIST

INDICATION: Wrist pain.

COMPARISON STUDIES: [Check priors to see if following a known lesion.]

TECHNIQUE: []

### FINDINGS:

Bones: [Discontinuity of cortex (fracture, tumor, inflammation, or infection). Erosion (inflammatory arthropathy, infection). Increased signal on T2 weighted images (contusion, fracture, tumor, infection, avascular necrosis).]

Joints: [Cartilage loss (arthritis). Effusion (arthritis, trauma, infection).]

Extra-articular soft tissues: [Discontinuity of the triangular fibrocartilage or abnormal communication from the mid-carpal to the distal radioulnar joint (tear). Confirm normal, intact tendons with scant fluid in the tendon sheaths. Intrinsic signal or swelling of tendons (partial thickness tendon tear), discontinuity of tendons (full thickness tendon tear) or excessive fluid in the tendon sheath (tenosynovitis). Swelling or increased signal of the medial nerve (neuritis).]

IMPRESSION: []