



Radiology Ordering Guidelines

Scheduling: (719) 785-9000
Fax: (719) 867-7900
Penrad.org

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How to Reach a Radiologist

Are you a physician/ referring provider?

(719) 867-7945

8:00 AM – 5:30 PM

Monday – Friday

Pre-Authorization Assistance Program

The PENRAD Imaging Pre-Authorization Department will assist you with pre-authorization requirements to expedite patient radiology scheduling.

The following information is required:

- ✓ Company or Provider Tax ID number (*required by insurance*)
- ✓ Primary and secondary office contact name and phone number
- ✓ Patient insurance ID card copy front and back
- ✓ Pre-Authorization Fax Order Request to include specific diagnosis

Please fax any clinical information to include:

Any/all office notes, previous imaging, lab/pathology reports, and/or any other information pertinent to the exam.

Office notes NOT available at the time of a STAT order should be submitted as soon as available.

**An increasing number of insurance carriers require
office notes to obtain authorizations.**

PENRAD Imaging will be responsible for the following:

- ✓ Initiate pre-authorization process
- ✓ Fax supporting documentation and track pre-authorization process to completion
- ✓ Contact you if insurance carrier requires a peer-to-peer conversation
- ✓ Denied authorizations
 - You will be notified via phone by the pre-auth department
 - Patient will be contacted by phone
 - Denial information is faxed to your office
- ✓ Incomplete pre-authorization prior to patient scheduled appointment
 - You will be contacted by phone
 - Patient will be rescheduled

PENRAD Imaging's Pre-Authorization Department will work closely with your staff to provide the most efficient services for your patients and are available as an onsite resource.

**If you have questions, please contact the PENRAD Imaging
Pre-Authorization department at 719-573-3714**

MRI Guidelines

CPT	Exam	Contrast*	Indications / Guidelines
70551	MRI Brain	w/o	TIA, headache, dizziness, vision changes
70553	MRI Brain	w & w/o	Mass, tumor, history of cancer, MS, encephalitis, meningitis requires w/wo contrast
70544	MRA Brain Arterial	w/o	R/O aneurysm, clot, stenosis. Looks at blood vessels and blood flow. Contrast not helpful for technique used, thus w/o. AKA Circle of Willis
70553	MRI Brain to include IAC's	w & w/o	Hearing loss, dizziness, vertigo, tinnitus, acoustic neuroma, schwannoma. Contrast will enhance any abnormalities
70551	MRI Brain to include IAC's	w/o	Should be done with and without contrast unless there is a creatinine/GFR issue
70543	MRI Orbit - face/soft tissue neck	w & w/o	Blurry vision, double vision, loss of vision, optic neuritis. All indications require w/wo contrast
70540	MRI Orbit - face/soft tissue neck	w/o	Without contrast only if there is a creatinine/GFR issue
72148	MRI Lumbar	w/o	Back pain, radiculopathy, leg pain, groin pain, numbness, tingling
72158	MRI Lumbar	w & w/o	Back pain, radiculopathy. Infection or surgical history within 2 years requires w/wo contrast.
73721	MRI Hip	w/o	1 full view pelvis sequence. W/wo for cancer or infection. Order arthrogram for labral tear.

*Special Note - Diagnosis of ankylosing spondylitis, sacroiliitis, osteomyelitis, transverse myelitis, synovitis, poly-arthritis, discitis, rheumatoid arthritis, inflammatory arthritis, fasciitis, myositis, syrinx, tumor, mass, lesion, infection, or redness should always be **with and without contrast**.

If unsure of contrast, include **“contrast as indicated by radiologist”** in the comments.
Please call the MRI department with any ordering questions - (719) 867-6947 Or to speak with a radiologist - (719) 867-7945

MRI Guidelines

CPT	Exam	Contrast*	Indications / Guidelines
72146	MRI Thoracic	w/o	Back pain, thoracic radiculopathy
72157	MRI Thoracic	w & w/o	Infection, tumor or intrathecal catheter evaluation requires w/wo contrast
72141	MRI Cervical	w/o	Neck pain, arm pain, numbness, tingling. No contrast needed for surgery history
74183	MRI MRCP (also includes the abdomen Liver and Pancreas)	W & w/o	Gallstone, cholecystectomy, abdominal pain, obstruction, jaundice. Contrast is always w & w/o unless GFR issues then w/o
74183	MRI Abdomen	w & w/o	Please choose organ specific exam if possible (liver, kidney, pancreas, MRCP) Generally requires w/wo contrast
74183+72197	MRI Abdomen/Pelvis	w & w/o	W/wo contrast is generally required. These are two separate exams; requires one diagnosis for abd protocol and one for pelvic protocol
73721	MRI Knee	w/o	Knee pain, meniscus tear, effusion, instability
73223	MRI Shoulder	w & w/o	Infection, mass or Rheumatoid arthritis requires w/wo contrast. If for Labral or Slap tear, recommend MRI arthrogram w/contrast
73221	MRI Shoulder	w/o	Rotator cuff tear, should pain, limited range of motion, dislocation
72195	MRI Prostate	w/o	Elevated PSA, prostate cancer, therapy planning

*Special Note - Diagnosis of ankylosing spondylitis, sacroiliitis, osteomyelitis, transverse myelitis, synovitis, poly-arthritis, discitis, rheumatoid arthritis, inflammatory arthritis, fasciitis, myositis, syrinx, tumor, mass, lesion, infection, or redness should always be **with and without contrast**.

