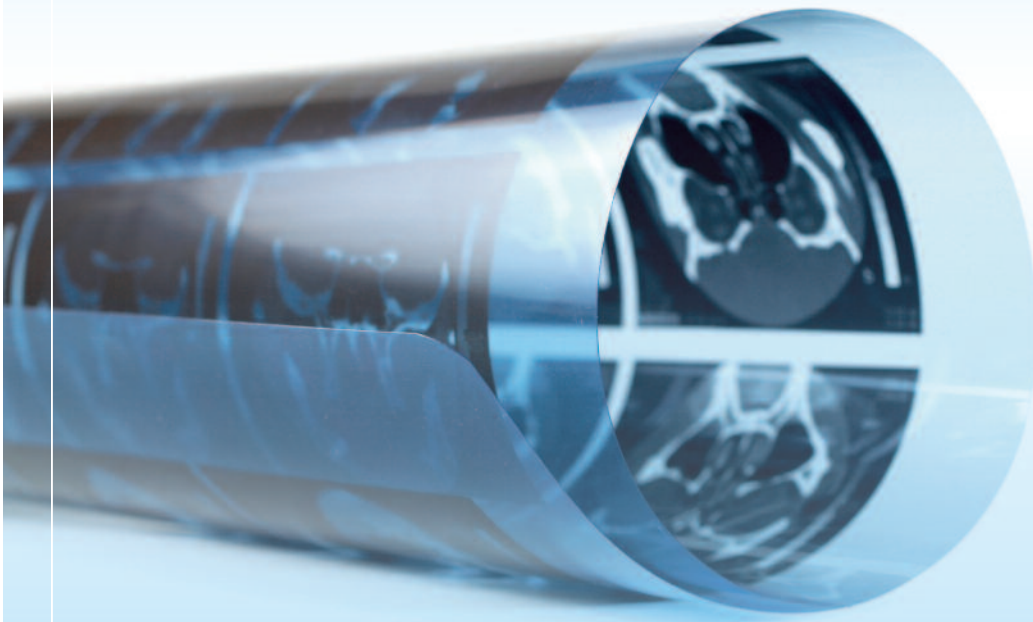



# RADIOLOGY ORDERING GUIDE



BREAST IMAGING | CT | MRI | NUCLEAR MEDICINE | ULTRASOUND

 **Abington Health**  
Abington Memorial Hospital  
Lansdale Hospital

To Schedule an Exam:  
215-481-EXAM (3926)

This comprehensive guide to imaging services was developed to help in prescribing and ordering the correct testing for your patients. It includes indications and recommendations to consider as well as CPT codes to use when ordering the appropriate tests.

We want to provide our patients with the highest level, safest imaging. Our physicians are board certified in diagnostic radiology, and some have additional certifications in specialties such as neuro-radiology and interventional radiology. And we use state-of-the-art imaging technology at all of our locations, at Abington Memorial Hospital and at Lansdale Hospital.

Our goal is to provide proper and complete imaging. In addition to assuring orders are placed correctly, we tailor examinations to each patient's specific condition. It is very important for the radiologist to have information about the specific clinical condition so that appropriate imaging is performed.

When you order a study, please include pertinent history as well as signs or symptoms. Please do not use "R/O" exams such as "rule out tumor" or "rule out anomaly" unless the patient's history and signs/symptoms are included on the order. We appreciate it if you would specify a particular entity or condition upon which you would like us to comment in the report.

We appreciate your trusting your patients' care to us,

Abington Health  
Department of Radiology  
Central Scheduling: 215-481-EXAM (3926)

## TO OUR PHYSICIAN PARTNERS



**Abington Health**

*Abington* Memorial Hospital

*Lansdale* Hospital

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# Radiology Locations

## ABINGTON MEMORIAL HOSPITAL

1200 Old York Road  
Abington, PA

## LANSDALE HOSPITAL

100 Medical Campus Drive  
Lansdale, PA

## ABINGTON HEALTH CENTER - SCHILLING CAMPUS

Blairwood Building  
2701 Blair Mill Road  
Willow Grove, PA

## ABINGTON HEALTH CENTER - WARMINSTER CAMPUS

225 Newtown Road  
Warminster, PA

## ABINGTON PHYSICIANS AT MONTGOMERYVILLE

1010 Horsham Road, Suite 110  
North Wales, PA

OUTPATIENT TESTING	AMH	LH	AH- SCHILLING	AH- WARMINSTER	AH PHYSICIANS	LEVY
X-Ray	■	■	■	■		■
Mammography		■	■	■		
Bone Densitometry (DEXA)		■	■	■		
Ultrasound	■	■	■	■		
Nuclear Medicine	■	■		■	Cardiology	Cardiology
Computed Tomography (CT)	■	■	■	■		
Magnetic Resonance Imaging (MRI)	■	■	■	■	■	
Interventional Radiology (IR)	■	■				
Positron Emission Tomography (PET)			■			

