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2022 CPT Code Exam Ordering Guide

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HEAD/NECK & NEURO	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
	MRI brain - post fossa w/ & w/o contrast (IAC w/ & w/o)	<ul style="list-style-type: none"> • Bell's Palsy • Vertigo • Hearing loss 	70553
	MRI brain (pituitary protocol) w/ & w/o contrast	<ul style="list-style-type: none"> • Hormone abnormalities • Pituitary 	70553
	MRI brain (seizure protocol) w/ & w/o contrast	<ul style="list-style-type: none"> • Seizures - multiple early onset 	70553
	MRI brain and orbits w/ & w/o contrast	<ul style="list-style-type: none"> • Loss of vision • Optic neuritis • Ocular mass or tumor • Visual disturbance 	70553, 70543
	MRI brain w/ & w/o contrast	<ul style="list-style-type: none"> • Brain tumor • Headaches (depends on associated clinical history) • Multiple sclerosis • Dizziness • Meningitis • Metastatic brain disease • Seizures 	70553
	MRI brain w/o contrast	<ul style="list-style-type: none"> • Ataxia • Dementia • Traumatic brain injury (chronic) • CVA • Headaches (depends on associated clinical history) 	70551
	MRI brain w/o contrast and MRA or MRV	<ul style="list-style-type: none"> • Personal or family history of aneurysm • Severe headache • Subarachnoid hemorrhage 	70551, 70544
	MRI (facial bones, orbits, neck soft tissue) w/ & w/o contrast	<ul style="list-style-type: none"> • Tumor, mass, swelling, or infection of the soft tissue neck 	70543

EXAM TO ORDER		SYMPTOMS/CONCERNS	CPT CODE
ABDOMEN & PELVIS	MRI abdomen w/ & w/o contrast	<ul style="list-style-type: none"> Abdominal pain Any complaint related to liver, spleen, pancreas or kidneys 	74183
	MRA abdomen w/ or w/o contrast	<ul style="list-style-type: none"> Hypertension Renal artery stenosis 	74185
	MRI abdomen w/ & w/o contrast w/ MRCP	<ul style="list-style-type: none"> Gall stones Cholangitis Biliary tumor or pancreatitis Common bile duct or gallbladder concerns Pancreatic duct 	74183, 76377
	MRI abdomen and pelvis w/ & w/o contrast	<ul style="list-style-type: none"> Crohn's disease Inflammatory bowel disease Ischemic bowel disease 	74183 Abdomen w/& w/o 72197 Pelvis w/& w/o
	MRI pelvis w/o contrast	<ul style="list-style-type: none"> Coccyx fracture Pubic arthralgia Sacroiliitis Stress fracture (Pelvis) Pelvic fracture Sacral fracture Sports hernia 	72195
	MRI pelvis and prostate gland w/ & w/o contrast	<ul style="list-style-type: none"> Prostate cancer screening, staging or follow up 	72197

EXAM TO ORDER		SYMPTOMS/CONCERNS	CPT CODE
PELVIS	MRI pelvis female GYN w/ & w/o contrast	<ul style="list-style-type: none"> • Adenomyosis • Dermoid • Fibroid • Infection or tumor • Post menopausal bleeding • Uterine mass • Cervical cancer • Family history of uterine or ovarian malignant tumor • Ovarian disease • UFE planning • Vaginal cancer 	72197
	MRI pelvis w/ & w/o contrast	<ul style="list-style-type: none"> • Non-gynecological tumor or infection • Non-specific pelvic pain 	72197
SPINE	MRI cervical spine w/ & w/o contrast	<ul style="list-style-type: none"> • Demyelination, Infection • MS • Suspected tumor of cervical spinal cord 	72156
	MRI cervical spine w/o contrast	<ul style="list-style-type: none"> • Benign cervical spine • Cervical neck pain • Compression fracture (Cervical Spine) • Degenerative disc disease • Disk herniation • Radiculopathy 	72141
	MRI lumbar spine w/ & w/o contrast <i>*If prior lumbar surgery (within 10 years), r/o infection, or bone mets then MRI lumbar spine w/ & w/o contrast.</i>	<ul style="list-style-type: none"> • Malignancy • Failed back syndrome • Pathologic compression fracture (Lumbar Spine) 	72158

	EXAM TO ORDER	SYMPTOMS/CONCERNS		CPT CODE
SPINE	MRI lumbar spine w/o contrast	<ul style="list-style-type: none"> • Compression fracture • Disk herniation • Radiculopathy 	<ul style="list-style-type: none"> • Degenerative disk disease • Low back pain > 6 weeks • Sciatica 	72148
	MRI thoracic spine w/ & w/o contrast	<ul style="list-style-type: none"> • Demyelinating disease • Infection 	<ul style="list-style-type: none"> • Thoracic tumor 	72157
	MRI thoracic spine w/o contrast	<ul style="list-style-type: none"> • Compression fracture benign (Thoracic Spine) • Degenerative disk disease • Thoracic back pain 	<ul style="list-style-type: none"> • Disk herniation 	72146
ARTHROGRAM	MRI arthrogram, Knee	<ul style="list-style-type: none"> • Knee pain with concern for unstable osteochondral lesion • Knee pain with prior arthroscopy 		73722 MRI joint LOWER extremity w/ contrast 27369 Arthro injection 77002 Fluoro guidance
	MRI arthrogram, Shoulder	<ul style="list-style-type: none"> • Shoulder pain after dislocation or concern for labral tear • Shoulder pain after rotator cuff or labral repair 		73222 MRI joint UPPER extremity w/ contrast 23350 Arthro injection 77002 Fluoro guidance