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 Please call the MRI department with any ordering questions - (719) 867-6947
 Or to speak with a radiologist - (719) 867-7945

CT Guidelines

CPT	Exam	Contrast	Indications / Guidelines
74150	CT Abdomen Only	w/o	RUQ/LUQ pain. Epigastric pain with high creatinine/low GFR, will still use oral contrast. If pain at or below umbilicus, order pelvis as well
74160	CT Abdomen Only	w	Epigastric pain, RUQ/LUQ pain. If pain at or below umbilicus, order pelvis as well. Oral contrast. Should not be ordered as w/ and w/o unless for a multiphase study
74170	CT Abdomen Only	w & w/o	Multiphase studies, liver mass/lesion, adrenal adenoma, renal mass, pancreatic mass. **May need to add pelvis if patient is having symptoms below umbilicus.**
72192	CT Pelvis Only	w/o	Pelvic fracture, Sacral pain-bony detail, Can be ordered for pelvic pain if patient has high creatinine/low GFR
72193	CT Pelvis Only	w	Pelvic pain, ovarian cyst, adnexal mass. Should not be ordered as w/ and w/o
74176	CT Abd/Pelvis - Stone Protocol	w/o	Kidney stones, flank pain, hematuria. Bladder stones
74176	CT Abd/Pelvis	w/o	Abd/pelvic pain with high creatinine/low GFR. Still will use oral contrast
74177	CT Abd/Pelvis	w	Generalized abdominal pain, RLQ/LLQ pain. Cancer staging, r/o appendicitis. Diverticulitis. Will use oral contrast also. Should not be ordered as w/ and w/o
74178	CT IVP	w & w/o	Hematuria, Pyelonephritis, Bladder cancer, UTI. Evaluation of kidneys, ureters, and bladder

When in doubt regarding how to order contrast, write **“contrast as indicated by radiologist.”**

*Please call the CT department with any ordering questions - (719) 867-7955
Or to speak with a radiologist - (719) 867-7945*

CT Guidelines

CPT	Exam	Contrast	Indications / Guidelines
74177	CT Abd/Pelvis-Enterography	w	Colitis, Crohn's disease, IBS
74174	CT Angio Abdomen/Pelvis	w & w/o	Abdominal aortic aneurysm, dissection, mesenteric ischemia
70450	CT Head/Brain	w/o	Headache, syncope, memory loss, trauma, dizziness
70470	CT Head/Brain	w & w/o	Mass, tumor. Meningioma
70496	CT Angio Head/ Brain	w & w/o	Evaluate Circle of Willis, aneurysm, arterial stenosis. CVA
70498	CT Angio Neck	w & w/o	Carotid artery stenosis
70486	CT Maxillofacial	w/o	Fracture on facial area/mandible, facial trauma
70487	CT Maxillofacial	w	Mass, tumor, bone lesion
70480	CT Orbits	w/o	Fracture to orbit. Orbital trauma. Diplopia
70480	CT IAC's	w/o	Tinnitus, hearing loss, Mastoiditis, Cholesteatoma
70481	CT IAC's	w	Mass, lesion, or abscess. Typically only ordered by ENT specialist
70486	CT Sinus	w/o	Chronic sinus infection, polyps, sinusitis, deviated nasal septum
70491	CT Soft Tissue Neck	w	Mass/tumor, lump, pain, swelling. Tracheal stenosis (inspiration and expiration). Dysphonia
70492	CT Soft Tissue Neck	w & w/o	Looking for stones - Sialolithiasis. 4D Parathyroid protocol

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Or to speak with a radiologist - (719) 867-7945

CT Guidelines

CPT	Exam	Contrast	Indications / Guidelines
71250	CT Chest High Res	w/o	High Resolution - Pulmonary fibrosis, bronchiectasis or interstitial lung disease
71250	CT Chest (Thorax)	w/o	Lung nodule, pleural effusion, Shortness of breath, Chronic cough, Rib pain or injury
71260	CT Chest (Thorax)	w	Cough, Abnormal chest x-ray, Mass, lesion, tumor, cancer. Should not be ordered as w/ and w/o ** If trying to rule out PE, please order CTA of the Chest **
G0297	Lung Cancer Screening	w/o	55-80 years old, 20+ pack year smoker, current or quit within 15 yrs. Can only have this done 1 per year. Should not be used to follow lung nodules, order chest without contrast instead
75571	Heart Screen	w/o	Coronary artery calcium scoring. Elevated cholesterol. Family history of CAD
71275	CT Angio Chest (Thorax)	w	Shortness of breath, chest pain, (PE)pulmonary embolism, thoracic aneurysm, dissection, **Ascending aortic aneurysm and follow up for graft. If following up a graft, please order w/ and w/o**
71275+74177	CT Angio Chest, Abd, Pelvis	w	AAA, dissection, **Ascending aortic aneurysm and follow up for graft. If following up a graft, please order w/ and w/o**

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CT Guidelines

CPT	Exam	Contrast	Indications / Guidelines
71250+74150	CT Chest +Abdomen	w/o	Chest/abdominal pain with high creatinine/low GFR. Hiatal hernia. Abdominal pain should be in RUQ or LUQ. Exam will only scan to umbilicus. Can still use oral contrast if indicated.
71260+74160	CT Chest +Abdomen	w	Chest/Abdominal pain. Hiatal hernia. Abdominal pain should be in RUQ or LUQ. Exam will only cover to umbilicus. Will use oral contrast. Should not be ordered and w/ and w/o
71250+74176	CT Chest, Abd, Pelvis	w/o	High creatinine/low GFR. Still can be used for cancer staging if patient has decreased renal function. Weight loss. Night sweats. Lymphadenopathy. Will use oral contrast
71260+74177	CT Chest, Abd, Pelvis	w	Chest, abdominal pain, pelvic pain, weight loss, cancer surveillance. Lymphadenopathy. Night sweats. Will use oral contrast. Should not be ordered and w/ and w/o
72125	CT Cervical Spine	w/o	Fracture, neck pain, cervicalgia. Degenerative disc disease. Arthrodesis status. Surgical follow up. Should not be ordered as w/ and w/o
72128	CT Thoracic Spine	w/o	Upper back pain. Surgical follow up. Should not be ordered as w/ and w/o

