

CT

Abdomen without	74150
Abdomen with	74160
Abdomen with & without	74170
Abdomen / Pelvis without	74176
Abdomen / Pelvis with	74177
Abdomen / Pelvis with & without	74178
Abdomen with & without Pelvis with	74178

CTA Abdomen with & without	74175
CTA Abdomen Runoff (to toes)	75635
CTA Abdomen / Pelvis	74174
CTA Cardiac	75574
CTA Chest with & without	71275
CTA Coronary	75574
CTA Head with & without	70496
CTA Neck with & without	70498
CTA Pelvis with & without	72191

Cervical without	72125
Thoracic without	72128
Lumbar without	72131

Chest without	71250
Chest with	71260
Chest with & without	71270
Chest PE Protocol	71275

Facial Bones without	70486
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Head without	70450
Head with	70460
Head with & without	70470

Lower Extremity without	73700
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Orbits without	70480
Orbits with	70481
Orbits with & without	70482

Pelvis without	72192
Pelvis with	72193
Pelvis with & without	72194

S.T. Neck without	70490
S.T. Neck with	70491
S.T. Neck with & without	70492

Sinus without	70486
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Temp Bones / IAC's without	70480
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Upper Extremity without	73200
Urogram	74178

CT Myelogram

Cervical	62302
Thoracic	62303
Lumbar	62304
2 or more Regions	62305

**MRI Arthrogram
(joint contrast)**

Ankle	73722 73615 27648
Hip	73722 73525 27093
Knee	73722 73580 27370
Shoulder	73222 73040 23350
Thumb	73219 77002 20600
Wrist (1 compartment)	73222 73115 25246
Wrist (3 compartment)	73222 73115 25246x

Dexascan

Axial Skeleton	77080
Plus Vertebral Fracture	77085
ONLY Vertebral Fracture	77086

MRI

Abdomen / MRCP	74181
Abdomen / MRCP with & without	74183

MRA Abdomen	74185
MRA Brain	70544
MRA Carotid / Neck	70547
MRA Chest	71555
MRA Pelvis Runoff (to ankle)	73725x2 72198
MRA Pelvis Without	72198

Brain without	70551
Brain with & without	70553
Brain & Orbits with & without	70553 70543
Breast Bilateral without or with & without DX=cander add	77059 0159T

Cardiac	75557
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Cervical without	72141
Cervical with & without	72156
Thoracic without	72146
Thoracic with & without	72157
Lumbar without	72148
Lumbar with & without	72158

Hip	73721
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Lower Extremity - Joint Specify: Hip, Knee, Ankle	73721
Lower Extremity - Not a Joint Specify: Femur, TibFib, Foot	73718

Orbits without	70540
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Pelvis without	72195
Pelvis with & without	72197

S.T. Neck without	70540
S.T. Neck with & without	70543

TMJ	70336
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Upper Extremity - Joint Specify: Shoulder, Elbow, Wrist	73221
Upper Extremity - Not a Joint Specify: Humerus, Forearm, Hand	73218

Breast Biopsy Additional Lesion	19085 19086
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Nuclear Medicine

Bone Scan Whole Body	A9503 78306
Bone Scan Limited Specify: Body Part	A9503 78300
Bone Scan 3 Phase Specify: Body Part	A9503 78315
Bone Spect	A9503 78320
Gastric Emptying	A9541 78264
Heart Treadmill	A9502 A9505 78452
Heart Pharmacologic	J1245 A9502 A9505 78452
Hida with CCK	J1245 A9502 A9505 78227
Hida without CCK	A9537 78226
I-131 Whole Body Scan	A9528 78018
I-131 Whole Body Scan with Therapy	A9517 79005 78018
I-131 Therapy	A9517 79005
All I-131 Addt'l Info on Pg 4	
Liver Spect Scan	A9541 78205
Liver Spleen	78215
Lung VQ	A9567 A9540 78598 71020
Muga Scan	A9560 78472
Parathyroid Scan	A9500 78070
Renal Mag 3	A9562 78708
Renal Lasix	A9562 78708
Renal Captopril	A9562 78708
Renal Scan-DMSA	A9551 78710
Thyroid Uptake and Scan	78014
WBC Whole Body	A9521 78806
WBC Limited	A9521 78805