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
EXTREMITY UPPER	MRI (joint) UPPER extremity w/o contrast	<ul style="list-style-type: none"> • Evaluate for bony or soft tissue pathology • Internal derangement occult • Joint pain 	73221
	MRI (non joint) UPPER extremity w/o contrast	<ul style="list-style-type: none"> • Fracture to non-joint extremity • Myositis • Soft tissue injury • Lipoma • Nonspecific pain • Stress response 	73218
	MRI (non joint) UPPER extremity w/ & w/o contrast	<ul style="list-style-type: none"> • Contrast indicated for tumor or infection of extremity only 	73220
EXTREMITY LOWER	MRI (joint) LOWER extremity w/o contrast	<ul style="list-style-type: none"> • Evaluate for bony or soft tissue pathology • Internal derangement occult • Joint pain 	73721
	MRI (non joint) LOWER extremity w/o contrast	<ul style="list-style-type: none"> • Fracture to non-joint extremity • Myositis • Soft tissue injury • Lipoma • Nonspecific pain • Stress response 	73718
	MRI (non joint) LOWER extremity w/ & w/o contrast	<ul style="list-style-type: none"> • Contrast indicated for tumor or infection of extremity only 	73720

MRI ANATOMY - CPT CODES

SPINE, CERVICAL

wo 72141
w/wo 72156

SPINE, THORACIC

wo 72146
w/wo 72157

SPINE, LUMBAR

wo 72148
w/wo 72158

UPPER EXTREMITY

NON JOINT
(HUMERUS, FOREARM, HAND)

wo 73218
w/wo 73220

JOINT
(SHOULDER, ELBOW, WRIST)

wo 73221
w/wo 73223

MRI ARTHROGRAM

Shoulder 23350, 77002, 73222
Elbow 24220, 77002, 73222
Wrist 25246, 77002, 73222

LOWER EXTREMITY

NON JOINT(THIGH, CALF, FOOT)

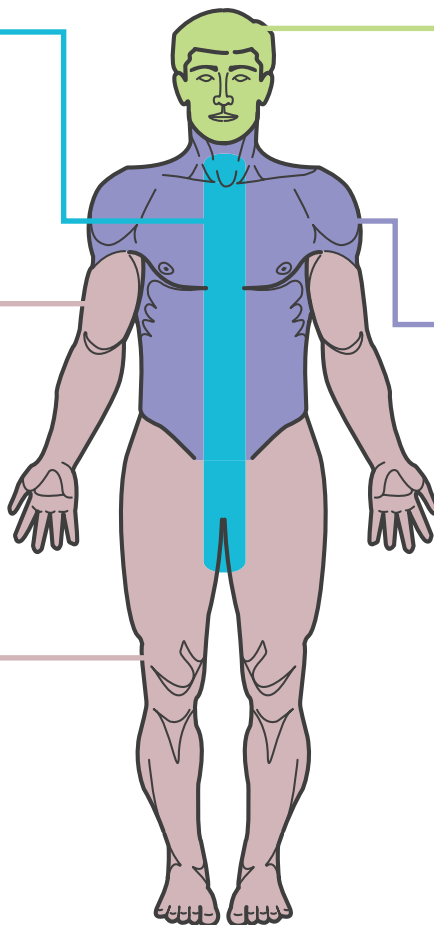
wo 73718
w/wo 73720

JOINT(HIP, KNEE, ANKLE)

wo 73721
w/wo 73723

MRI ARTHROGRAM

Hip 27093, 77002, 73722
Knee 27370, 77002, 73722
Ankle 27648, 77002, 73722



BRAIN

wo 70551
w/wo 70553
Brain MRA (wo) 70544

ORBITS/FACE (PITUITARY, IACS)

wo 70540
w/wo 70543
TMJ (wo) 70336

PETROUS/TEMPORAL BONE (IAC)

wo 70480

NECK, SOFT TISSUE

wo 70540
w/wo 70543
MR Angio (w/) 70549

COMBINATION CODES

Brain MRI & MRA 70553, 70544
Brain & Orbits w/wo 70553, 70543

CHEST

wo 71550
w/wo 71552
Chest MRA
(for Brachial Plexus) 71555

ABDOMEN

wo 74181
w/wo 74183
Abdomen MRA (w/wo) 74185

PELVIS

wo 72195
w/wo 72197

BREAST

w/wo
Unilateral 77048
Bilateral 77049

ABBREVIATION KEY

wo = without IV contrast
w/ = with IV contrast
w/wo = with & without IV contrast

*These CPT codes represent the most commonly ordered MRI exams. For any coding inquiry not listed please call your Marketing Team Member at 858 658 6500.

