

**Title:** HA1 – Focal Neurologic Deficit  
**PCA:** Headache (traumatic and nontraumatic)  
**Diagnosis:** Any cancer diagnosis  
**IDMT:** Neuro-Oncology/Head and Neck

Clinical Condition	Logic Statement	Published Evidence Review	Grading of Evidence*	
Any cancer diagnosis with nontraumatic headache and focal neurologic deficit	<Any Diagnosis of Cancer> <b>AND</b> <New or Change in Nontraumatic Headache> <b>AND</b> <Focal Neurologic Deficit>	Argyriou AA, Chroni E, Polychronopoulos P, et al. Headache characteristics and brain metastases prediction in cancer patients. <i>European Journal of Cancer Care</i> . 2006;15(1):90-95.	4	
		Christiaans MH, Kelder JC, Arnoldus EPJ, Tijssen CC. Prediction of intracranial Metastases in cancer patients with headache. <i>Cancer</i> . 2002;94(7):2063-2068.	4	
		Douglas AC, Wippold FJ, 2nd, Broderick DF, et al. ACR Appropriateness Criteria Headache. <i>J Am Coll Radiol</i> . 2014;11(7):657-667.	5	
		Goldlust SA, Graber JJ, Bossert DF, Avila EK. Headache in Patients with Cancer. <i>Current Pain and Headache Reports</i> . 2010;14(6):455-464.	5	
		<b>Consensus-based Review</b>		<b>Grading of Evidence*</b>
		<p>The MSK NeuroOncology / Head and Neck Imaging Disease Management Team leveraged consensus-based expert opinion and clinical best practices to supplement the limited evidence in this area to define the appropriate imaging guidelines for this clinical condition.</p> <p><i>Key points:</i></p> <ul style="list-style-type: none"> <li>The existing literature provides insufficient evidence in relation to management of patient with specific cancer diagnoses (e.g. solid tumor versus hematologic malignancies) and presentation with a focal neurologic deficit. As a result, our consensus-based review considered appropriate imaging for any diagnosis of cancer associated with nontraumatic headache, applicable to the clinical indication here.</li> <li>Patients with known cancer should be scanned when a new headache develops or if the characteristics of a headache change or progress.</li> </ul>		5

\*Grading of Evidence assigned in accordance with the Oxford Centre for Evidenced-Based Medicine (OCEBM) Levels of Evidence 2009: <http://www.cebm.net/oxford-centre-evidence-based-medicine-levels-evidence-march-2009/>