Fluoroscopy

Barium Swallow	74220
Modified Barium Swallow (must have speech pathologist)	74230
Barium Enema	74270
Barium Enema with Air	74280
Hysterosalpingogram (HSG)	74740 58340
Lumbar Puncture	77003 62270
Pain Mgmt - Hip Injection	20610 77002
Pain Mgmt - Sm Joint Specify: Toes, Fingers	77002 20600
Pain Mgmt - Int Joint Specify: Ankle, Wrist, Elbow	77002 20605
Pain Mgmt - Lg Joint Specify: Hip Right or Left	77002 20610
Small Bowel Follow Through	74250
Upper G.I. Barium Swallow	74247 74220
Upper G.I. with KUB	74247
Upper G.I. with Small Bowel Series	74249
VCUG	74455 51600

Digital Mammography

Screening Bilateral	77067
Screening Unilateral	77067-52
Diagnostic Bilateral	77066
Diagnostic Unilateral	77065
Mag / Spot Bilateral	77065-52
Mag / Spot Unilateral	77066-52
Stereotactic Breast Biopsy Additional Lesion	19081 19082

Ultrasound Guided Procedures

Breast Biopsy	19083 G0206 77051 A4550 19084
Additional Lesion	19084
Breast Cyst Aspiration Specify: Side, Nodule	76942 19000
Thyroid Biopsy Specify: Side, Nodule	76942 99070 10022
Soft Tissue Neck Biopsy Specify: Side, Nodule	20206 76942 99070

Ultrasound

Abdominal Complete	76700
Abdominal Limited	76705
Aorta Iliac IVC for Aneurysm	76705
Breast (Bilateral x2)	76641
Carotid	93880
Chest	76604
Doppler, Arterial Bilateral Lower	93925
Doppler, Arterial Unilateral Lower	93926
Doppler, Arterial Bilateral Upper	93930
Doppler, Arterial Unilateral Upper	93931
Doppler Aorta Iliac IVC for Transplant	93978
Doppler, Mesenteric	93976
Doppler Renal Artery	93975
Doppler, Portal Vein	93976
Doppler, Venous Bilateral	93970
Doppler, Venous Unilateral	93971
Extremity Specify: Body Part	76880
Fetal Hips	76885
Head / Soft Tissue Neck	76536
HSG	76831 58340 99070
OB Single >14wks	76805
OB Multiple	76810
OB 1st Trimester < 14 wks	76801
OB T-Vag	76817
Pain Mgmt - Sm Joint Specify: Toes, Fingers	20604
Pain Mgmt - Int Joint Specify: Ankle, Wrist, Elbow	20606
U/S Pain Mgmt - Lg Joint Specify: Hip Right or Left	20611
Paracentesis	49083 99070
Pelvis	76856
Pelvis with T-Vag	76856 76830
Renal	76770
Renal Post Transplant	76776
Scrotal (Testicular)	76870
Thoracentesis	32555
Thyroid	76536
Transrectal (Prostate)	76872
Transvaginal	76830

THYROID UPTAKE – SINGLE DETERMINATION * Probe only with one return (2, 4, 6, OR 24HOURS)	78012
THYROID IMAGING, <u>WITH UPTAKE</u> -SINGLE DETERMINATION * Return with probe plus one image of the thyroid gland acquired at 6 hours after dose	78014
THYROID IMAGING <u>WITH UPTAKE</u> -MULTIPLE DETERMINATIONS * Return with probe and Includes the above with two returns for determination	78014
I131 WHOLE BODY SCAN-NO THYROGEN NO HIGH DOSE *TSH >30 *SDMI Dose *SDMI Whole Body Scan	A9517 78018
THYROGEN I131 WHOLE BODY SCAN NO HIGH DOSE *Thyrogen given by doctor's office Monday and Tuesday *SDMI Dose Wednesday *SDMI Whole Body Scan Friday-	A9517 78018
I131 WHOLE BODY SCAN WITH HIGH DOSE (29.9 MCI-200MCI) *TSH>30 Pregnancy test Required within 7 days unless Hysterectomy/Tubal Ligation *SDMI High Dose *SDMI Whole Body Scan 1 week after High Dose	79005 78018
THYROGEN I131 WHOLE BODY SCAN WITH HIGH DOSE (29.9 MCI-200MCI) *Pregnancy test Required within 7 days unless Hysterectomy/Tubal Ligation *Thyroid labs within 3 months *Thyrogen given by doctor's office Monday and Tuesday *SDMI High Dose Wednesday *SDMI Whole Body Scan 1 week after High Dose	79005 78018