HEAD/NECK & NEURO	EXAM TO ORDER	SYMPTOMS/CONCERNS		CPT CODE
	CT head, brain w/ & w/o contrast	<ul style="list-style-type: none"> • Ataxia • CVA • Headaches 	<ul style="list-style-type: none"> • Brain tumor • Dementia 	70470
		(Contrast - depends on associated clinical history)		
	CT head, brain w/o contrast	<ul style="list-style-type: none"> • Ataxia • Dementia • Normal pressure hydrocephalus (NPH) 	<ul style="list-style-type: none"> • CVA • Headaches • Traumatic brain injury (acute) 	70450
		(Contrast - depends on associated clinical history)		
	CT maxillofacial w/o contrast	<ul style="list-style-type: none"> • Possible fracture 	<ul style="list-style-type: none"> • Trauma 	70486
	CT orbit w/o contrast	<ul style="list-style-type: none"> • Fracture • Trauma 	<ul style="list-style-type: none"> • Swelling 	70480
	CT sinus w/o contrast	<ul style="list-style-type: none"> • Facial pain 	<ul style="list-style-type: none"> • Sinusitis 	70486
	CT soft tissue neck w/ contrast	<ul style="list-style-type: none"> • Lymphadenopathy • Swelling 	<ul style="list-style-type: none"> • Mass 	70491
	CT soft tissue neck w/o contrast	<ul style="list-style-type: none"> • Contraindication to iodine (consider MRI) • Salivary gland stone 		70490
	CT temporal bones w/o contrast	<ul style="list-style-type: none"> • Earache • Hearing loss 	<ul style="list-style-type: none"> • Cholesteatoma 	70480

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
CHEST	CT angiography chest	<ul style="list-style-type: none"> • Pulmonary embolism • Elevated D-Dimer • Aneurysm • Ascending aorta or aortic arch dissection • Chest pain • Dyspnea 	71275
	CT chest high-resolution chest w/o contrast	<ul style="list-style-type: none"> • Interstitial lung disease 	71250
	CT low dose lung screening	<ul style="list-style-type: none"> • Low dose lung cancer screening • Asymptomatic patients only • Patient age between 50-77 years • Minimum "20+ - Pack Year" smoker • Less than 15 years since quit smoking 	71271
	CT chest w/ contrast	<p>Preferred</p> <ul style="list-style-type: none"> • Abnormal chest x-ray • Pleural effusion • Follow up for known neoplasm • Adenopathy • Lung cancer • Chest pain • Dyspnea • Pulmonary mass • Cough • Pneumonia 	71260
	CT chest w/o contrast	<ul style="list-style-type: none"> • Nodule follow-up • Contraindication to iodine 	71250
ABDOMEN	CT abdomen w/ & w/o contrast	<ul style="list-style-type: none"> • Adrenal mass • Pancreatic mass • Pancreatitis • Hepatic mass (dedicated liver study) • Renal mass • Upper abdominal pain 	74170
	CT abdomen w/o contrast	<ul style="list-style-type: none"> • Contraindication to iodine (consider MRI) 	74150

EXAM TO ORDER		SYMPTOMS/CONCERNS	CPT CODE
ABDOMEN & PELVIS	CT abdomen/pelvis w/ contrast	<i>Preferred</i> <ul style="list-style-type: none"> • Abdominal distension • Adenopathy • Bowel obstruction or perforation • Diverticulitis • Mass • Abdominal pain (upper or lower) • Appendicitis • Cancer • Constipation • Lymph node enlargement • Pelvic pain 	74177
	CT abdomen/pelvis w/o contrast	<ul style="list-style-type: none"> • Abdominal or pelvic pain • Contraindication to iodine (consider MRI) 	74176
	CT abdomen/pelvis w/o contrast	<ul style="list-style-type: none"> • Flank pain • Suspected renal stones or follow-up 	74176
	CT colonography diagnostic	<ul style="list-style-type: none"> • Failed or contraindication to traditional colonoscopy due to: <ul style="list-style-type: none"> - Rectal bleeding, tortuous colon, or inability to tolerate sedation 	74261
	CT colonography screening	<ul style="list-style-type: none"> • Colon cancer screening 	74263
	CT small bowel w/ contrast	<ul style="list-style-type: none"> • Anemia • Chronic GI bleed • Small bowel mass • Bowel obstruction • Crohn's disease 	74177
	CT urogram w/ & w/o contrast	<ul style="list-style-type: none"> • Dysuria • Hematuria • Flank pain • UTIs 	74178

	EXAM TO ORDER	SYMPTOMS/CONCERNS		CPT CODE
SPINE	CT cervical spine w/o contrast	<ul style="list-style-type: none"> • Compression fracture • Trauma (Cervical Spine) 	<ul style="list-style-type: none"> • Neck pain 	72125
	CT lumbar spine w/o contrast	<ul style="list-style-type: none"> • Compression fracture (Lumbar Spine) • Low back pain 	<ul style="list-style-type: none"> • Trauma (Lumbar Spine) 	72131
OTHER	<i>**Must specify anatomy to be evaluated (Knee, Ankle, Femur, etc.)</i>			
	CT extremity LOWER w/o contrast	<ul style="list-style-type: none"> • Fracture • Swelling 	<ul style="list-style-type: none"> • Pain 	73700
	CT extremity UPPER w/o contrast	<ul style="list-style-type: none"> • Fracture • Swelling 	<ul style="list-style-type: none"> • Pain 	73200

CT ANATOMY - CPT CODES

BRAIN / HEAD

wo	70450
w/wo	70470
CTA Brain/Head (w/)	70496

ORBITS

wo	70480
w/	70481
w/wo	70482

PETROUS/TEMPORAL BONE (IAC)

wo	70480
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SINUSES

wo	70486
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NECK, SOFT TISSUE

wo	70490
w/	70491
w/wo	70492

3-D RECONSTRUCTION

Add to Any Exam	76377
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UPPER EXTREMITY

wo	73200
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LOWER EXTREMITY

wo	73700
Angio	75635
(scanning bilateral "runoff" is usually preferred)	

SPINE

Cervical wo	72125
Thoracic wo	72128
Lumbar wo	72131

LUNG

Low Dose Lung Screening	71271
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CT COLONOGRAPHY