# Breast Imaging

SIGNS & SYMPTOMS	PARAMETERS	ORDER	SUGGESTED TEXT FOR REQUISITION
Annual screening asymptomatic	Annual starting at age 40 No upper age limit	Digital Screening Mammo w/CAD V76.12, V76.11, V16.3	Screening
Implants		Digital Screening Mammo w/CAD V76.10, V76.12 V76.11, V16.3	Screening - implants When scheduling identify that patient has implants and is asymptomatic but needs additional exam time.
Personal history of breast cancer	Mastectomy Opposite Breast	Digital Screening Mammo w/CAD 174.9, V10.3	Personal history of breast cancer; mastectomy
	Lumpectomy>5years since surgery	Digital Screening Mammo w/CAD 174.9, V10.3	Screening: Personal history of breast cancer; lumpectomy
	Lumpectomy<5years since surgery	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD 174.9	Diagnostic: Personal history of breast cancer; lumpectomy
Clinical findings (Symptoms)	Lump	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD 611.72	Diagnostic mammogram, Diagnostic ultrasound, (identify area of lump)
	Nipple Discharge	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD 611.79	Diagnostic mammogram, Diagnostic ultrasound - nipple discharge (identify breast)
	Pain - focal and persistent	Digital Bilat/Unilat Mammo w/CAD 611.71	Diagnostic mammogram, Diagnostic ultrasound - Pain (identify area of pain)
Under 30 years	Symptomatic breast only Pain, lump, discharge	Ultrasound Breast Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD 611.71, 611.72, 611.79	Diagnostic breast ultrasound; Mammogram, if necessary
Short term follow up exam	Recommendation of previous exam 6 month follow up (Birads 3)	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD and/or US Breast 793.80	Diagnostic Mammogram or Ultrasound as recommended by radiologist
Short term follow up exam	Post benign biopsy exam	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD and/or US Breast 793.80	6 month follow up
Recommendation of additional imaging call back exam	Mammography additional exam Ultrasound (BiraD 0)	Digital Bilat/Unilat (Lt/Rt) Mammo w/CAD and/or US Breast 793.80	Call back for diagnostic mammogram  or diagnostic ultrasound
MRI	High risk screening - Life time risk>25%.	MRI Breast Bilat/Unilat (Lt/Rt) Mammo w/CAD 770.59	High risk screening - Life time risk>25%.
	Diagnostic problem		Diagnostic problem
	Breast cancer extent of disease		Breast cancer extent of disease
	Breast implant evaluation		Breast implant evaluation

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# CT General - Head & Neck

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Head	Altered consciousness Altered speech Cerebrovascular disease CVA Dementia Headache Injury/trauma ICH Seizure Shunt position Syncope TIA Vertigo	No	No	CT Head w/o contrast	70450
	Metastasis Neoplasm Meningitis Fever	Yes	No	CT Head w/contrast	70470
Maxillofacial	Injury/trauma Sinusitis	No	No	CT maxillofacial w/o contrast	70486
	Fever Infection/abscess Cellulitis Mass	Yes	No	CT maxillofacial w/contrast	70487
Orbits	Cellulitis Fever Infection/abscess Orbital edema Tumor/neoplasm Vision loss	Yes	No	CT orbits w/contrast	70481
	Diploia Graves disease Injury/trauma	No	No	CT orbits w/o contrast	70480
Temporal Bones	Hearing loss Cholesteatoma Mastoiditis	No	No	CT orbits w/o contrast	70480
	IAC's	Yes	No	CT orbits w/contrast	70481
Soft Tissue Neck	Adenopathy Fever Infection/abscess Injury/trauma Mass/neoplasm Vocal cord paralysis	Yes	No	CT soft tissue neck w/contrast	70491
	When contrast is contraindicated Salivary gland calculi	No	No	CT soft tissue neck w/o contrast	70490
	Salivary gland calculi	Yes	No	CT soft tissue neck w/o & w/contrast	70492

## CT General - Spine

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Cervical Spine	disc herniation / pain	No	No	CT Cervical spine w/o contrast	72125
Thoracic Spine	disc herniation / pain	No	No	CT Thoracic spine w/o contrast	72128
Lumbar Spine	disc herniation / pain	No	No	CT Lumbar spine w/o contrast	72131
Cervical Spine	abscess / mass / infection	Yes	No	CT Cervical spine w/contrast	72126
Thoracic Spine	abscess / mass / infection	Yes	No	CT Thoracic spine w/contrast	72129
Lumbar Spine	abscess / mass / infection	Yes	No	CT Lumbar spine w/contrast	72132

Unless there is a prior contraindication, MRI Spine would be a more optimal exam

## CT General - Chest

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Chest	Bronchiectasis Interstitial Lung DX Follow up pulmonary nodule Pneumothorax	No	No	CT Chest/Thorax w/o contrast	71250
Chest	Atelectasis Cough Emphysema Fever of unknown origin Injury/trauma Infiltrate Lung cancer Lymphangitic spread Mass Pericardial effusion Pleural effusion Pulmonary nodule (first CT scan) Pneumonia	Yes	No	CT Chest/Thorax w/contrast	71260
Chest	SOB Chest pain Pericardial effusion Elevated D-Dimer Hypoxia Recent surgery with new onset SOB	Yes	No	CT Chest/Thorax PE Exam	71260
Chest	Chest pain Thoracic Aortic Aneurysm Thoracic Aortic Dissection	Yes	No	CT Chest/Thorax w/o & w/contrast	71270
SVC Chest Venogram	Pre Op Venous Access Reposition of catheter Thrombus Obstruction	Yes	No	CT Venogram of chest	71260



## CT General - Abdomen & Pelvis

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Abdomen	Renal mass	Yes	Water	CT Abdomen w/o & w/contrast	74170
	Liver mass	Yes	Water	CT Abdomen w/contrast	74160
	Upper abdominal pain Abnormal lab work Jaundice	Yes	Water	CT Abdomen w/contrast	74160
	Pancreatitis / Liver mass Tumor/mass/cancer/mets Weight loss Hernia	Yes	Water	CT Abdomen w/contrast	74160
Abdomen and Pelvis	Abdominal pain Pelvic pain Mass Abnormal labs Abscess Ascites Fever of unknown origin Diarrhea Vomiting Injury/trauma Jaundice Metastasis Nausea Pancreatitis Tumor/mass/cancer/mets Weight loss Hernia	Yes	Yes	CT ABD/Pelvis w/contrast	74177
	Stone protocol Flank pain Abdominal pain, R/O aneurysm Ruptured aneurysm Drop in hemoglobin without trauma Retroperitoneal bleed	No	No	CT ABD/Pelvis w/o contrast	74176
Urogram	Hematuria Hydronephrosis without flank pain	Yes	Water	CT Urogram Abdomen Pelvis	74178
Pelvis	Fracture Trauma	No	No	CT Pelvis w/o contrast	72192
	Pelvic mass Collection Adenopathy Pain	Yes	Yes	CT Pelvis w/contrast	72193
IVC and Pelvic Veins	Pre Op venous access Edema IVC Thrombus	Yes	No	CT ABD/Pelvis w/contrast	74177
Bony Pelvis	Pain Trauma Fracture	No	No	CT Pelvis w/o contrast	72192