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CT Guidelines

CPT	Exam	Contrast	Indications / Guidelines
72131	CT Lumbar Spine	w/o	Low back pain, spinal stenosis. Degenerative disc disease. Arthrodesis status. Surgical follow up. Should not be ordered as w/ and w/o
73200	CT Upper Extremity - please specify joint and laterality	w/o	Fracture. Arthritis. Pain. Preoperative planning
73201	CT Upper Extremity - please specify joint and laterality	w	Soft tissue mass, lesion, abscess, osteomyelitis. **May be ordered with an arthrogram from ortho provider**
73700	CT Lower Extremity - please specify joint and laterality	w/o	Fracture. Arthritis. Pain. Preoperative planning
73701	CT Lower Extremity - please specify joint and laterality	w	Soft tissue mass, lesion, abscess, osteomyelitis
75635	CTA Abd Aorta, Pelvis bilateral with Runoff	w & w/o	Abnormalities in arteries of legs. Decreased circulation to lower extremities. Peripheral artery disease

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Ultrasound Guidelines

CPT	Exam	AKA	Indications / Guidelines
76700	US Abdomen Complete	Upper Abdomen	Abdominal Pain Includes Pancreas, Aorta, IVC, Liver, GB, Spleen and Bilateral Kidneys
76705	US Abdomen Limited	US Hernia, US Appendix, US Soft tissue Abdomen/ Back	Appendix, hernia or abdominal wall lump, lower back lump Please indicate the specific structure you would like evaluated
76705	US Abdomen RUQ	Limited Abdomen US for RUQ pain. Includes Liver, GB, and CBD.	Adults 12 and older- NPO 6 hours prior to exam. PEDS prep 2yr to 12yrs- NPO 4 hours prior to exam. Infants/<24 months- NPO 30-60min prior to exam time.
76706	US AAA Screening		Patient MUST meet one of the eligibility requirements: a family history of AAA and/or be a male between the ages of 65-75 with a history of smoking
76775	US Abdominal Aorta		Pulsatile abdominal mass, atherosclerosis, history of AAA. *NOT AAA screening but a diagnostic exam
76705+93975	US Abdomen Limited w/ Doppler		Includes Liver, Spleen, Complete portal system Doppler
76700+93975	US Abdomen Complete w/ Doppler	Abdomen w/ Portal Doppler	All upper abdomen organs w/ complete portal system Doppler
93975	US Abdominal Doppler		Doppler of portal system only - no organ evaluation included
76705	US Appendix		

Please call the US department with any ordering questions - (719) 867-7992
Or to speak with a radiologist - (719) 867-7945

Ultrasound Guidelines

CPT	Exam	AKA	Indications / Guidelines
93925	US Arterial Leg		Leg pain, loss of pulses, claudication
93930	US Arterial Arm		Arm pain, loss of pulses
76882	US Axilla		Axilla lump, swelling or pain
51798	US Bladder with PVR	PVR: post void residual	Bladder only exam. Does NOT include renal images. Finish 24oz of water 1 hour prior to exam time. DO NOT void. Come with a full bladder
76642	US Breast		We do not do screening breast ultrasounds in place of a mammogram. Targeted ultrasound can be performed if patient has a specific lump or area of pain - please indicate on script
19000	US Breast Aspiration		
19286	US Breast Core BX w/ clip placement		
93880	US Carotid Arteries		Evaluates bilateral carotid and vertebral arteries
76604	US Soft Tissue Chest or Upper Back		Lump on chest area or upper back
76705	US Hernia		Please indicate the location of suspected hernia (ex: inguinal, ventral, umbilical, etc.)
76885	US Infant Hips Pediatric		**Schedule up to 6 months only**
93976	US Mesenteric Doppler	SMA Doppler, celiac Doppler,	Post prandial pain, assess for mesenteric ischemia. NPO 6 hours. May take medications with small sips of water if needed

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Ultrasound Guidelines

CPT	Exam	AKA	Indications / Guidelines
76856 +93975	US Pelvic - Transabdominal with Doppler if needed	TA	Finish 24oz of water 1 hr prior to appointment. Do NOT void-Come in with a full bladder. This study is typically only done for non-sexually active females
76830+93975	US Pelvic - Transvaginal with Doppler if needed	TV	Transvaginal imaging of uterus, endometrium, and bilateral ovaries
76705	US Pylorus - PEDS		Patient to bring a bottle of Pedialyte, breast milk or formula. NPO 30-60 min prior to exam
76770	US Renal	Bilateral kidneys and bladder included	Adults >12 y/o NPO 4 hrs prior to exam PLUS Finish 24 oz of water 1 hr prior to appointment, Do NOT void
76770	US Renal - PEDS	Renal, kidneys, and bladder included	PEDS 3-11yrs NPO 4 hrs prior to exam PLUS Finish 16 oz of water 1 hr prior to appointment, Do NOT void Infant-2yrs: NPO 30-60 min prior to exam time
76770	US Renal w/ Renal Doppler	Renal Arteries	Uncontrolled or malignant HTN, NPO 6 hrs prior to exam, with the exception of 24ozs of water, Do NOT void, come with full bladder
76705	US Soft Tissue Abdomen		Soft tissue lump in the abdominal area

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Ultrasound Guidelines

CPT	Exam	AKA	Indications / Guidelines
76604	US Soft Tissue Chest or Back		Soft tissue lump in the chest or upper back area
76536	US Soft Tissue Head/Neck	Head, face or neck lump, lymphadenopathy, mass, parotid or submandibular glands	Thyroid is not included in this exam. If both Thyroid and Soft Tissue Neck are needed - please order both studies
76882	US Soft Tissue/ Musculoskeletal Limited	lump or mass on an extremity	We do not perform whole joint MSK ultrasound
76857	US Soft Tissue Pelvis	Soft tissue lump in the pelvis, groin, etc. NOT hernia related	No prep
76800	US Spinal Canal - PEDS	spine, sacrum, pilonidal cyst or dimple	Advise parents to feed baby just prior to coming in as this makes it easier for the exam to be done.
76705	US Spleen	Splenomegaly, thrombocytopenia	No prep needed
76870	US Scrotum with Doppler	Testicular	N/A
76536	US Thyroid		goiter, nodules or thyroiditis

