

## Acute Pelvic Pain in the Reproductive Age Group

Acute pelvic pain is a common problem in women who are of childbearing age (premenopausal). The pain can be caused by gynecologic conditions (eg, hemorrhagic ovarian cysts, pelvic inflammatory disease, ovarian torsion, ectopic pregnancy) or by nongynecologic conditions (eg, appendicitis (<http://www.radiologyinfo.orgappendicitis>), inflammatory bowel disease, diverticulitis (<http://www.radiologyinfo.orgdiverticulitis>)). Before imaging tests are done, a pregnancy test is performed to select tests that minimize radiation exposure to the fetus for women who are pregnant.

If the patient is pregnant and the cause of pain is likely gynecologically related, ultrasound duplex Doppler (visualizes blood flow adnexa (regarding the fallopian tube/ovary), ultrasound pelvis (<http://www.radiologyinfo.orgpelvus>) transabdominal (ultrasound transducer placed on the outside of abdomen), or transvaginal (transducer inserted into the vagina) is usually appropriate. For pregnant patients, MRI and CT are usually not appropriate.

In nonpregnant patients in whom the cause of pain is likely gynecologically related, ultrasound duplex Doppler pelvis or ultrasound pelvis transabdominal or transvaginal is usually appropriate. MRI pelvis (<http://www.radiologyinfo.orgmri-abdomen-pelvis>) without and/or with intravenous (IV) contrast or CT abdomen and pelvis (<http://www.radiologyinfo.orgabdominect>) with IV contrast may be appropriate.

In pregnant patients in whom the cause of pain is likely nongynecologic, ultrasound abdomen and pelvis transabdominal, ultrasound duplex Doppler adnexa, or ultrasound pelvis transvaginal are usually appropriate.

In nonpregnant patients in whom the cause of pain is likely nongynecologic, ultrasound abdomen and pelvis transabdominal, ultrasound duplex Doppler pelvis, ultrasound pelvis transvaginal, and CT abdomen pelvis with or without IV contrast are usually appropriate.

For more information, see the Pelvic Pain (<https://www.radiologyinfo.org/en/info/pelvic-pain>) page.

— By Caitlin Coughlin and Aya Kamaya, MD. This information originally appeared in the *Journal of the American College of Radiology*.

### Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

**Note:** Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

### Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or

the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2024 Radiological Society of North America, Inc.