## CT General - Extremities

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Upper Extremities	Injury / trauma	No	CT Right or Left Extremity w/o contrast	73200
	Infection / mass	Yes	CT Right or Left Extremity w/contrast	73201
Lower Extremities	Injury / trauma	No	CT Right or Left Extremity w/o contrast	73700
	Infection / mass	Yes	CT Right or Left Extremity w/contrast	73701

## CT Specialty Exams

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
CT Calcium Score	Asymptomatic with low/intermediate risk CAD	No	No	CT Calcium Score Please note: Doctor's office will fax the Cardiac document to the Radiology Clerical Staff fax#: 215-481-4970	CASH PAY
CT Virtual Colon		No	No	CT Colonography Diagnostic Please note: Doctor's office will fax the Colonography document to the Radiology Clerical Staff fax#: 215-481-4503	74261

# CT Angiography (CTA)

BODY PART	REASON FOR EXAM	IV CONTRAST	ORAL CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
CTA Head	Headache Aneurysm Cerebral vascular disease	Yes		CT Angiogram - Head	70496
CTA Head & Neck	Acute Stroke Protocol TIA Cerebral vascular disease	Yes		CT Angiogram - Head	70496
CTA Neck	Carotid Stenosis	Yes		CT Angiogram - Neck	70498
CTA Chest	Thoracic aneurysm Pre or Post Op evaluation	Yes		CT Angiogram Chest w or w/o contrast	71275
CTA Abdomen	Renal Artery Stenosis	Yes		CT Angiogram - Abdomen w/contrast	74175
CTA Abdomen and Pelvis	Pre Op AAA Surgery Post Stent Graft Pre or Post Op Evaluation or mapping Mesenteric ischemia	Yes		CT Angiogram - Abdomen and Pelvis w/o or w/contrast	75635
CTA Bilateral Runoff	Lower extremity ischemia	Yes		CT Angiogram Aorta - Bilat Runoff	75635
CTA Cardiac	Symptomatic with discordant prior test results New onset heart failure Noncoronary cardiac surgery Bypass graft or left main stent >3 mm size Cardiac structure or function Extra cardiac structures	Yes	No	CT Angiography, heart, Coronary Arteries  Please note: Doctor's office will fax the following documents to the Radiology Clerical Staff fax#: 215-481-4970 Appointment Request Form for Cardiac CT. Recent Labs, BUN & Cr (within 90 days). Appointment cannot be scheduled if no recent labs	75574
CT Pulmonary Vein Mapping		Yes	No	CT Heart Structure Morph with  Please note: Doctor's office will fax the following documents to the Radiology Clerical Staff fax#: 215-481-4970 Appointment Request Form for Cardiac CT. Recent Labs, BUN & Cr (within 90 days). Appointment cannot be scheduled if no recent labs	75572

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# MRI General - Head & Neck

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Brain	Aqueductal stenosis, obstructive hydrocephalus, mass also add CSF flow order Follow up tumor, assess for angiogenesis also order Perfusion Deep Brain Stimulator Alzheimer's Changes in Mental Status Confusion Dementia Memory Loss Headaches w/o Focal Symptoms Seizures Stroke CVA TIA Trauma Cranial Nerve Lesions Dizziness IAC/Hearing Loss HIV Vertigo/or Trigeminal Neuralgia/ facial tics,face pain Infection Multiple Sclerosis Neurofibromatosis Pituitary Lesion Elevated Prolactin Adenoma Tumor/Mass/Cancer/Metastasis Vascular Lesions Vision Changes	Yes	MRI Brain w/ and w/o contrast	70553
TMJ	Jaw pain/injury degenerative or inflammatory arthritis	No	MRI TMJ w/o contrast	70336
Orbits	Graves Disease Demyelination/Multiple Sclerosis Diplopia Dysthyroid Eye Disease Trauma Pseudotumor Tumor/Mass/Cancer/Metastasis Vascular Lesions	Yes	MRI Orbit/Face/Neck w & w/o contrast	70543
Soft Tissue Neck	Infection Pain Tumor/Mass/Cancer/Metastasis Vocal Cord Paralysis	Yes	MRI Orbit/Face/Neck w & w/o contrast	70543

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

To schedule an appointment: call **215-481-EXAM (3926)** Direct line for questions: call **215-481-3608**

# MRI General - Spine

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Spine: Cervical	Arm/Shoulder Pain and/or Weakness Degenerative Disease Neck Pain Disc Herniation Radiculopathy	No	MRI Cervical Spine w/o contrast	72141
	Post-Operative (any Hx of cervical surgery) Syrinx Discitis Osteomyelitis Multiple Sclerosis Myelopathy Abscess/Infection Tumor/Mass/Cancer/Metastasis Vascular Lesions/AVM	Yes	MRI Cervical Spine w/ and w/o contrast	72156
Spine: Thoracic	Back Pain Compression Fracture (no Hx of Cancer/Metastasis) Degenerative Disease Disc Herniation Radiculopathy Trauma Vertebroplasty Planning (no Hx of Cancer or Metastasis)	No	MRI Thoracic Spine w/o contrast	72146
	Compression Fracture (with Hx of Cancer/Metastasis) Discitis Abscess/Infection Osteomyelitis Post Operative (any hx of Thoracic Surgery) Osteomyelitis Multiple Sclerosis Myelopathy Abscess/Infection Tumor/Mass/Cancer/Metastasis Vascular Lesions AVM Vertebroplasty Planning (with Hx of Cancer or Metastasis)	Yes	MRI Thoracic Spine w/ and w/o contrast	72157