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Ultrasound Guidelines

CPT	Exam	AKA	Indications / Guidelines
93979	US Vascular Aorta/ IVC/ Iliac	Aorta Doppler	NPO 8 hours prior to exam.
93970	US Venous Leg		Please indicate a good call report number when scheduling
93970	US Venous Arm		Please indicate a good call report number when scheduling

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Fluoroscopy Guidelines

CPT	Exam	AKA	Indications / Guidelines
27369 + 73722 (MR) or 73701 (CT)	Arthrogram Knee	MRI Arthrogram- Arthrograms are often done with MRI to follow but can be done with CT if patient has a contraindication	R/O tear of ligament or muscle
27093 + 73722 (MR) or 73701 (CT)	Arthrography Hip	MRI Arthrogram- Arthrograms are often done with MRI to follow but can be done with CT if patient has a contraindication	R/O tear of ligament or muscle, specifically in labrum
23350 + 73222 (MR) or 73201 (CT)	Arthrography Shoulder	MRI Arthrogram- Arthrograms are often done with MRI to follow but can be done with CT if patient has a contraindication	R/O tear of ligament or muscle, specifically in labrum
58340	Hysterosalpingography	HSG (Be careful not to confuse this exam with a hystersonogram which is an US study).	Used to evaluate infertility, birth control
74400	IVP	Intravenous Pyelogram	Kidney stones, hydronephrosis, anything with kidneys, ureter and bladder, follow up for bladder cancer, ureter cancer, anything within the urinary system

*Please call the X-ray department with any ordering questions - (719) 573-3740
Or to speak with a radiologist - (719) 867-7945*

PET Guidelines

CPT	Exam	AKA	Indications / Guidelines
78815	Skull Base to Mid-Thigh	Pet Scan	Most common
78816	Whole Body		Typically ordered for Melanoma, Sarcoma, Cutaneous Lymphoma, or any other cancer of the extremity. Whole body is not necessary for SPN.
78816	PET Whole Body Bone	PET BONE Or Sodium Fluoride PET.	Evaluates only for bone metastasis. Most insurance will not cover this. A nuclear Medicine whole body bone scan may offer the same results
78608	PET Brain		Dementia is the only diagnosis covered by Medicare or Medicare replacement plans.

*Please call the PET department with any ordering questions - (719) 867-7965
Or to speak with a radiologist - (719) 867-7945*

Nuclear Medicine Guidelines

CPT	Exam	AKA	Indications / Guidelines
78315	NM Bone 3 Phase		Evaluate joint replacement or pain in extremity
78306	NM Bone Whole Body	Radionuclide Bone Scan	Often ordered to evaluate metastasis or follow up lesion on xray
78264	NM Gastric Emptying Study 4 hr	GES	NPO 6 hours prior, 12 hours prior no anti-nausea meds, no acid reducers 6 hours prior. No narcotics 4hrs prior. No long acting narcotics 12 hrs prior. Other meds ok with sip of water. Pt required to eat egg or oatmeal
78227	NM Hepatobiliary System (HIDA Scan)	HIDA Scan	NPO 4 hours prior, no narcotic meds at least 4 hrs prior to exam, other meds ok with sip of water. Exam usually complete in 2 hours but can take up to 5 hours
78707	NM Renal w Lasix	MAG3 Renal	No prep
78195	NM Lymphoscintigraphy	Sentinel Node scan.	No prep, PENRAD will work with the ordering Dr's office to coordinate with surgery
78290	NM Meckel's localization		No prep
78014	Thyroid Scan	I123 Uptake and scan	Labs needed: T3, T4 and TSH. Pt will discontinue thyroid meds prior to exam, instructions provided at scheduling. Note on RX if provider doesn't want to d/c meds.
78070	Parathyroid Scan	Sestamibi Scan	No Prep. Thyroid meds do NOT have to be stopped for this exam. We do NOT do Spect Parathyroid

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Or to speak with a radiologist - (719) 867-7945

Mammography Guidelines

CPT	Exam	AKA	Indications / Guidelines
77062	Digital Breast Tomosynthesis Bilateral	Tomo/3D Mammo	Typically recommended for dense breast tissue, especially if patient is a frequent callback due to dense breast tissue
19030	Galactogram		Commonly ordered to view the inside of the breast's milk ducts. It is most commonly used when a woman has experienced a bloody or clear discharge from the breast nipple but has an otherwise normal mammogram. RX needed
19081	Stereotactic Breast Biopsy		Recommended by Radiologist after diagnostic breast imaging. RX is needed indicating side and diagnosis ie calcifications
77066	Mammography Digital Diagnostic		If patient complains of pain, lump, a diagnostic script is needed (US if indicated)
77066	Mammography Digital Diagnostic w Implants		If patient complains of pain, lump, a diagnostic script is needed (US if indicated)
77057	Mammography Digital Screening	Mammo	Recommended by radiologists and ACR as the gold standard - Yearly mammo beginning at age 40

Please call the Mammo/Dexa department with any ordering questions - (719) 867-6997
Or to speak with a radiologist - (719) 867-7945

DEXA Guidelines

CPT	Exam	Contrast	Indications / Guidelines
77080	DEXA Bone Densitometry	Bone Density, BMD, DEXA	Best Baseline to perform. Typically, basic screening and most common ordered. No calcium supplements (including calcium containing multi-vitamins) 24 hours before exam. All other medications are fine to take
76499	DEXA Body Fat Composition	Bone Density, BMD, DEXA	Uncommon. Used to evaluate BMI
77081	DEXA Bone Densitometry Forearm	Bone Density, BMD, DEXA	Uncommon. Only if patient has had both hips fractured or replaced
77085	DEXA Bone Densitometry w (IVA)	Bone Density, BMD, DEXA	Only order if patient has hx of compression fracture of thoracic spine. No calcium supplements (including calcium containing multi-vitamins) 24 hours before exam. All other medications are fine to take

*Please call the Mammo/Dexa department with any ordering questions - (719) 867-6997
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X-Ray Guidelines

