



ARIA ESSENTIALS

INTERDISCIPLINARY PERSPECTIVES



Referring Specialist Checklist and Key Questions

Referring Specialist's ARIA Documentation & Collaboration Checklist

1 IMAGING & INTERPRETATION

- ✓ **Order MRI with ARIA-Specific Protocol**
 - Ensure MRI sequences are optimized with radiologist for ARIA detection
 - Verify recent baseline MRI: within 1 year before starting amyloid-targeting therapy
- ✓ **Request ARIA Evaluation**
 - **ARIA-E (Edema/Effusion):** Assess for vasogenic edema or sulcal effusions
 - **ARIA-H (Hemorrhages):** Identify microhemorrhages or superficial siderosis
- ✓ **Ensure Comparison with Prior Imaging**
 - Evaluate any interval changes, including new or worsening ARIA findings
 - Document stability, improvement, or progression

2 DOCUMENTATION & REPORTING

- ✓ **Request Clear Reporting of Findings**
 - **Location:** Specify affected regions
 - **Severity:** Mild, moderate, or severe
 - **Comparison to Prior:** Report new, stable, or resolving ARIA
- ✓ **Request Clinical Correlation**
 - Include relevant ARIA-associated symptoms
 - Recommend neurological evaluation if needed
- ✓ **Standardized Impression Statement**
 - **Example:** *Findings consistent with ARIA-E/ARIA-H in a patient receiving amyloid-targeting therapy. Recommend clinical correlation and follow-up MRI per treatment protocol.*

3 COMMUNICATION & NEXT STEPS

- ✓ **Expect Timely Reporting**
 - Moderate/severe ARIA cases flagged for urgent review
 - Significant findings communicated directly
- ✓ **Discuss Next Steps Based on Severity**
 - Recommend follow-up imaging timeframe
 - Advise multidisciplinary discussion if severity may require treatment adjustment
- ✓ **Ensure Documentation of Communication**
 - Record discussion with radiologist in the report or medical record



Referring Specialist Checklist and Key Questions

Key Questions for Referring Specialists to Ask Radiologists When Monitoring for ARIA

1 CLINICAL BACKGROUND & PATIENT RISK FACTORS

- Has a recent baseline MRI, within the last year, been reviewed for comparison?
- Are there preexisting cerebrovascular conditions or prior microhemorrhages that could increase ARIA risk?
- Have any neurological symptoms suggestive of ARIA been documented?

2 IMAGING ASSESSMENT & SEVERITY GRADING

- What ARIA-related changes, if any, are seen on this scan?
- How does the current MRI compare to prior imaging: are there new, worsening, or resolving findings?
- What criteria do you use to determine ARIA severity?
- At what point would you suggest modifying or pausing amyloid-targeting therapy based on imaging findings?

3 REPORTING & FOLLOW-UP STRATEGY

- What's the best way for me to receive updates on significant ARIA findings?
- Based on these results, when should we schedule the next follow-up MRI?
- Should any other specialists be looped into the discussion for coordinated management?