

Prioritization Tiers for Contrast CT Examination (Conservation of Iodinated Contrast Initiative)

Tier Designation	Description	Examples
Tier 1	Emergent, no adequate alternative, delaying will likely result in significant patient harm	<ul style="list-style-type: none"> Stroke Level 1 trauma Acute MI Aortic dissection AAA rupture Massive transfusion requirement Inpatients with hemodynamic instability Septic shock with unclear source Pulmonary embolism Critical limb ischemia
Tier 2	Urgent, needs priority consideration for alternative modalities, non-contrasted exams, scheduling elsewhere, but a minor delay of 1-6 days may not affect patient care	<ul style="list-style-type: none"> Outpatient cancer and cardiology imaging Electrophysiology procedures utilizing low volume contrast Transplant workup Suspected infection in stable patient Suspect post procedural complication in a stable patient Pre-operative work-up for a patient scheduled for surgery in >24 hours
Tier 3	Routine subacute, can potentially delay 1-3 weeks without significantly affecting patient care	<ul style="list-style-type: none"> Chronic infection requiring regular follow-up
Tier 4	Routine Delayed Subacute, can potentially delay 4-6 weeks without significantly affecting patient care	<ul style="list-style-type: none"> Unexplained microscopic hematuria
Tier 5	Chronic, Delaying 2-3 months is unlikely to result in significant patient harm	<ul style="list-style-type: none"> Annual follow-up of syndromic condition with no new symptoms or clinical concerns Adrenal nodule work-up in asymptomatic patient without history of cancer Characterization or follow-up of a renal mass <2cm in size