Screening	74263
Diagnostic	74261

BONE DENSITY SCREENING

QCT	77078
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HEART

CACS (wo)	75571
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CHEST

w/	71260
wo	71250
Angio (w/)	71275

ABDOMEN

wo	74150
w/wo	74170
Angio / AAA (w/)	74175
Angio Aorta Runoff (w/)	75635

PELVIS

wo	72192
w/	72193

ABDOMEN AND PELVIS

w/	74177
w/wo	74178
Renal Stone (wo)	74176
Urogram (w/wo)	74178
Small Bowel (w/wo)	74178

COMBINATION CODES

NECK, CHEST, ABDOMEN, PELVIS

w/wo	70491, 71260, 74178
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CHEST, ABDOMEN, PELVIS

wo	71250, 74176
w/wo	71260, 74178

CHEST AND ABDOMEN

w/wo	71260, 74170
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ABDOMEN AND PELVIS (ANGIO)

w/wo	74174
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ABBREVIATION KEY

wo	= without IV contrast
w/	= with IV contrast
w/wo	= with & without IV contrast
CACS	= Coronary Artery Calcium Score
CCTA	= Coronary CT Angiogram

*These CPT codes represent the most commonly ordered CT exams. For an coding inquiry not listed please call for assistance 858 658 6500.

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
NECK	US neck soft tissue	<ul style="list-style-type: none"> Palpable head, face or neck mass (describe area) 	76536
	US thyroid	<ul style="list-style-type: none"> Goiter Palpable neck mass (describe on head, face, or neck) Parotid, abnormal thyroid tests Thyroidmegaly 	76536
CHEST	US chest	<ul style="list-style-type: none"> Palpable mass, chest wall and upper back (describe location) Pleura - Fluid 	76604
ABDOMEN	US abdominal complete	<ul style="list-style-type: none"> Abnormal liver tests Epigastric pain Hepatitis Ascites Fatty liver Jaundice Nausea Pain <p>Test includes the liver, pancreas, gallbladder, kidneys, aorta, and spleen. If abdominal and kidney (renal) are ordered together use abdomen (76700) and pelvic LTD (76857) to include bladder images.</p>	76700
	US abdominal LTD	<ul style="list-style-type: none"> Ventral hernia Quadrant pain Single organ evaluation such as liver or gallbladder Palpable mass lower abdominal and lower back (describe location) 	76705
	Non-vascular extremity joint	Inguinal and femoral hernia	76882

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
ABDOMEN	US aorta screening	<ul style="list-style-type: none"> • Aorta screening 	76706
	US retroperitoneal limited/ aorta	<ul style="list-style-type: none"> • Abdominal aortic aneurysm (AAA) • Symptomatic of aorta 	76775
	US renal retroperitoneal	<ul style="list-style-type: none"> • Abnormal kidney labs • Dysuria includes bladder and pre & post void measurements • Calculus of kidney stones • Flank Pain • Hydronephrosis • Hematuria • Mass or cyst • CKB • UTI <p>If clinical history suggests urinary tract pathology, then a complete evaluation of the kidneys and urinary bladder will be included in the exam.</p>	76770
PELVIS	US pelvic (female) transabdominal and transvaginal (<i>Patient or doctor may specifically request no transvaginal due to patient age (under 18 years old), pregnancy or comfort.</i>)	<ul style="list-style-type: none"> • Bleeding • Endometriosis • Female pelvis to view uterus and ovaries • Lower abdominal and pelvic pain • Bloating • Fibroids • Excessive or frequent menstruation • Leiomyoma • Mass 	76856, 76830
	US pelvic (female and male) (<i>Transabdominal only, NO transvaginal included</i>)	<ul style="list-style-type: none"> • Pelvic pain • Irregular bleeding • Fibroids • Mass • Bloating • Abscess • Free Fluid • Male pelvis bladder 	76856
	US pelvic LTD	<ul style="list-style-type: none"> • Bladder • Soft palpable mass, pelvic wall and buttocks (describe location) • Urinary tract problems • To evaluate bladder in addition to abdominal US 	76857
	US scrotal (doppler required)	<ul style="list-style-type: none"> • Mass • Pain • Swelling and tenderness 	76870, 93976

EXAM TO ORDER		SYMPTOMS/CONCERNS	CPT CODE
VASCULAR	US arterial - lower extremity only <i>*Always includes bilateral extremity unless amputation.</i>	<ul style="list-style-type: none"> • Cellulitis • Edema • PVD or PAD (Peripheral vascular/arterial disease) 	<ul style="list-style-type: none"> • Claudication • Extremity pain <p>93925 Bilateral 93926 Unilateral</p>
	US carotid duplex arteries bilateral	<ul style="list-style-type: none"> • Bruit • Hypercholesteremia • Trauma 	<ul style="list-style-type: none"> • Diplopia • Hyperlipidemia • Vertigo <p>93880</p>
	US extremity duplex scan of the veins - upper or lower	<ul style="list-style-type: none"> • Redness • Tenderness in both legs • Swelling in extremity • Pain in extremity <p><i>*Please indicate upper or lower extremity, right or left, and if the study is for venous reflex.</i></p>	<ul style="list-style-type: none"> • Numbness • Warm limb • Thrombosis <p>93970 Bilateral 93971 Unilateral</p>
OTHER	US non-vascular extremity LTD	<ul style="list-style-type: none"> • Lumps • Soft tissue masses on extremities and axilla (document specific area of concern) 	76882

EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
BONE MINERAL DENSITOMETRY	DEXA, Bone Density, one or more sites (hips, pelvis, spine)	77080
	CT, Bone Density, QCT	77078

EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
PREGNANCY	<ul style="list-style-type: none"> Pregnancy LESS than 14 weeks Fetal demise <p>Please include last menstrual period or established estimated date of delivery on all exams (less than 14 weeks). <i>*Preferred exam to include EV for early OB.</i></p>	76801, 76817
	<ul style="list-style-type: none"> Pregnancy GREATER than 14 weeks Evaluation of fetal growth <p>Please include last menstrual period or established estimated date of delivery for OB ultrasound (more than 14 weeks or for multiple fetus).</p>	76805, 76810
	<ul style="list-style-type: none"> Multiple fetus US obstetrical less than 14 weeks 	76801 (first) 76802 (additional)

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
MAMMOGRAM Includes Computer Aided Detection	Screening: Bilateral Annual	<ul style="list-style-type: none"> Asymptomatic Women Age 40+ (<i>with or without Breast Implants</i>); or for complaint of Generalized Pain/Burning (<i>without Palpable Mass</i>) 	77067
	Diagnostic: Unilateral Annual	<ul style="list-style-type: none"> Age 30+ Patients that are Symptomatic OR Asymptomatic with personal history of breast cancer Lump, Mass, Focal Pain or Spontaneous Nipple Discharge (<i>Clear or bloody</i>) Diagnostic Mammogram also requires Breast Ultrasound (Complete US, 76641) (Limited US, 76642) 	77065+ Complete US, 76641 OR Limited US, 76642
	Diagnostic: Bilateral Annual	<p><i>*Breast US is ordered for affected laterality only. Order Bilateral Breast US only when patient symptoms are bilateral.</i></p> <ul style="list-style-type: none"> Nipple Retraction or Symptoms of Mastitis do not require US and are evaluated with Diagnostic MG, Bilateral, Only 	77066+ Complete US, 76641 OR Limited US, 76642
	High Risk Breast Assessment	<ul style="list-style-type: none"> Family history of breast cancer: (Self or family member known to carry the BRCA 1/BRCA 2 gene) 	98968
TOMOSYNTHESIS	Screening: Bilateral Annual	<ul style="list-style-type: none"> All Asymptomatic Women; Age 40 and older 	77063
	Diagnostic: Bilateral Annual	<ul style="list-style-type: none"> Symptomatic Women; Age 40 and older 	77062
	Diagnostic: Unilateral	<ul style="list-style-type: none"> Symptomatic Women; Age 40 and older 	77061

EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
BREAST ULTRASOUND	Complete	76641 (unilateral) 76641, 50 (bilateral)
	Limited <ul style="list-style-type: none"> Focused exam of the breast that is limited to no more than three quadrants of the breast, retroareolar region, and axilla Palpable mass, women age 29 and younger <p><i>*Breast US is ordered for affected laterality only. Order Bilateral Breast US only when patient symptoms are bilateral. (A Mammogram is not recommended as initial exam.)</i></p>	76642 (unilateral) 76642, 50 (bilateral)
OTHER - MRI	MRI Breast (in addition to - not as a replacement for) Annual Screening Mammography or Tomosynthesis <ul style="list-style-type: none"> High Risk Patients: <ul style="list-style-type: none"> BRCA 1 or 2 carrier History of chest radiation from ages 10-30 Lifetime risk of breast cancer 20-25% or greater Untested patient w/ 1st degree relative positive for BRCA 1 or 2 Dense Breast evaluation Evaluation suspected Breast Cancer Assessment of breast implants (Silicone/Saline) Preoperative evaluation of newly diagnosed breast cancer Evaluation of inconclusive clinical or imaging findings Breast Implant Integrity. Without contrast only. 	<p>Diagnostic: 77048* Unilateral with and without contrast 77049* Bilateral with and without contrast</p> <p>For Breast Implant Integrity: 77046 Unilateral without contrast 77047 Bilateral without contrast</p> <p>(*Studies performed w/wo contrast, including CAD-Computer Aided Detection.)</p>

***Both code definitions include exam of the Axilla, if performed.*

FEMALE PATIENT	PATIENT AGE	PATIENT HISTORY		RECOMMENDED EXAM(S)		
		ASYMPTOMATIC	SYMPTOMATIC	SCRN or DIAG	MODALITY	EXAM DESCRIPTION
	30 years and Older	Routine Annual Exam (No Breast Symptoms)		Screening	MG	Screening Mammogram (77067) or 3D Tomosynthesis, Bilateral (77063)
		Routine Annual Exam with Breast Implants (No Breast Symptoms)		Screening	MG	Screening Mammogram (77067) or 3D Tomosynthesis, Bilateral (77063)
		Personal History of Breast CA > 3 years		Screening	MG	Screening Mammogram, Bilateral (770677) for Personal Hx Breast CA > 3yrs - Lumpectomy
		Personal History of Breast CA < 3 years		Diagnostic	MG	*Diagnostic Mammogram, Bilateral (77066) - Lumpectomy *Diagnostic Mammogram, Unilateral (77065) - Mastectomy
			Generalized Pain or Burning (No Palpable Mass)	Screening	MG	Screening Mammogram, Bilateral (77067)
			Lump, Mass or Focal Pain	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066)
					US	Ultrasound Breast, Limited (76442) (Affected Side(s))
			Nipple Retraction (New Onset Only)	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066)
					US	Ultrasound Breast, Limited (76442) (Affected Side(s))
			Spontaneous Nipple Discharge (Clear or Bloody)	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066) (Breast US not needed)
			Symptoms of Mastitis (Inflammation/Infection)	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066)
					US	Ultrasound Breast, Limited (76442) (Affected Side(s)) (US is recommended)
	29 years and Younger		Any Breast Symptoms	N/A	US	Ultrasound Breast, Limited (76642) (Affected Side(s)) Note: Radiologist will make recommendation for MG or other exam, if required, based upon US findings.