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

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## MRI General - Spine

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Spine: Lumbar	Back Pain Compression Fracture (no Hx of Cancer/Metastasis) Degenerative Disease Disc Herniation Radiculopathy Spina Bifida, sacral dimple, tethered cord Sciatica Spondylolithesis Stenosis Trauma Vertebroplasty Planning (no Hx of Cancer or Metastasis)	No	MRI Lumbar Spine w/o contrast	72148
	Compression Fracture (with Hx of Cancer/Metastasis) Discitis Abscess/Infection Osteomyelitis Post Operative (any Hx of Lumbar Surgery) Tumor/Mass/Cancer/Metastasis CSF leak order MR Myelogram Vertebroplasty Planning (with Hx of Cancer or Metastasis)	Yes	MRI Lumbar Spine w/ and w/o contrast	72158

## MRI - Spectroscopy

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Spectroscopy	Alzheimer's Dementia Tumor/Mass/Cancer/Metastasis Infection Seizures Encephalopathy Ischemia Hypoxia Multiple Sclerosis Brain Injury	Yes	MRI Spectroscopy w/ and w/o contrast	76390

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## MRI General - Chest

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Brachial Plexus	Brachial Plexus Injury Nerve Avulsion Tumor/Mass/Cancer/Metastasis	Yes	MRI Chest/Mediastinum w/ & w/o contrast	71552
Chest	Pectoralis Major/Ribs Sternoclavicular Joints/ Clavicle/Scapula	No	MRI Chest w/o contrast	71550
Chest	Tumor/Mass/Cancer/Metastasis	Yes	MRI Chest/Mediastinum w/ & w/o contrast	71552
Breast	Implant Rupture	No	MRI Breast w/o contrast Bilateral	77059
	Abnormal Mammogram Dense Breast/High Risk for Mass/Lesion Cancer Palpable Mass	Yes	MRI Breast w/ or w/o Bilateral /Unilateral Specify Lt/Rt	77059
Cardiac	Anomalous Coronary Artery	No	Morphology & Function w/o contrast	75557
	ARVD Sarcoidosis Pericardial Disease Mass Viability Myocardial Infarction	Yes	Morphology & Function w/ and w/o contrast	75561
	Valve Insufficiency/Regurgitation Atrial/Ventricular Septal Defect			75562 in conjunction with 75757 or 75561

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

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# MRI General - Abdomen & Pelvis

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Abdomen	Abnormal Enzymes Fetal MRI MRCP (Biliary/Pancreatic Ducts, Stones, Jaundice) Adrenal Mass Urogram for hematuria (Abd and Pelvis needed) Liver Tumor/Mass/Cancer/Metastasis Abdominal Pain Abscess/Ascites Pancreatic Mass/Lesion Small Bowel Enterography Renal Mass	Yes	MRI Abdomen w/ and w/o contrast	74183
Abdomen	Pregnancy	No	MRI Abdomen w/o contrast	74181
Pelvis	Fracture Pregnancy/and or Evaluate for Placenta Accreta Pubalgia/Sports Hernia Rectus Abdominis Sacroiliac Joints Muscle tear Urethral Diverticulum	No	MRI Pelvis w/o contrast	72195
	Fibroid Urethral diverticulum, Testicles Adenomyosis Endometrioma Osteomyelitis Septic Arthritis Pre/Post Operative Fibroid Embolization Tumor/Mass/Cancer/Metastasis Abscess Ulcer Prostate Cancer Urogram for hematuria (Abdomen and Pelvis needed) Plexopathy	Yes	MRI Pelvis w/ and w/o contrast	72197

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

To schedule an appointment: call **215-481-EXAM (3926)** Direct line for questions: call **215-481-3608**

# MRI General - Extremities

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
Extremity/Non-Joint (includes) Arm, Toe, Hand, Foot Finger, Lower leg, Femur	Stress/Fracture Muscle/Tendon Tear Morton's Neuroma	No	MRI Non-Joint w/o contrast Lower Extremity Upper Extremity Lower Extremity	73718 73218 73718
	Abscess Ulcer Bone Tumor/Mass/ Cancer/Metastasis Cellulitis Fasciitis Myositis Osteomyelitis Soft Tissue/Mass/ Cancer/Metastasis	Yes	MRI Non-Joint w/ and w/o contrast Lower Extremity Upper Extremity	73720 73220
Extremity/Joint (includes) Shoulder, Elbow, Wrist, Hip, Knee, Ankle	Arthritis AVN (Avascular Necrosis) Stress/Fracture Internal Derangement Joint Pain (Specify Joint) Labral Tear Meniscus Tear Muscle Tear Tendon Tear Ligament Tear Cartilage Tear Osteochondritis Dissecans (OCD)	No	MRI Joint w/o contrast Lower Extremity Upper Extremity	73721 73221
Extremity, Joint (includes) Shoulder, Elbow, Wrist, Hip, Knee	Abscess Ulcer Cellulitis Fasciitis Myositis Inflammatory Arthritis Septic Arthritis Tumor/Mass/Cancer/Metastasis Post Operative Knee/Infection	Yes	MRI Joint w/ and w/o contrast Lower Extremity Upper Extremity	73723 73223

