Bone-RADS™ – Radiography Imaging Report Template for Potentially Neoplastic Bone Lesions (Short)

Examination: [ ] Radiographs, [number] Views.

Date of Study: [ ]

Clinical Indication: [ ]

Technique: [ ] views of the _____

Comparison/Correlation is made with _____

Patient Sex and Age:

FINDINGS:

Lesion Size:

Location/Bone Involved:

Radiodensity:

Matrix:

Other Findings:

BONE-RADS SCORING SYSTEM:

Margin	Periosteal Reaction	Endosteal Erosion	Pathological Fracture	Extra-osseous Soft Tissue Mass	History of Primary Cancer
IA = 1	None = 0	Mild = 0	No = 0	No = 0	No = 0
IB = 3	Non-aggressive = 2	Moderate = 1	Yes = 2	Yes = 4	Yes = 2
II = 5	Aggressive = 4	Deep = 2			
IIIA-C = 7					

Margination/Zone of Transition: [ ] points

Periosteal Reaction: [ ] points

Endosteal Scalloping: [ ] points

Pathological Fracture: [ ] points

Evidence of Extra-osseous Soft Tissue Mass: [ ] points

History of Primary Malignancy: [ ] points

Point Total: [ ] points

BONE-RADS Score:

    [ ] 0 (N/A) – Incompletely Characterized – further evaluation is suggested below

    [ ] 1 (1-2 points) – Very Low Risk of malignancy - very likely benign

    [ ] 2 (3-4 points) – Low Risk of malignancy - probably benign

    [ ] 3 (5-6 points) – Intermediate Risk of malignancy - potentially malignant

    [ ] 4 (7 or more points) – High Risk of malignancy – highly suspicious for malignancy

IMPRESSION:

Most Likely Diagnosis: 1. _____

Differential Diagnosis:

    1. _____
    2. _____
    3. _____

RECOMMENDATION:

[ ] No further imaging follow up is necessary – unless new symptoms or change in clinical status

[ ] Radiographic surveillance is recommended at ____ months

[ ] Advanced imaging evaluation is recommended (SELECT BELOW)

    [ ] Magnetic Resonance Imaging (MRI) of the _____ [ ] without [ ] with contrast

    [ ] Computed Tomography (CT) of the _____ [ ] without [ ] with contrast

    [ ] Nuclear Medicine Technetium-99M Bone Scan

    [ ] PET-CT

    [ ] PET-MRI

    [ ] Other: _____

[ ] Biopsy and/or Orthopedic Oncology consultation is recommended