Angiography and Venography

Abdomen Angio (Aortagram) w/ Bilateral Lower Ext Arteriogram (Bilateral Runoff)	36200 75625 75716 A4550,1 J2250
Carotid w/Cerebral w/Vertebral Arterties 4 Vessel Cerebral Vertebral Angio	36226x2 36223x2 A4550,1
Carotid Angio Bilateral w/Unilateral Vertebral (selective cath placement)	36222x2 36226
Bilateral Common Carotid Angio (w/head & neck)	36223x2 A4550,1
Bilateral Common Carotid Angio (w/neck only)	36222x2 A4550,1
Renal Angio Bilateral (aortagram)	36252 A4550,1
Renal Angio Unilateral (aortagram)	36251 A4550,1
Upper Extremity Angio Bilateral	75716 36215 36216 J2250 A4550,1
Upper Extremity Angio Unilateral	36215 75710 A4550,1
Extremity (Arm or Leg) Venogram Bilateral	75822 36005x2 A4550,1
Extremity (Arm or Leg) Venogram Unilateral	75820 36005 A4550,1
Varicocele Embolization (VA Ins Only)	37241 36012 36011 75833 A4550,1 J2250

Venous Access Procedures

Chest Port - Insertion	36561 76937 77001 A4550,1 A4301
Chest Port - Exchange/Replace	36582 A4550,1 A4301
Arm Port - Insertion	36571 76937 77001 A4450,1 A4301
Arm Port - Exchange/Replace	36585 A4550,1 A4301
Port Removal (Arm or Chest)	36590 A4550,1
Port Repair (Arm or Chest) Not Replaced	36576 A4550,1
Tunneled Catheter Placement	36558 76937 77001 A4550,1
Tunneled Catheter Exchange	77001 36581 A4550,1
Tunneled Catheter Removal	36589 77001 A4550,1
IVC Filter Insertion	37191 A4550,1
IVC Filter Removal	37193 A4550,1

Other Special Procedures

Vertebroplasty 1 Level Thoracic	22520 72291 A4649,1
Vertebroplasty 1 Level Lumbar	22521 72291 A4649,1
Additional Level Thoracic or Lumbar	22522 72291

Kyphoplasty Consultation (New Patient)	99204
Kyphoplasty Consultation (Established Patient)	99214
Kyphoplasty 1 Level Thoracic	22523 72291 A4649,1
Kyphoplasty 1 Level Lumbar	22524 72291 A4649,1
Kyphoplasty Additional Level Thoracic or Lumbar	22525 72291

Post Op Care	99212,2
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Urological Special Procedures

Nephrostogram (*Unilateral)	74425 50390 A4550,1
Nephrostomy (*Unilateral) Tube Insertion	74475 50392 74425 J2250 A4550,1
Nephrostomy (*Unilateral) Tube Check	74425 50394 A4550,1
Nephrostomy (*Unilateral) Tube Change	50398 75984 A4550,1
Nephrostomy (*Unilateral) Tube Removal	50389 A4550,1
*If Bilateral is needed, x2	

Nephrostogram w/ Ureteral Stent Insertion (Ureteral Blockage)	50393 74480 50398 74425 50394 75984 A4550,1
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Retroperitoneal or Peritoneal Percutaneous Drain	
Cavity Space	49406 A4550,1
Soft Tissue / Muscle	10030 A4450,1
Organ	49405 A4649
Peritoneal Cath Insertion	49418 A4550,1
Renal Cyst Aspiration or Pelvis Inj	77012 50390 A4550,1 J2250
Cholangiogram thru Cath (T-Tube Check)	47505 74305

CT Guided Special Procedures

Lung Biopsy Mediastinum	77012 10022(FNA) 32405(core) 71035x2 A4550,1 J2250
Liver Biopsy (hep c or random)	77012 10022(FNA) 47000(core) A4550,1 J2250
Pleural Biopsy	77012 10022(FNA) 32400(core) 71035x2 A4550,1
Abdomen / Retroperitoneal Biopsy	77012 10022(FNA) 49180(core) A4550,1 J2250
Lymph Node Biopsy	77012 1002(FNA) 38505(core) A4550,1 J2250
Bone Biopsy Trocar or Needle; Superficial	20220 77002 A4550,1 J2250
Bone Biopsy Needle; Deep	20225 77012 A4550,1
Bone Marrow Biopsy	77012 38221 A4550,1 J2250
Pancreas Biopsy	77012 10022(FNA) 48102(core) A4550,1 J2250
Renal or Adrenal Biopsy (patient must have a urologist or urology consult)	77012 10022(FNA) 50200(core) A4550,1 J2250
Soft Tissue / Muscle Biopsy	77012 10022(FNA) 20206(core) A4550,1

PET Scan and PET/CT Fusion codes call 515-8425
For additional Special Procedure contact Specials at 732-6019