

Evidence Discussion (PV 7.1)

- Clinical examination and laboratory testing are appropriate in the initial diagnostic testing for suspected pelvic inflammatory disease (PID)^{1,2,3}. Imaging studies can be helpful when further evaluation is needed and to rule out other differential diagnoses such as ovarian cysts or gastrointestinal disease^{1,2,3}.
- Transabdominal pelvic and/or transvaginal pelvic ultrasound are widely accepted as the initial imaging modality of choice for evaluation of pelvic inflammatory disease^{1,2,3,4,5}. Additional benefits to ultrasound as a first line imaging modality include wide availability, fast access, and lack of ionizing radiation exposure. The addition of Power Doppler to ultrasonography has been found to increase sensitivity in the diagnosis of PID^{1,2,4,5}.
- CT Pelvis or MRI Pelvis can be considered if further imaging is needed following inconclusive ultrasound for diagnosis of PID, suspected tubo-ovarian abscess, or to evaluate for the extent of PID abscess formation for treatment planning^{1,2,4,5,6,7}.

References:

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