CPT	Exam	CPT	Exam
** Asterisked exams are most common/recommended**			
74019	Abdomen 2 View	70160	Nasal Bones **
74021	Abdomen 3 View	70200	Orbits 4+ View**
74022	Abdomen 3 View Includes PA Chest	70030	Orbits for Foreign Body
74018	Abdomen KUB 1 View (AP) **	73650	Os Calcis 2+ View **
73050	AC Joints Bilateral	72170	Pelvis 1 View (AP) **
73610	Ankle 3+ View **	71111	Ribs Bilateral 4+ View w PA CXR **
77072	Bone Age	71101	Ribs Unilateral 3 View w PA CXR **
71046	Chest PA & Lateral **	72202	Sacroiliac Joints 3+ View **
73000	Clavicle	72220	Sacrum & Coccyx 2 View **
73070	Elbow 2 View **	73010	Scapula **
70150	Facial Bones 3+ View Complete **	73030	Shoulder 2+ View **
73552	Femur 2 View **	70220	Sinuses 3+ View **
73140	Finger(s)/ Thumb 2+ View**	70260	Skull 4+ View **
73630	Foot 3+ View **	72050	Spine Cervical w Obliques 4+ View **
73090	Forearm 2 View **	72110	Spine Lumbosacral 4+ View **
76010	Foreign Body Nose to Rectum 1 View Child	72072	Spine Thoracic 3 View **
73130	Hand 3+ View **	71130	Sternoclavicular Joints 3+ View
73521	Hip Bilateral & AP Pelvis	71120	Sternum 2+ View **
73522	Hip 2+ View Includes AP Pelvis **	70330	Temporomandibular Joints
73060	Humerus 2+ View **	73590	Tibia & Fibula 2 View
73560	Knee 1+ View **	73660	Toe(s) 2+ View
70110	Mandible 4+ View **	73110	Wrist 3+ View **
70130	Mastoids 3+ View Complete**		

Please call the X-ray department with any ordering questions - (719) 573-3740

Complete List of CPT Codes

CPT Code	Computed Tomography Scan	CPT Code	Computed Tomography Scan
74160	CT Abdomen w Contrast	72193	CT Pelvis w Contrast
74170	CT Abdomen w, w/o Contrast	72194	CT Pelvis w, w/o Contrast
74150	CT Abdomen w/o Contrast	72192	CT Pelvis w/o Contrast
74178	CT Abdomen, Pelvis w and w/o Contrast	72126	CT Spine Cervical w Contrast
74177	CT Abdomen, Pelvis w Contrast	72127	CT Spine Cervical w, w/o Contrast
74176	CT Abdomen, Pelvis w/o Contrast	72125	CT Spine Cervical w/o Contrast
71260	CT Chest w Contrast	72132	CT Spine Lumbar w Contrast
71270	CT Chest w, w/o Contrast	72133	CT Spine Lumbar w, w/o Contrast
71250	CT Chest w/o Contrast	72131	CT Spine Lumbar w/o Contrast
G0297	CT Chest w/o Contrast, lung cancer screening	72129	CT Spine Thoracic w Contrast
77012	CT Guided Needle Placement	72130	CT Spine Thoracic w, w/o Contrast
70460	CT Head/ Brain w Contrast	72128	CT Spine Thoracic w/o Contrast
70470	CT Head/ Brain w, w/o Contrast	76380	CT Tomography Limited or Follow Up
70450	CT Head/ Brain w/o Contrast	73201	CT Upper Extremity w Contrast
75571	CT Heart Screen Calcium Scoring	73202	CT Upper Extremity w, w/o Contrast
73701	CT Lower Extremity w Contrast	73200	CT Upper Extremity w/o Contrast
73702	CT Lower Extremity w, w/o Contrast	74175	CTA Abdomen w and or w/o Contrast
73700	CT Lower Extremity w/o Contrast	75635	CTA Abdomen w Bilateral Runoff w, w/o Contrast
70486	CT Maxillofacial Complete	74174	CTA Abdomen, Pelvis w and or w/o Contrast
70487	CT Maxillofacial w Contrast	70496	CTA Brain w, w/o Contrast
70488	CT Maxillofacial w, w/o Contrast	70498	CTA Carotid (Neck) w, w/o Contrast
70491	CT Neck Soft Tissue w Contrast	75574	CTA Coronary Arteries w Calcium Scoring, CT Heart, Funct Eval
70492	CT Neck Soft Tissue w, w/o Contrast	75572	CTA Coronary Arteries w Function Evaluation w Contrast
70490	CT Neck Soft Tissue w/o Contrast	73706	CTA Lower Extremity
70481	CT Orbit, Pituitary or IACs w Contrast	72191	CTA Pelvis w and or w/o Contrast
70482	CT Orbit, Pituitary or IACs w, w/o Contrast	71275	CTA Thorax (non coronary) w, w/o Contrast
70480	CT Orbit, Pituitary or IACs w/o Contrast	73206	CTA Upper Extremity
CPT Code	Lab		
82565	SP Lab Analysis		
81025	SP Urine Analysis		

CPT Code	Mammography	CPT Code	Bone Density / PET
19081	Biopsy, breast, percutaneous; first lesion, including stereotactic guidance	77067	Screening Mammography, Digital Image, including CAD, Bilateral with Tomosynthesis
77066	Diagnostic Mammography, Digital Image, including CAD, Bilateral	77067	Screening Mammography, Digital Image, including CAD, Unilateral with Tomosynthesis
77066	Diagnostic Mammography, Digital Image, including CAD, Bilateral with Tomosynthesis	77080	DEXA Bone Densitometry
77065	Diagnostic Mammography, Digital Image, including CAD, Unilateral	77081	DEXA Bone Densitometry Forearm
77065	Diagnostic Mammography, Digital Image, including CAD, Unilateral with Tomosynthesis	77085	DEXA Bone Densitometry w (IVA)
76098	MA Surgical Specimen Breast	77086	OT VFA via dual-energy xray absorptiometry
19030	Mammographic Breast Ductogram Injection	78814	PET Amyvid Brain
77054	Mammographic Galactogram Multiple Ducts	78815	PET Axumin Skull Base to Midthigh
77053	Mammographic Galactogram Single Duct	78608	PET Brain Metabolic
77062	MG Digital breast tomosynthesis, bilateral	78813	PET Conversion
77061	MG Digital breast tomosynthesis, unilateral	78811	PET Limited Area
77063	MG Screening digital breast tomosynthesis, bilateral	78459	PET Myocardial Metabolic
77063	MG Screening digital breast tomosynthesis, unilateral	78491	PET Myocardial Perfusion
19282	Plcmnt of breast localization device; each additional lesion, including mammo guidance	78814	PT PET Scan w CT Chest Head/Neck
19284	Plcmnt of breast localization device; each addtl lesion, including stereotactic guidance	78815	PT PET w CT Skull Base to Mid Thigh
19281	Plcmnt of breast localization device; first lesion, including mammo guidance	78816	PT PET w CT Whole Body
19283	Plcmnt of breast localization device; first lesion, including stereotactic guidance	78816	PT PET Whole Body Bone Scan
77067	Screening Mammography, Digital Image, including CAD, Bilateral		