MALE PATIENT	PATIENT AGE	PATIENT HISTORY		RECOMMENDED EXAM(S)		
		ASYMPTOMATIC	SYMPTOMATIC	SCRN or DIAG	MODALITY	EXAM DESCRIPTION
	19 years and Younger		Gynecomastia (Palpable Lump)		US	Ultrasound Breast, Limited (76642) (Affected Side(s)) <i>Note: Technologist will scan the contralateral breast for comparison purposes. Exam charges will only be for the ordered exam.</i>
			Palpable Lump/Mass (Not Gynecomastia)		US	Ultrasound Breast, Limited (76642) (Affected Side(s)) <i>Note: Technologist will scan the contralateral breast for comparison purposes. Exam charges will only be for the ordered exam.</i>
	20 years and Older		Gynecomastia (Palpable Lump)	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066)
					US	Ultrasound Breast, Limited (76642) (Affected Side(s)) <i>Note: Technologist will scan the contralateral breast for comparison purposes. Exam charges will only be for the ordered exam.</i>
			Palpable Lump/Mass (Not Gynecomastia)	Diagnostic	MG	Diagnostic Mammogram, Bilateral (77066)
					US	Ultrasound Breast, Limited (76642) (Affected Side(s)) <i>Note: Technologist will scan the contralateral breast for comparison purposes. Exam charges will only be for the ordered exam.</i>

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
BONE SCANS	Whole Body Bone Scan	<ul style="list-style-type: none"> Metastatic disease Paget's disease Bone lesions 	78306
	Limited Bone Scan	<ul style="list-style-type: none"> Occult fracture, stress reaction, arthritis 	78300
	Three Phase Bone Scan	<ul style="list-style-type: none"> Known or suspected joint replacement loosening, Bone graft viability, Avascular necrosis, Reflex Sympathetic Dystrophy (RSD) 	78315
	Limited Bone Scan with SPECT	<ul style="list-style-type: none"> Occult Fracture, stress reaction, arthritis Pars defect 	78803
WHITE BLOOD CELL (WBC) SCANS	White Blood Cell (WBC) Indium-111 (IN-111) Limited	<ul style="list-style-type: none"> Known or suspected infection/inflammation Osteomyelitis 	78800
	White Blood Cell (WBC) Indium-111 (IN-111) Multiple	<ul style="list-style-type: none"> Known or suspected infection/inflammation areas 	78801
	White Blood Cell (WBC) Indium-111 (IN-111) Whole Body	<ul style="list-style-type: none"> Known or suspected infection/inflammation 	78802
PARATHYROID SCAN	Parathyroid Scan	<ul style="list-style-type: none"> Evaluate for parathyroid adenomas and patients with hyperparathyroidism and hypercalcemia. 	78071 (with SPECT)

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
I-131 WHOLE BODY SCANS	Whole Body I-123 Scan Metastatic Survey (with or w/o thyrogen). Thyrogen is given at the referring provider's office	Preferred <ul style="list-style-type: none"> Post thyroidectomy, diagnostic scan for thyroid cancer metastases or residual thyroid tissue. 	78018
	Whole Body I-131 Scan Metastatic Survey (with or w/o thyrogen). Thyrogen is given at the referring provider's office	<ul style="list-style-type: none"> Post thyroidectomy, diagnostic scan for thyroid cancer metastases or residual thyroid tissue. 	78018
THYROID SCANS	Technetium 99m (Tc-99m) Thyroid Scan Only	<ul style="list-style-type: none"> Evaluate thyroid gland structure, location of ectopic thyroid tissue, evaluation of congenital hypothyroidism, evaluation of neck or substernal mass 	78013
	Iodine-123 (I-123) Single 24 Hour Uptake and Scan	<ul style="list-style-type: none"> Suspected hyperthyroidism, thyroid masses, evaluate thyroid nodules function 	78014
	Iodine-123 (I-123) Multiple 4 & 24 Hour Uptake and Scan	<ul style="list-style-type: none"> Suspected hyperthyroidism, thyroid masses, evaluate thyroid nodules function 	78014
THYROID THERAPY	Iodine-131 (I-131) Thyroid Therapy	<ul style="list-style-type: none"> Treatment for Graves Disease, toxic nodules, and nontoxic nodular goiter. Thyroid Cancer, treatment for residual tissue after thyroidectomy. 	79005

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
LUNG SCANS	Lung V/Q (Ventilation and Perfusion)	<ul style="list-style-type: none"> • Suspected pulmonary embolism 	78582
HEPATOBILIARY SCANS	Hepatobiliary Scan	<ul style="list-style-type: none"> • Evaluate for cystic duct obstruction and for acute cholecystitis 	78226
	Hepatobiliary Scan with gallbladder ejection fraction analysis	<ul style="list-style-type: none"> • Evaluate for gallbladder dysmotility or biliary dyskinesia 	78227
GASTRO EMPTYING	Gastric Emptying Study	<ul style="list-style-type: none"> • Evaluate gastric motility and emptying. 	78264
CARDIAC SCANS	Cardiac Blood Pool (MUGA) Scan	<ul style="list-style-type: none"> • Evaluate cardiac function 	78472
LYMPHOSCIN- TIGRAPHY	Lymphoscintigraphy	<ul style="list-style-type: none"> • Lymphatic Imaging 	78195

