Nonoperative Diagnostic Spinal Ultrasound (Echography/Sonogram)

DESCRIPTION

Ultrasonography is a noninvasive imaging technique that uses high-frequency sound waves. A conducting gel is applied to the skin overlying the area to be examined. The individual then lies on an examination table or bed while the physician or technician passes a transducer over the area. The reflected sound waves are converted into images that are viewed on a monitor.

Sonographic examination of the pediatric spinal canal is most successful in the newborn period and early infancy and is accomplished by scanning through the normally incompletely ossified posterior elements.

POLICY

- The use of nonoperative diagnostic spinal ultrasound is considered **medically necessary** if the medical appropriateness criteria are met. *(See Medical Appropriateness below.)*

- The use of nonoperative diagnostic spinal ultrasound, for the evaluation of other conditions/diseases, including, but not limited to, the following is considered **investigational:**
  - To evaluate back pain or radicular symptoms (e.g., disc herniation, spinal stenosis, nerve root pathology)
  - For evaluation of congenital or acquired anomalies for individuals over the age of two years

MEDICAL APPROPRIATENESS

- The use of nonoperative diagnostic spinal ultrasound is considered **medically appropriate** if ALL of the following criteria are met:
  - To evaluate newborns and infants two years of age or younger
  - To evaluate individuals for congenital or acquired anomalies of the spine and spinal cord as indicated by ANY ONE of the following:
    - Lumbosacral stigmata known to be associated with spinal dysraphism, including but not limited to:
      - Midline or paramedian masses
      - Skin discolorations
      - Skin tags
      - Hair tufts
      - Hemangiomas
      - Pinpoint midline dimples
      - Paramedian deep dimples
    - The spectrum of caudal regression syndrome in infants with ANY ONE of the following:
      - Sacral agenesis
      - Anal atresia
      - Anal stenosis
    - Evaluation of suspected defects as indicated by ANY ONE of the following:
      - Cord tethering
      - Diastematomyelia
      - Hydromyelia
      - Syringomyelia
    - Detection of sequelae of injury as indicated by ANY ONE of the following:
      - Hematoma after spinal tap or birth injury
• Sequelae of prior instrumentation, infection or hemorrhage
• Posttraumatic leakage of cerebrospinal fluid (CSF)
  ▪ Visualization of fluid with characteristics of blood products within the spinal canal in infants with intracranial hemorrhage
  ▪ Guidance for lumbar puncture
  ▪ Postoperative assessment for cord re-tethering

IMPORTANT REMINDERS

• Any specific products referenced in this policy are just examples and are intended for illustrative purposes only. It is not intended to be a recommendation of one product over another, and is not intended to represent a complete listing of all products available. These examples are contained in the parenthetical e.g. statement.

• We develop Medical Policies to provide guidance to Members and Providers. This Medical Policy relates only to the services or supplies described in it. The existence of a Medical Policy is not an authorization, certification, explanation of benefits or a contract for the service (or supply) that is referenced in the Medical Policy. For a determination of the benefits that a Member is entitled to receive under his or her health plan, the Member's health plan must be reviewed. If there is a conflict between the Medical Policy and a health plan, the express terms of the health plan will govern.

ADDITIONAL INFORMATION

There are no well-designed studies to support the use of diagnostic spinal ultrasound for the investigational uses listed on this policy.

SOURCES


This document has been classified as public information.

**EFFECTIVE DATE** 10/8/2016

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