CPT Code	Magnetic Resonance Imaging	CPT Code	Magnetic Resonance Imaging
19085	Biopsy, breast, First lesion, including MR guidance	74181	MRI Abdomen w/o Contrast
75557	MR Cardiac for Morphology, Function w/o Contrast	73722	MRI Arthrography-Ankle
75561	MR Cardiac for Morphology, Function w, w/o	73222	MRI Arthrography-Elbow
75565	MR Cardiac for Velocity Flow Mapping	73722	MRI Arthrography-Hip
0159T	MR Computer Aided Detection MRI Breast	73722	MRI Arthrography-Knee
76391	MR Elastography	73222	MRI Arthrography-Shoulder
77021	MR Guidance for Needle Placement	73222	MRI Arthrography-Wrist
74185	MRA Abdomen w or w/o Contrast	70552	MRI Brain w Contrast
71555	MRA Chest w or w/o Contrast	70553	MRI Brain w, w/o Contrast
70545	MRA Head w Contrast	70551	MRI Brain w/o Contrast
70546	MRA Head w, w/o Contrast	70554	MRI Brain, Functional MRI
70544	MRA Head w/o Contrast	77049	MRI Breast w & w/o contrast w/ CAD; bilateral
73725	MRA Lower Extremity w or w/o Contrast	77048	MRI Breast w & w/o contrast w/ CAD; unilateral
70549	MRA Neck w, w/o Contrast	77047	MRI Breast w/o contrast; bilateral
70548	MRA Neck w/ Contrast	77046	MRI Breast w/o contrast; unilateral
70547	MRA Neck w/o Contrast	71552	MRI Chest w, w/o Contrast
72198	MRA Pelvis w or w/o Contrast	71551	MRI Chest w/Contrast
73225	MRA Upper Extremity w or w/o Contrast	71550	MRI Chest w/o Contrast
74182	MRI Abdomen w Contrast	74713	MRI Fetal including placenta, each addtl gestation
74183	MRI Abdomen w, w/o Contrast	74712	MRI Fetal including placenta, single or first gestation

CPT Code	Magnetic Resonance Imaging (cont.)	CPT Code	Magnetic Resonance Imaging
73723	MRI Low Extremity Any Joint w, w/o Contrast	72149	MRI Spine Lumbar w Contrast
73722	MRI Lower Extremity Any Joint w Contrast	72158	MRI Spine Lumbar w, w/o Contrast
73721	MRI Lower Extremity Any Joint w/o Contrast	72148	MRI Spine Lumbar w/o Contrast
73720	MRI Lower Extremity Not Joint w and w/o Contrast	72147	MRI Spine Thoracic w Contrast
73719	MRI Lower Extremity Not Joint w Contrast	72157	MRI Spine Thoracic w, w/o Contrast
73718	MRI Lower Extremity Not Joint w/o Contrast	72146	MRI Spine Thoracic w/o Contrast
70540	MRI Orbit, Face And/Or Neck; w/o Contrast	70336	MRI Temporomandibular Joints
70542	MRI Orbit, Face, Neck w Contrast	73223	MRI Upper Extremity Any Joint w , w/o Contrast
70543	MRI Orbit, Face, Neck w, w/o Contrast	73222	MRI Upper Extremity Any Joint w Contrast
72196	MRI Pelvis w Contrast	73221	MRI Upper Extremity Any Joint w/o Contrast
72197	MRI Pelvis w, w/o Contrast	73219	MRI Upper Extremity Not Joint w Contrast
72195	MRI Pelvis w/o Contrast	73220	MRI Upper Extremity Not Joint w, w/o Contrast
76390	MRI Spectroscopy	73218	MRI Upper Extremity Not Joint w/o Contrast
72142	MRI Spine Cervical w Contrast	19288	Plcmnt of breast localization device; each additional lesion, including MR guidance
72156	MRI Spine Cervical w, w/o Contrast	19287	Plcmnt of breast localization device; First lesion, including MR guidance
72141	MRI Spine Cervical w/o Contrast		