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

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## MRI Angiography (MRA/MRV) - Head & Neck

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
MRA Head	Stroke CVA TIA Aneurysm AVM (Arteriovenous Malformation)	No	MRA Head/Brain w/o contrast	70544
	Surgery Hx of Aneurysm Clips / Dissection/vessel injury	Yes	MRA Head/Brain w/ and w/o contrast	70546
MRV Head	Venous Thrombosis	No	MRA Head w/o contrast	70544
MRA Arch & Great Vessels	Stroke CVA TIA Subclavian Steal AVM (Arteriovenous Malformation) Aneurysm	Yes	MRA Neck w/ and w/o contrast	70549
MRA Neck	Dissection/vessel injury Stroke CVA TIA Subclavian Steal AVM (Arteriovenous Malformation) Aneurysm	Yes	MRA Neck w/ and w/o contrast	70549

## MRI Angiography (MRA/MRV) - Chest

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
MRA Chest	Thoracic Aorta (other than heart) Aneurysm Coarctation Vascular Anomalies Dissection Thoracic Outlet Syndrome Pulmonary Embolism AVM (Arteriovenous Malformation) Subclavian Vessels	Yes	MRA Chest w/ and w/o contrast	71555
MRV Chest	Venous Occlusion/Thrombosis AVM (Arteriovenous Malformation)	Yes	MRA Chest w/ and w/o contrast	71555

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

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## MRI Angiography (MRA/MRV) - Abdomen & Pelvis

BODY PART	REASON FOR EXAM	IV CONTRAST	PROCEDURE TO PRE CERT	CPT CODE
MRA Abdomen	Renal Artery Stenosis Renal Failure	No	MRA Abdomen w/o contrast	74185
MRA Abdomen	AAA (Abdominal Aortic Aneurysm) Dissection Mesenteric Ischemia Renal Artery Stenosis	Yes	MRA Abdomen w/ and w/o contrast	74185
	Pre Liver Transplant Pre Kidney Transplant Renal Mass	Yes	Order two exams: MRA Abdomen w/ and w/o contrast MRI Abdomen w/ and w/o contrast	74185 74183
MRV Abdomen	Venous Occlusion Venous Thrombosis Venous Anomaly	Yes	MRA Abdomen w/ and w/o contrast	74185
MRA/MRV Pelvis	AVM (Arteriovenous Malformation) May Thurner Syndrome Venous Occlusion	Yes	MRA Pelvis w/ and w/o contrast	72198
	Aneurysm Pelvic Congestion	Yes	Order two exams: MRA Pelvis w/ and w/o contrast MRI Pelvis w/ and w/o contrast	72198 72197
MRA Run-off (peripheral)	Claudication Cold Foot Pain Gangrene Ulcer	Yes	Order 3 exams MRA Abdomen w/ and w/o contrast MRA Lower extremity w/ and w/o contrast Left MRA Lower extremity w/ and w/o contrast Right	74185 73725 73725
MRA Run-off (peripheral)	Renal Failure Renal Artery Stenosis	No	Order 3 exams MRA Abdomen w/o contrast MRA Lower extremity w/o contrast Left MRA Lower extremity w/o contrast Right	74185 73725 73725
MRA Extremity MRV Extremity	Arterial Occlusion/Stenosis Aneurysm Venous Occlusion/Thrombosis	Yes	MRA Extremity w/ and w/o contrast Upper extremity Lower extremity	73225 73725

Any patient who will be receiving contrast with a history of hypertension, diabetes, kidney or liver disease will need recent (6-12 weeks) labs drawn to include Glomerular Filtration Rate (GFR).

To schedule an appointment: call **215-481-EXAM (3926)** Direct line for questions: call **215-481-3608**

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## Nuclear Medicine - Bone Scan

TEST	COMMON INDICATIONS	CPT CODE
Bone Scan - Whole Body	<ul style="list-style-type: none"> <li>Primary or Metastatic tumors - initial eval or follow up.</li> <li>Pathologic fracture</li> <li>Pain of suspected musculoskeletal etiology.</li> <li>Paget's disease</li> <li>Arthritis</li> <li>Evaluation abnormal findings by other imaging modalities</li> <li>Evaluation abnormal lab findings, elevated alkaline phosphatase</li> <li>Unexplained bone or back pain</li> </ul>	78306
Bone Scan - 3 Phase (triple phase)	<ul style="list-style-type: none"> <li>Stress or occult fractures</li> <li>Musculoskeletal trauma</li> <li>Avascular Necrosis</li> <li>Prosthetic Joint evaluation for loosening or infection.</li> <li>Non-Union fractures</li> <li>Osteomyelitis</li> <li>Charcot's joint</li> <li>Reflex Sympathetic Dystrophy (RSD)</li> </ul>	78315
Bone Scan SPECT	<ul style="list-style-type: none"> <li>Spondylolysis</li> <li>Spondylolisthesis</li> <li>Spinal fractures in pediatric patients</li> <li>Osteoid Osteoma</li> </ul>	78320

## Nuclear Medicine - Brain

TEST	COMMON INDICATIONS	CPT CODE
Brain SPECT	<ul style="list-style-type: none"> <li>Alzheimer's Disease</li> <li>Dementia</li> <li>Memory Loss</li> <li>Cerebrovascular disease</li> <li>Lyme's Disease</li> <li>Seizure</li> <li>Brain Death</li> </ul>	78607
Cisternogram	Normal Pressure Hydrocephalus	78630 and 62311
Cerebrospinal Fluid Leak Study	CSF Leak	78650 and 62311

