

Checklist form for radiological reporting of an appendiceal CT scan.

Patient name: _____

CT scan identification number: _____

Type of CT scan: _____

Technical quality of the CT study: _____

CT sign	Sensitivity (%)	Specificity (%)
Fat stranding	100	80
Enlarged, unfilled appendix	93	100
Focal cecal apical thickening	69	100
Adenopathy	62	66
Appendolith(s)	44	100
Arrowhead sign	23	100
Dependent fluid	18	86
Abscess	11	100
Cecal bar	10	100
Extraluminal air	8	97
Phlegmon	7	99
Terminal ileal wall thickening	3	86
Sigmoid wall thickening	3	95
Focal cecal wall thickening (not apical)	0	98
Diffuse cecal wall thickening	0	91

(Above table from Rao's study is for informational purposes only)

Confidence level that each radiological sign is present:

- 1 -- definitely present (80-100% likelihood of being present)
- 2 -- probably present (60-79% likelihood of being present)
- 3 -- equivocally present (40-59% likelihood of being present)
- 4 -- probably absent (20-39% likelihood of being present)
- 5 -- definitely absent (0-19% likelihood of being present)

Normal appendix: 1 2 3 4 5

Comments: _____

Enlarged unfilled appendix: 1 2 3 4 5

Comments: _____

Fat stranding: 1 2 3 4 5

Comments: _____

Focal cecal apical thickening: 1 2 3 4 5

Comments: _____

Focal cecal wall thickening: 1 2 3 4 5

Comments: _____

Diffuse cecal wall thickening: 1 2 3 4 5

Comments: _____

RLQ adenopathy: 1 2 3 4 5

Comments: _____

Appendolith: 1 2 3 4 5

Comments: _____

Arrowhead sign: 1 2 3 4 5

Comments: _____

Cecal bar sign: 1 2 3 4 5

Comments: _____

RLQ dependent fluid: 1 2 3 4 5

Comments: _____

RLQ abscess: 1 2 3 4 5

Comments: _____

Extraluminal air: 1 2 3 4 5

Comments: _____

Other sign: _____: 1 2 3 4 5

Comments: _____

Interpretation: _____