CPT Code	Nuclear Medicine	CPT Code	Fluoroscopy
78807	NM Abscess Localization SPECT	78014	NM Thyroid Uptake and Scan
78278	NM Acute GI Blood Loss	78803	NM Tumor Localization SPECT
78315	NM Bone 3 Phase	78802	NM Tumor Localization Whole Body
78300	NM Bone Limited Area	74280	RF Barium Enema w Air Contrast
78102	NM Bone Marrow Limited	74430	RF Cystogram
78103	NM Bone Marrow Multiple Areas	74455	RF Cystourethrogram Voiding (VCUG)
78104	NM Bone Marrow Whole Body	76000	RF FL Fluoroscopy <1Hr
78305	NM Bone Multiple Areas	76001	RF Fluoroscopy >1Hr
78320	NM Bone Scan SPECT	77002	RF Fluoro Guidance for Needle Placement
78306	NM Bone Whole Body	74740	RF Hysterosalpingography
78472	NM Cardiac BloodPool w Ejection Fraction	74450	RF Retrograde Urethrogram
78800	NM Gallium Limited Area	74250	RF Small Bowel Follow Through
78264	NM Gastric Emptying Study	92611	RF Speech Pathologist
78227	NM Hepatobiliary System (HIDA Scan)	74249	RF Upper GI Air Contrast w Small Bowel
78226	NM Hepatobiliary System (HIDA Scan) w/o CCK	74246	RF Upper GI Tract
78708	NM Kidney Scan w/Vascular Flow, Drug Intervention	74240	RF Upper GI w Air Contrast
78205	NM Liver (Spect)	74245	RF Upper GI w Small Bowel Follow Through
78215	NM Liver and Spleen Static	74230	RF Video Swallow
78216	NM Liver and Spleen w Flow	73615	RF Arthrography Ankle
78201	NM Liver Static Only	73085	RF Arthrography Elbow
78202	NM Liver w Vascular Flow	73525	RF Arthrography Hip
78195	NM Lymphoscintigraphy	73580	RF Arthrography Knee
78290	NM Meckels Localization	73040	RF Arthrography Shoulder
78445	NM Non-Cardiac Vascular Flow	73115	RF Arthrography Wrist
78070	NM Parathyroid Scan	74220	RF Barium Swallow (Pharynx-Esophagus)
78580	NM Pulmonary Perfusion	74241	RF Radiologic exam, GI Tract, upper; w or wo delayed images, w/KUB
78582	NM Pulmonary Perfusion with Ventilation	74425	RF Urography Antegrade Study
78707	NM Renal w Flow and Function	74400	RF Urography Excretory Study
78761	NM Testicular w Flow		

CPT Code	Specials	CPT Code	Specials
62305	Myelography via lumbar injection, incl RS&I; 2 or more regions	10008	SP FNA w/ FL guidance; add`l lesion
62302	Myelography via lumbar injection, incl RS&I; cervical	10011	SP FNA w/ MR guidance; 1st lesion
51600	RF Injection for Cystography/Voiding Urethrocytography	10012	SP FNA w/ MR guidance; add`l lesion
96360	SP Hydration	10005	SP FNA w/ US guidance; 1st lesion
96361	SP Hydration Additional 3 Hours	10006	SP FNA w/ US guidance; add`l lesion
20982	SP ablation therapy 1 or more bone tumor(s)percutaneous incl. imaging guidance; radiofrequency	10004	SP FNA w/o Imaging Guidance; add`l lesion
20605	SP Arthrocentesis Intermediate Joint or Bursa	58340	SP Hysterosalpingography-Catheterization and Saline/Contrast Intro
20610	SP Arthrocentesis Major Joint or Bursa	54700	SP Incision and Drainage of epididymis, testis
20611	SP Arthrocentesis, aspir.&/or injection major joint or bursa w/US guidance	50690	SP Injection for Ureteropyelography
20606	SP Arthrocentesis, aspiration &/or injection intermed.joint or bursa w/US guidance	27648	SP Injection Procedure for Ankle Arthrography
20604	SP Arthrocentesis, aspiration &/or injection small joint or bursa w/US guidance	27096	SP Injection Si Joint
24220	SP Arthrography Elbow	62304	SP Myelography via lumbar injection, incl RS&I; lumbosacral
27093	SP Arthrography Hip	62303	SP Myelography via lumbar injection, incl RS&I; thoracic
27369	SP Arthrography Knee	22510	SP Percutaneous vertebroplasty 1 vertebral body, uni or bilateral injection, cervicothoracic
23350	SP Arthrography Shoulder CT/ MR	22512	SP Percutaneous vertebroplasty 1 vertebral body, uni or bilateral injection, each addtl vert body
25246	SP Arthrography Wrist	22511	SP Percutaneous vertebroplasty 1 vertebral body, uni or bilateral injection, lumbosacral
36598	SP Central Venous Access Device Eval (CVA)	20206	SP Percutaneuos Needle Biopsy of Muscle
10009	SP FNA w/ CT guidance; 1st lesion	20552	SP Piriformis pain injection
10010	SP FNA w/ CT guidance; add`l lesion	37218	SP transcath.plcmt intravascular stent intrathoracic common carotid artery or innominate,incl. angio
10007	SP FNA w/ FL guidance; 1st lesion		

CPT Code	Ultrasound	CPT Code	Ultrasound
19084	Biopsy, breast, Each additional lesion, including ultrasound guidance	19000	US Breast Cyst Puncture/ Aspiration
19083	Biopsy, breast, First lesion, including ultrasound guidance	76642	US breast limited , unilateral w/image documentation, incl . axilla when performed
19286	Plcmnt of breast localization device; Each additional lesion, including US guidance	93880	US Carotid Arteries
19285	Plcmnt of breast localization device; First lesion, including US guidance	76604	US Chest, Mediastinum
76700	US Abdomen Complete WITH DOPPLER	76981	US elastography; parenchyma
76700	US Abdomen Complete WITHOUT DOPPLER	76983	US elastography; parenchyma; each addl lesion
76705	US Abdomen Limited	76982	US elastography; parenchyma; first target lesion
76706	US Abdominal aorta, SCREENING study for abdominal aortic aneurysm AAA	76942	US Guidance Needle Placement
93975	US Abdominal Doppler Complete	76937	US Guidance Vascular Access
93976	US Abdominal Doppler Limited	93990	US Hemodialysis Graft
93922	US ABI	76831	US Hysterosonography w, Pelvic Transvaginal
19001	US Additional Cyst Puncture, Aspiration	76885	US Infant Hips Pediatric
93978	US Arterial Bilat w Graft	76802	US Obstetric Additional Gestation 1st Trimester
93925	US Arterial Lower Extremities	76810	US Obstetric Additional Gestation 2nd Trimester
93926	US Arterial Lower Extremity Unilateral or Limited	76801	US Obstetric First Trimester Transabdominal WITH DOPPLER
93930	US Arterial Upper Extremities	76801	US Obstetric First Trimester Transabdominal WITHOUT DOPPLER
93931	US Arterial Upper Extremity Unilateral or Limited	76817	US Obstetric First Trimester Transvaginal WITH DOPPLER
76641	US breast complete , unilateral w/image documentation, incl . axilla when performe	76817	US Obstetric First Trimester Transvaginal WITHOUT DOPPLER

