

Before ordering a spinal MRI for your patient, check for at least 1 of the following indications.

- **Radiculopathy** (focal neurologic deficit with progressive or disabling features): Pain in the distribution of the nerve root (often extending below the knee or elbow), with motor, reflex, or sensory deficit. ICD-9: thoracic and lumbar 724.4; cervical 723.4.
- **Radicular pain** (radiating pain): Order an MRI only after failed conservative treatment (see LBP CPM) for 4 to 6 weeks. ICD-9: thoracic and lumbar 724.4; cervical 723.4.
- **Myelopathy** (Babinski or sustained clonus — cervical or thoracic MRI). ICD-9: other myelopathy 336.8 — needs an additional E code to identify the cause.
- Associated lumbar spine symptoms/findings WITH **cancer history, cancer symptoms, and/or infection.**
- Suspected **cauda equina syndrome.** ICD-9: 344.61.
- New **bowel or bladder dysfunction.** ICD-9: unspecified functional disorder of intestine 564.9.
- **Perineal numbness / saddle anesthesia.** ICD-9: numbness 782.0.
- Persistent or increasing **motor weakness.** ICD-9: generalized muscle weakness 728.87.
- Significant **loss of coordination** in one or both legs.
- **Suspected compression fracture:** Osteoporosis or osteoporosis risk. ICD-9: pathological fracture 733.13.
- **Suspected spinal fracture:** Significant recent trauma or fall.
- **Prior surgery or planned surgery or injection.**

For more information, see Intermountain's [Low Back Pain Care Process Model](#) and [Flash Card](#).