## Nuclear Medicine - Cardiovascular

TEST	COMMON INDICATIONS	CPT CODE
Muga Scan	Evaluate cardio toxic effects of Chemotherapy Quantify LVEF Cardiomyopathy Evaluate regional wall motion abnormality and LVEF in patients with CAD	78472
Myocardial Perfusion Imaging SPECT  **Physician must specify Exercise Cardioline or Pharmacologic Cardioline on prescription**	Chest Pain CAD Abnormal EKG Coronary Stenosis Post Myocardial Infarction Shortness of Breath Post Stent Post CABG Diabetes Hypertension Hypercholesterolemia	78452
Myocardial Rest Thallium	Viability of Myocardium	78452

## Nuclear Medicine - Hepatobiliary (Gallbladder)

TEST	COMMON INDICATIONS	CPT CODE
Hepatobiliary Imaging with SPECT, flow and static imaging	Adenoma Focal Nodular Hyperplasia	78206
Hepatobiliary System Imaging (Gallbladder Scan, HIDA Scan)	Acute Cholecystitis Evaluate Bile Leak Chronic Cholecystitis	78226
Hepatobiliary System Imaging w/ Pharmacologic Intervention (Gallbladder Scan w/ CCK)	Acute Cholecystitis Chronic Cholecystitis	78227



## Nuclear Medicine - Abscess Imaging

TEST	COMMON INDICATIONS	CPT CODE
Gallium Scan	Sarcoid/Sarcoidosis Fever of Unknown Origin Vertebral Osteomyelitis	Whole Body 78806 SPECT 78807
In-111 White Blood Cell Scan	Infection Osteomyelitis Infection of prosthetic joint Evaluation of vascular graft infection Renal Infection Bowel Abscess Evaluation of diabetic ulcer	Limited 78805 Whole Body 78806
Bone Marrow Imaging	Osteomyelitis/Infection	Multi Area 78103 Whole Body 78104

## Nuclear Medicine - Gastrointestinal Scans

TEST	COMMON INDICATIONS	CPT CODE
Gastric Reflux Study	Gastro-Esophageal Reflux Aspiration	78262
Gastric Emptying Scan	Nausea, Vomiting Gastroparesis Feeling of fullness Dumping Syndrome Gastric outlet obstruction	78264
Gastrointestinal Bleeding Scan	GI Bleeding	78278
Meckels Scan	Meckel's diverticulum	78290
Liver Imaging SPECT with Vascular Flow	Adenoma Focal Nodular Hyperplasia Accessory Spleen Trauma to Liver or Spleen	78206
Hemangioma Imaging - SPECT with Vascular Flow	Cavernous Hemangioma	78206

## Nuclear Medicine - Lung Scan

TEST	COMMON INDICATIONS	CPT CODE
Lung Scan - Aerosol and Perfusion	Acute or Chronic Pulmonary Embolus	78582
Quantitative Lung Scan - Aerosol and Perfusion	Planned lung resection Radiation Therapy	78598

## Nuclear Medicine - Renal / Bladder / Testicular Scan

TEST	COMMON INDICATIONS	CPT CODE
Renal Scan Flow and Function	Evaluate renal perfusion and function	78707
Diuretic Renal Scan Flow and Function	Urinary tract obstruction	78708
Captopril Renal Scan	Renovascular Disease Hypertension Renal Artery Stenosis	78708
Renal SPECT - (DMSA Renal)	Parenchymal scarring Pyelonephritis Cortical Lesion	78710
Radionuclide Voiding Cystogram (Radionuclide VCUG)	Evaluate Vesicoureteral Reflux	78740 and 51702
Testicular Imaging with vascular flow	Testicular torsion Acute epididymitis	78761

## Nuclear Medicine - Thyroid Uptake & Scan

TEST	COMMON INDICATIONS	CPT CODE
I-123 Thyroid Multiple Uptake and Scan	Determination of thyroid size, function, and position Evaluation of functional status of thyroid nodules/mass Multinodular thyroid gland Evaluation of patients with history of head and neck irradiation Evaluate for Hyperthyroidism, Graves Disease, Toxic Nodular Goiter Abnormal thyroid lab results Subacute Thyroiditis	78007
I-131 Thyroid single uptake & scan	Detection of substernal thyroid tissue	78006

## Nuclear Medicine - Parathyroid Scan

TEST	COMMON INDICATIONS	CPT CODE
Parathyroid Scan	Primary Hyperparathyroidism Increased PTH levels Hypercalcemia Parathyroid Adenoma Parathyroid Hyperplasia	78070

## Nuclear Medicine - I-131 Whole Body Scans

TEST	COMMON INDICATIONS	CPT CODE
I-131 Whole Body Scan with Dosimetry	Thyroid Cancer	78018, 78020, and 77300
I-131 Thyrogen Whole Body Scan with Dosimetry	Thyroid Cancer	78018, 78020, and 77030
I-123 Thyrogen (Low Risk) Whole Body Scan	Thyroid Cancer	78018
I-131 Thyrogen Whole Body Scan	Thyroid Cancer	78018
I-131 Follow up Whole Body Scan Post therapy	Thyroid Cancer	78018

## Nuclear Medicine - Sentinel Node

TEST	COMMON INDICATIONS	CPT CODE
Sentinel Node Lymphoscintigraphy	Melanoma	78195
Sentinel Node Injection Only	Breast Cancer	38792

## Nuclear Medicine - Salivary Gland

TEST	COMMON INDICATIONS	CPT CODE
Salivary Gland Imaging	Evaluate functional status of salivary glands Detect and evaluate duct patency Mass/Lesion Sjogren's Syndrome	78231