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
LIVER SCANS	Liver Spleen Scan Without SPECT (Planar)	<ul style="list-style-type: none"> Evaluate focal liver masses such as HCC, FNH, adenoma and hemangioma when MRI is indeterminate. 	78215
	Liver Spleen Scan With SPECT (Tomography)	<ul style="list-style-type: none"> Evaluate focal liver masses such as HCC, FNH, adenoma and hemangioma when MRI is indeterminate. SPECT is preferred over planar study. 	78803
LIVER HEMANGIOMA	Liver Red Blood Cell Scan SPECT	<ul style="list-style-type: none"> Evaluate liver mass for possible hemangioma when MRI is indeterminate 	78803
RENAL SCANS	Renal Flow and Function Without and With Lasix	<p><i>Preferred</i></p> <ul style="list-style-type: none"> Evaluate for renal function, renal ureter obstruction, post surgical evaluation 	78708
	Renal Flow and Function	<ul style="list-style-type: none"> Evaluate renal function 	78707
BRAIN IMAGING	Brain DaTScan	<ul style="list-style-type: none"> Evaluate for Parkinson's Disease, MSA, CBD, and PSP Tremors 	78803, A9584

EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
TUMOR IMAGING WITH FDG	Skull Base to Mid-Thigh <ul style="list-style-type: none"> • Oncology staging, restaging, recurrence, and therapy response (Please refer to the IHS PETCT coverage guide for more information) 	78815, A9552
	Whole Body <ul style="list-style-type: none"> • Oncology staging, restaging, recurrence, and therapy response for melanoma or sarcoma of the long bones 	78816, A9552
TUMOR IMAGING WITH GA-68	Ga-68 Dotatate Scan (Skull to Mid-Thigh) <ul style="list-style-type: none"> • Staging and restaging neuroendocrine tumors 	78815, A9587
BONE SCAN WITH F-18 SODIUM FLUORIDE	Whole Body Bone Scan with F-18 NaF <ul style="list-style-type: none"> • Detection and evaluation of skeletal metastatic disease (more sensitive alternative than conventional bone scans) 	78816, A9580

EXAM TO ORDER		SYMPTOMS/CONCERNS	CPT CODE
BRAIN IMAGING	Brain Scan with FDG	<ul style="list-style-type: none">Evaluate Mild Cognitive Impairment and Dementia. Help differentiate Alzheimer’s Disease from Fronto-Temporal Dementia (FTD)	78814
	Brain Scan with Florbetapir F-18 Amyloid Imaging (Amyvid)	<ul style="list-style-type: none">Evaluate for Alzheimer’s Disease and differentiate from FTD	78814
BREAST CANCER IMAGING	Cerianna	<ul style="list-style-type: none">Estrogen-receptor positive lesions in recurrent or metastatic breast cancer.	78815, A9591
PROSTATE SCAN	PSMA Prostate	<ul style="list-style-type: none">Prostate cancer staging and re-staging. Detection of prostate-specific membrane antigen.	78815, A9595
	Prostate Scan with Fluciclovine F-18 (Axumin)	<ul style="list-style-type: none">Prostate cancer re-staging after patient has completed treatment and has a rising PSA	78815, A9588

Special Requirements for Contrast Exams

MRI Contrast Lab Guidelines:

- Labs for most MRI contrast exams are no longer needed except for the following cases:
 - Labs are required for Gadavist MRI exam if the patient receives more than a single Gadavist dose for a Thoracic Outlet Protocol.
 - Labs are required if Eovist contrast is given to the patient because of one of the following conditions:
 - History of renal disease or surgery on the kidneys
 - Diabetes mellitus
 - History of Hypertension
 - Renal Cancer
 - Recently (within 3 months) had chemotherapy

Current Pre Medication Prescription:

- Prednisone 40mg by mouth taken 12 hours before exam and 2 hours prior to exam. IHS recommends that the referring physician order the prednisone for the patient.

Coag Panel:

- PT, PTT, INR
- STAT COAG PANEL must be drawn the day prior to scheduled procedure, with results received to IHS no later than 9 a.m. on the day of the exam.

Coumadin:

- Patient must discontinue Coumadin 5 days prior to any biopsy. Anti-coagulant medications cannot be discontinued without notification of prescribing physician.

MISSING LABS may result in the rescheduling of the patient exam or changed to a non-contrast exam.

**Dialysis appointment must be scheduled within 24 hours after the examination.*

EXAMS	PATIENT INDICATIONS	CREATININE W/IN 3 MONTHS	COAG PANEL W/IN 30 DAYS	STAT COAG PANEL	DISCONTINUE COUMADIN	NO LABS
MRI with Eovist IV Contrast	Age 70 and over	✓				
	History of kidney/renal disease (any age)	✓				
	Dialysis patient*	✓				
CT with IV Contrast	Age 70 and over	✓				
	History of kidney/renal disease	✓				
	Dialysis patient*	✓				
	Diabetic patient	✓				
CT Guided Biopsy	Standard		✓			
	Patient on Coumadin			✓	✓	
Lines (picc, ports) for replacement, changes, or removals	Standard					✓
	Patient on Coumadin			✓	✓	
Tubes (G tubes, J tubes) for replacement, changes, or removals	Standard		✓			
	Patient on Coumadin			✓	✓	