CPT Code	Ultrasound (Cont.)	CPT Code	Ultrasound
76816	US Obstetric Follow Up	76800	US Spinal Canal Pediatric
76815	US Obstetric Limited	76979	US targeted dynamic microbubble; each addl lesion
76857	US Pelvic Limited	76978	US targeted dynamic microbubble; initial lesion
76856	US Pelvic Transabdominal WITH DOPPLER	93882	US Temporal Artery Unilateral
76856	US Pelvic Transabdominal WITHOUT DOPPLER	76870	US Testicular WITH DOPPLER
76776	US Renal Transplant	76870	US Testicular WITHOUT DOPPLER
76775	US Retroperitoneal Limited	76830	US Transvaginal WITH DOPPLER
76770	US Retroperitoneal (Renal, Aorta, Nodes) Complete WITH DOPPLER	76830	US Transvaginal WITHOUT DOPPLER
76770	US Retroperitoneal (Renal, Aorta, Nodes) Complete WITHOUT DOPPLER	76882	US Ultrasound Extremity Nonvascular, Limited
93923	US Segmental Pressure Upper or Lower Extremity	93979	US Vascular Aorta/ IVC/ Iliac Limited
76536	US Soft Tissue Head and Neck	93970	US Venous Extremity Bilateral
76881	US Soft Tissue Musculoskeletal Complete	93971	US Venous Extremity Unilateral or Limited

CPT Code	X-Ray	CPT Code	X-Ray
74019	XR Abdomen 2 views	76010	XR Foreign Body Nose To Rectum 1 View Child
74021	XR Abdomen 3 or more views	73120	XR Hand 2 Views
74022	XR Abdomen 3 View Includes PA Chest	73130	XR Hand 3+ Views
73050	XR AC Joints Bilat	73501	XR Hip Unilateral 1 view
73600	XR Ankle 2 Views	73502	XR Hip Unilateral 2-3 views
73610	XR Ankle 3+ Views	73503	XR Hip Unilateral 4+ views
77072	XR Bone Age Study	73521	XR Hips Bilateral 2 views
77073	XR Bone length studies(orthotoentgenogram, scanogram)	73522	XR Hips Bilateral 3-4 views
71045	XR Chest 1 view	73523	XR Hips Bilateral 5+ views
71046	XR Chest 2 views	73060	XR Humerus 2+ Views
71047	XR Chest 3 views	77076	XR Infant Bone Survey
71048	XR Chest 4 or more views	73560	XR Knee 1-2 Views
73000	XR Clavicle Complete	73562	XR Knee 3 Views
73070	XR Elbow 2 Views	73564	XR Knee Complete 4+ Views
73080	XR Elbow 3+ Views	73592	XR Lower Extremity Infant 2+ Views
72081	XR Entire Spine 1 view	70100	XR Mandible 1-3 View
70140	XR Facial Bones 1-2 View	70110	XR Mandible 4+ View
70150	XR Facial Bones 3+ View Complete	70120	XR Mastoids 1-2 View
73551	XR Femur 1 view	70130	XR Mastoids 3+ View Complete
73552	XR Femur 2+ view	77074	XR Metabolic Bone Survey
73140	XR Finger/ Thumb 2+ Views	70160	XR Nasal Bones
73620	XR Foot 2 Views	70360	XR Neck Soft Tissue
73630	XR Foot 3+ Views	70200	XR Orbits 4+ View
73090	XR Forearm 2 Views	70030	XR Orbits for Foreign Body

CPT Code	X-Ray (Cont.)	CPT Code	X-Ray
70190	XR Orbits Limited 2-3 View	72050	XR Spine Cervical 4-5 Views
73650	XR Os Calcis 2+ Views	72052	XR Spine Cervical w Obl, Flex, Ext 6+ View
77075	XR Osseous Survey Complete, Metastatic	72114	XR Spine Lumbar w Flex and Ext 6+ View
72170	XR Pelvis 1-2 View (AP)	72120	XR Spine Lumbar Bending 2-3 View
72190	XR Pelvis 3+ View	72100	XR Spine Lumbosacral 2-3 View
71110	XR Ribs Bilat 3 View	72110	XR Spine Lumbosacral 4+ View
71111	XR Ribs Bilat 4+ View w PA CXR	72082	XR Spine Scoliosis Study 2-3 View
71100	XR Ribs Unilateral 2 Views	72083	XR Spine Scoliosis Study 4-5 View
71101	XR Ribs Unilateral 3 + Views w PA Chest	72084	XR Spine Scoliosis Study 6+ View
72200	XR Sacroiliac Joints 1-2 Views	72070	XR Spine Thoracic 2 View
72202	XR Sacroiliac Joints 3+ View	72072	XR Spine Thoracic 3 View
72220	XR Sacrum, Coccyx 2 View	72074	XR Spine Thoracic 4+ View
70380	XR Salivary Gland w Calculus	72080	XR Spine Thoracolumbar 2 View
73010	XR Scapula Complete	71130	XR Sternoclavicular Joints 3+ View
70240	XR Sella Turcica	71120	XR Sternum 2+ View
73020	XR Shoulder 1 View	70330	XR Temporomandibular Joints
73030	XR Shoulder 2+ Views	73590	XR Tibia, Fibula 2 Views
70210	XR Sinuses 1-2 View	73660	XR Toe 2+ Views
70220	XR Sinuses 3+ View	76100	XR Tomogram
70250	XR Skull 1-3 Views	73092	XR Upper Extremity Infant 2+ Views
70260	XR Skull 4+ View	73100	XR Wrist 2 View
72020	XR Spine 1 View	73110	XR Wrist 3+ Views
72040	XR Spine Cervical 2-3 Views		

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