## Nuclear Medicine - Red Cell Mass

TEST	COMMON INDICATIONS	CPT CODE
Red Blood Cell Mass	Polycythemia Vera	78122

## Nuclear Medicine - Tumor Imaging

TEST	COMMON INDICATIONS	CPT CODE
Octreotide Scan	Primary and Metastatic Neuroendocrine tumors bearing somatostatin receptors Carcinoid Islet Cell Carcinoma Gastrinoma Glucagonoma Insulinoma VIPoma Medullary thyroid Carcinoma Neuroblastoma Paraganglioma Pheochromocytoma Undifferentiated APUDoma	78803 and 78804
Prostascint Scan	Rising PSA post radical prostatectomy Newly diagnosed Prostate Cancer pts with high risk for metastatic disease	78803 and 78804

# Nuclear Medicine - Therapy

TEST	COMMON INDICATIONS	CPT CODE
I-131 Therapy for Thyroid Cancer (Radiopharmaceutical Therapy, by oral administration)	Thyroid Cancer	79005
I-131 Therapy for Hyperthyroidism (Radiopharmaceutical Therapy, by oral administration)	Hyperthyroidism Graves Disease Toxic Nodular Goiter	79005
Quadramet Therapy Radiopharmaceutical Therapy, by IV administration)	Bone Pain Palliation due to osteoblastic metastases	79101

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## Ultrasound - Neck

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Neck, face, soft tissue	Mass Abnormalities detected on other imaging (CT/MRI/PET/NUCLEAR) Enlarged thyroid gland Multinodular goiter Abnormal lab tests (elevated calcium levels/abnormal thyroid blood work) History thyroid cancer Parathyroid adenomas Hyper or hypothyroidism Follow up patient on suppression	None	76536
Carotid Artery	Syncope Hemiplegia Difference in arm blood pressure Aphasia Ataxia Reversible ischemic neurological deficit (RIND) Bruit Vertigo/dizziness (non medicare) Memory loss (non medicare) Dementia (non medicare) Transient ischemic attack (TIA) Cerebral vascular attack (CVA) Amaurosis Fugax Transient visual loss Transient retinal occlusion Carotid trauma	No turtlenecks, high collar shirts, necklaces or ties	93880 93882

## Ultrasound - Chest (including Breast)

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Chest	Pleural effusion Superficial mass	None	76604
Breast	Abnormal mammographic findings (differentiate cyst from solid lesion) Palpable mass Targeted area of pain Nipple discharge Infection (abscess) Implants- with clinical indications (non medicare)	None	76645
Aorta (retroperitoneal limited)	Aortic aneurysm (follow up to AAA) Pulsatile aorta Bruit	NPO 6 hours prior	76775 G0389 ???

## Ultrasound - Abdomen

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Complete Abdomen	Cirrhosis or hepatic disease (hepatitis/portal hypertension) Abdominal distention (fluid collection) ascites Pain (abdominal/epigastric) Nausea/Vomiting Gallstones Personal history of cancer- Metastasis Obstructive symptoms of the biliary system (jaundice) Abnormal diagnostic tests (follow up to a CT/MRI) Gastroesophageal reflux (GERD) Splenomegaly Abnormal liver functions (elevated LFT's/fatty liver) Hepatomegaly	NPO 6 hours prior	76700
Limited Abdomen - Single Organ or Quadrant	All of the above	NPO 6 hours prior	76705
Abdominal Doppler	Cirrhosis or hepatic disease (hepatitis/portal hypertension) Ascites Varices Portal vein thrombosis Budd-Chiari syndrome Intrahepatic Portosystem Venous Shunts (TIPS) Hepatomegaly Splenomegaly	NPO 6 hours prior	93975 93976



# Ultrasound - Pelvis

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Complete Pelvis	<ul style="list-style-type: none"> <li>Pain (pelvic or adnexal tenderness)</li> <li>Ovarian cyst</li> <li>Ovarian torsion</li> <li>Fibroid uterus</li> <li>Enlarged uterus or ovary</li> <li>Adnexal abnormalities</li> <li>Dysfunctional uterine bleeding</li> <li>Post menopausal bleeding</li> <li>Perocious puberty</li> <li>Polycystic ovary disease (PCOD)</li> <li>Limited physical exam (MD unable to perform pelvic exam)</li> <li>Amenorrhea</li> <li>Dysmenorrhea</li> <li>Menorrhagia</li> <li>Menometrorrhagia</li> <li>Abnormal diagnostic test (follow up to CT/MRI)</li> <li>Localization of intrauterine contraceptive device</li> <li>Excessive bleeding, pain or signs of infection after pelvic surgery, delivery or abortion</li> </ul>	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76856
Limited Pelvis (bladder)	<ul style="list-style-type: none"> <li>Urinary retention</li> <li>Post void residual</li> <li>Enlarged prostate</li> <li>Bladder outlet obstruction</li> </ul>	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76857
Scrotum	<ul style="list-style-type: none"> <li>Pain</li> <li>Trauma</li> <li>Torsion</li> <li>Mass</li> <li>Varicocele</li> <li>Epididymitis</li> <li>Hydrocele (swelling)</li> <li>Undescended testes</li> </ul>	None	76870

## Ultrasound - Urinary Tract

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Kidney and Bladder (retroperitoneal complete)	Hydronephrosis (obstruction) Neurogenic bladder Bladder diverticula Urinary tract infection/cystitis/pyelonephritis Hematuria Urinary retention Renal Stone	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76770
Kidney (retroperitoneal limited)	Flank pain Chronic renal medical disease Renal failure Trauma Renal cancer Trauma Polycystic kidney disease (PCKD) Hydronephrosis (obstruction) Renal Stone Elevated lab values (BUN or creatinine)	None	76775
Renal transplant	Post renal transplant Urinoma Lymphocele Pain Elevated lab values (creatinine) Poor renal function	NPO 6 hours prior to appointment	76776
Renal Doppler	Renal artery stenosis Renal artery aneurysm Renal vein thrombosis Hypertension Abnormal lab values (BUN or creatinine)	NPO 6 hours prior to appointment	93975 93976