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
DIAGNOSTIC	Angiography: Illiac Territory		Revasc w/ angio: 37220 Stent w/ angio: 37221 Each addl vess + angio: 37222 Each addl vess + stent + angio: 37223
	Angiography: Femoral-Popliteal Territory	• Pain with ambulation or pain at rest to lower extremities; non-healing wounds; skin discoloration	Initial Vessel: 37224 Atherectomy + angio: 37225 Stent + angio: 37226 Stent + atherec + angio: 37227
	Angiography: Tibial-Peroneal Territory		Initial Vessel: 37228 Atherec + angio: 37229 Stent + angio: 37230 Stent + atherec + angio: 37231 Each addl vess + angio: 37232 Each addl vess+ atherec + angio: 37233 Each addl vess + stent + angio: 37234 Each addl vess + stent + atherec + angio: 37235
PAIN MANAGEMENT	Kyphoplasty	• Back pain stemming from a fracture/ generalized back pain; Spine Malformation	<i>T-Spine:</i> 22513, each add'l level use 22515 (if biopsy is performed on separate vertebrae, use 20225) <i>L-Spine:</i> 22514, each add'l level use 22515 (if biopsy is performed on separate vertebrae, use 20225)
	Vertebroplasty		<i>T-Spine:</i> 22510, each add'l level use 22512 (if biopsy is performed on separate vertebrae, use 20225) <i>L-Spine:</i> 22511, each add'l level use 22512 (if biopsy is performed on separate vertebrae, use 20225)

	EXAM TO ORDER	SYMPTOMS/CONCERNS	CPT CODE
VASCULAR SERVICES	IVC Filter Placement	<ul style="list-style-type: none"> Known DVT; pre-surg and at risk for DVT 	37191: Placement 37192: Repositioning 37210: Removal
	Uterine Fibroid Embolization	<ul style="list-style-type: none"> Heavy menstruation; abdominal pain; disturbance to urinary flow; bloating 	37210
	PICC Line Placement	<ul style="list-style-type: none"> Long-term antibiotics 	<i>Insertion: 36569</i> <i>Fluoro Guidance: 77001</i> <i>US Guidance: 76937</i>
	Venogram	<ul style="list-style-type: none"> Mapping of vessels for pre-op 	Unilateral: 75820, 36005 Bilateral: 75822, 36005 (x2)
	Varicose Vein Ablation Therapy	<ul style="list-style-type: none"> Painful bulging veins in legs 	36482: Chemical adhesive first vein 36483: Chemical adhesive subseq vein 36475: Radiofrequency first vein 36476: Radiofrequency subseq vein
	Port	<ul style="list-style-type: none"> Large volume infusions (ex: chemo) 	36561: Placement 36598: Management 36590: Removal
DRAINAGE/TUBES	Biliary Tube	<ul style="list-style-type: none"> Generalized abdominal pain; imaging/lab values necessitating need 	47533: Placement 47536: Replacement 47537: Removal
	Tunneled Pleural Catheter (ASPIRA)	<ul style="list-style-type: none"> Shortness of breath; frequent occurrence of pleural fluid buildup 	32557: Insertion 32555: Thoracentesis (drainage) 32552: Removal of drain
	Tunneled Pleural Catheter (ASPIRA)	<ul style="list-style-type: none"> Shortness of breath; frequent occurrence of abdominal cavity fluid buildup; bloating; discomfort 	49418: Insertion 49083: Paracentesis (drainage) 49422: Removal
	Gastrostomy Tube	<ul style="list-style-type: none"> Dysphagia 	49440: Insertion 49465: Maintenance 43762: Removal

	BIOPSY CODE	EACH ADD'L
BREAST(S)	Stereotactic 19081	19082
	Ultrasound 19083	19084
	MRI 19085	19086
	Mammographic F/U Mammo 77065 - unilat	77061 - uni tomo
	Puncture Aspiration 19000	19001
	Specimen Radiograph 76098	
FINE NEEDLE ASPIRATIONS	Ultrasound 10005	+10006
	Fluoro 10007	+10008
	CT 10009	+10010
	MRI 10011	+10012

BIOPSY CODE	
BIOPSIES	Abdominal Mass 49180
	Bone Marrow with Aspiration 38222
	Liver 47000
	Renal 50200
	Thyroid 60100

Our Locations

VISTA (ULTRASOUND SERVICES ONLY)

1000 Vale Terrace Drive
Vista, CA 92084

OCEANSIDE (TRI-CITY)

3601 Vista Way, Bldg A, Ste 101
Oceanside, CA 92056

ENCINITAS

477 N. El Camino Real, Bldg A, Ste 102
Encinitas, CA 92024

POWAY

12620 Monte Vista Road, Ste A
Poway, CA 9206

LA JOLLA (GOLDEN TRIANGLE)

4150 Regents Park Row, Ste 195
La Jolla, CA 92037

KEARNY MESA (MRI SERVICES ONLY)

3939 Ruffin Road, Ste 102
San Diego, CA 92123

SAN DIEGO (ALVARADO)

6386 Alvarado Court, Ste 121
San Diego, CA 92120

HILLCREST

150 W. Washington Street
San Diego, CA 92103

LOGAN HEIGHTS (X-RAY/ULTRASOUND ONLY)

1809 National Avenue, Ste 2104
San Diego, CA 92113

NATIONAL CITY (MRI/MAMMOGRAPHY/ULTRASOUND ONLY)

2427 Transportation Ave.
National City, CA 91950

CHULA VISTA (SOUTH BAY)

333 H Street, Ste 1095
Chula Vista, CA 91910



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