# Ultrasound - Extremity

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Upper or Lower Extremity (non vascular) limited	Joint Pain Tendon pain/tendonitis Fluid Collection (Baker's cyst/Ganglion cyst) Mass Ligament/tendon/rotator cuff/carpal tunnel (needs to be performed with MSK radiologist present) Please call to schedule: 215-481-2829 (AMH) or 215-361-4518 (LH)	None	76882
Upper or Lower Extremity Venous Doppler	Edema/swelling Calf pain (non medicare) Follow up DVT (site specific) Positive Homan sign (shooting pain with foot dorsiflexion) Trauma to vein (site specific)	None	93970-93971
Upper or Lower Extremity Arterial Doppler (PVR)	Claudication/pain with walking Decreased or absent pulses Gangrene Ischemic rest pain Artherosclerosis	None	93922-93923
Upper or Lower Extremity Arterial Duplex	Aneurysm (femoral, popliteal or upper extremity) Trauma to artery (site specific) Arterial embolus (site specific) Vein graft surveillance PTFE graft	None	93925-93926 93930-93931
Venous Reflux	Postphlebotic ulcer Varicose veins w/ pain OR ulcer	None	93970-93971
Venous Mapping	Pre-operative exam for end stage renal disease Pre-operative exam for cardiovascular surgery	None	93971

# Ultrasound - Pregnancy

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Pregnancy First Trimester (14 weeks or less)	Normal supervision of pregnancy Size and dating Vaginal bleeding Ectopic No fetal heart tones	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76801
Pregnancy After First Trimester (greater than 14 weeks)	Normal supervision of pregnancy Size greater than dates Cervical incompetence Vaginal bleeding Size smaller than dates *Determining fetal sex is not considered a medical necessity	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76805
Pregnancy, Limited (only after complete has been documented at our facility)	Fetal heart Placental location Fetal position Qualitative amniotic fluid volume	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76815
Pregnancy Follow Up (only after complete has been documented at our facility)	Re-evaluation of suspected or confirmed fetal abnormality	Fill bladder with 32 oz of clear liquids 45 minutes prior to appointment. DO NOT VOID.	76816

# Ultrasound - Pediatric

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Neonatal Head	Intracranial hemorrhage Neonatal seizures Enlarging head circumference Follow up hydrocephalus Hypoxic Ischemic Encephalopathy	None	76506
Spine and contents	Sacral dimple Neoplasm of spinal cord/meninges Spina bifida Congenital anomalies of spinal cord Injury to spine/cord, birth trauma	None	76800
Infant Hips (dynamic)	Developmental dysplasia of the hip (DDH) Breech birth Hip click Family history of DDH Postural molding Torticollis Foot deformity	None	76885
Complete Abdomen	Trauma Hemihypertrophy Pain Organ enlargement	Less than 2 mon - NPO for 2 hrs prior to exam 3 mon to 1 yr - NPO 4 hrs prior to exam 1-8 yrs- NPO 5 hrs prior to exam 8 yrs or older - NPO 6 hrs prior to exam	76705
Limited Abdomen Single organ or Quadrant	Pyloric Stenosis Intussusception Appendicitis	Less than 2 mon - NPO for 2 hrs prior to exam 3 mon to 1 yr - NPO 4 hrs prior to exam 1-8 yrs- NPO 5 hrs prior to exam 8 yrs or older - NPO 6 hrs prior to exam	76705
Limited Pelvis	LLQ/RLQ	Infant to 2 yrs - 8 oz clear liquid 45 minutes prior to exam 2-6 yrs - 16 oz clear liquid 45 minutes prior to exam 6-12 yrs - 24 oz clear liquid 45 minutes prior to exam 12 yrs or older - 32 oz clear liquid 45 minutes prior to exam DO NOT VOID.	76857
Complete Pelvis	Urogenital malformations Precocious puberty Vaginal discharge Abnormal bleeding Pelvic mass Ovarian torsion	Infant to 2 yrs - 8 oz clear liquid 45 minutes prior to exam 2-6 yrs - 16 oz clear liquid 45 minutes prior to exam 6-12 yrs - 24 oz clear liquid 45 minutes prior to exam 12 yrs or older - 32 oz clear liquid 45 minutes prior to exam DO NOT VOID.	76857

## Ultrasound - Procedures

BODY PART	REASON FOR EXAM	PREP	CPT CODE
Thyroid Biopsy	Nodule mass Please call to schedule: 215-481-2073 (AMH) or 215-412-5015 (LH)	No Aspirin or Ibuprofen 24 hours prior to appointment	76942 and others to be determined
Breast Biopsy	Mass Lump Please call to schedule: 215-481-4006 (AMH) or 215-361-4862 (LH)	To be discussed with nurse scheduling procedure	76942 and others to be determined
Saline Infused Sonohysterography	Abnormal uterine bleeding Uterine myoma, polyp or synenchia Congenital abnormality of uterus Infertility Recurrent pregnancy loss. Focal or diffuse endometrial or intracavitary abnormality	Only performed between days 5-10 of cycle, if menstruating	76831 and others to be determined
Musculoskeletal	Ligamen /tendon/rotator cuff/carpal tunnel Needle tenotomy Aspiration/lavage of calcitic tendonosis Bursal/tendon sheath injection formed with MSK radiologist present) Please call to schedule: 215-481-2829 (AMH) or 215-361-4518 (LH)	No Aspirin or Ibuprofen Injection or Aspiration 24 hours prior to appointment	76942 and (needs to be per others to be determined

