

GENERAL RADIOLOGY

Reference Sheets for Radiology Coding 2010

HEAD & NECK		
Eye for FB detection		70030
Mandible	3v or less	70100
	4v min.	70110
Mastoid	2v or less	70120
	3v min.	70130
Internal auditory meati, complete		70134
Facial bones	2v or less	70140
	3v min.	70150
Nasal bones, complete	3v min.	70160
Dacryocyst. Naso.Duct (68850)		70170
Optic Foramina		70190
Orbits, complete	4v min.	70200
Sinuses, paranasal	2v or less	70210
	3v min.	70220
Sella Turcica		70240
Skull	3v or less	70250
	4v min.	70260
TMJ open & closed; unilateral		70328
TMJ open & closed; bilateral		70330
Neck, soft tissue		70360
Salivary Gland for calculus		70380
Sialography RS & I (42550)		70390

CHEST		
Chest; frontal	1v	71010
Chest; stereo, frontal		71015
Chest PA/Lateral	2v	71020
Chest w/apical lordotic	3v	71021
Chest w/obliques	4v	71022
Chest w/fluoro	2v	71023
Chest, complete	4v min.	71030
CAD, w or wo digital; chest		0174T+
Chest complete, w/fluoro	4v min.	71034
Chest Special Views	1v	71035
Ribs, unilateral	2v	71100
Ribs, unilat w/PA chest	3v min.	71101
Ribs, bilateral	3v	71110
Ribs, bilat. w/ PA chest	4v min.	71111
Sternum	2v min.	71120
Sternoclavicular joint(s)	3v min.	71130

ABDOMEN		
Single AP view	1v	74000
AP, additional oblique & cone		74010
Complete, includ. decubitus &/or erect		74020
Complete acute series, w/single chest		74022

MAMMOGRAPHY		
Mammogram, Unilateral		77055
Mammogram, Bilateral		77056
Mammogram, Screening		77057
CAD w or wo digital; diagnosite		77051+
CAD w or wo digital; screening		77052+
Digital images, screen Medicare		G0202
Digital images, diag. Bilat. Medicare		G0204
Digital images, diag. unilat. Medicare		G0206

UPPER EXTREMITY		
Clavicle, complete		73000
Scapula, complete		73010
Shoulder	1v	73020
	2v min.	73030
A/C Joints, bilateral		73050
Humerus	2v min.	73060
Elbow	2v	73070
	3v min.	73080
Forearm	2v	73090
Infant, upper extremity	2v min.	73092
Wrist	2v	73100
	3v min.	73110
Hand	2v	73120
	3v min.	73130
Fingers	2v min.	73140
Stress views any joint		77071

LOWER EXTREMITIES		
Hip, unilateral	1v	73500
	2v min.	73510
Hip, bilat w/AP Pelvis	4v	73520
Hips during operative procedure		73530
Pelvis/hips; infant/child	2v min.	73540
Femur	2v	73550
	1 or 2v	73560
	3v	73562
	4v min.	73564
bilateral, standing, AP		73565
Tibia & Fibula	2v	73590
Infant, lower extremity	2v min.	73592
Ankle	2v	73600
	3v min.	73610
Foot	2v	73620
	3v min.	73630
Calcaneus (heel)	2v min.	73650
Toe(s)	2v min.	73660
Stress Views any joint		77071

SPINE & PELVIS			
Spine entire, AP/Lateral	2v	72010	
Spine, specify level	1v	72020	
C-Spine	2 or 3v	72040	
	4v min.	72050	
	5v min.	72052	
Thoracolumbar, standing		72069	
Thoracic	2v	72070	
	3v	72072	
	4v min.	72074	
Thoracolumbar	2v	72080	
Scoliosis, sup & erect		72090	
Lumbosacral	2 or 3v	72100	
	4v min.	72110	
	complete, incl. bending	5v min.	72114
	bending only	4v min.	72120
Pelvis	1 or 2v	72170	
	3v min	72190	
Sacroiliac Joints	1 or 2v	72200	
	3v min	72202	
Sacrum & Coccyx	2v min	72220	

GASTROINTESTINAL	
Pharynx or Larynx w/fluoro	70370
Speech eval. w/cine or video	70371
Pharynx &/or cervical esophagus	74210
Esophagus	74220
Swallow function w/cine/video	74230
FB removal w/balloon catheter RS&I	74235
UGI, w/o KUB w/KUB w/small bowel & KUB air contrast w/o KUB air contrast w/KUB air contrast w/small bowel	74240
	74241
	74245
	74246
	74247
Small intestine	74249
Duodenography, hypotonic	74250
Colon; barium enema w/wo KUB	74260
air contrast	74270
Barium enema, therapeutic	74280
Cholecystography, oral contrast	74283
add'l or repeat exam/mult. day	74290
Intraoperative cholangio/pancreato	74291
add'l set OR, RS & I	74300
	74301+

URINARY TRACT	
Urography; intravenous	74400
Urography; infusion, drip/bolus	74410
with nephrotomography	74415
Retrograde w/wo KUB	74420
Antegrade, RS & I	74425
Cystography - 3v min., RS & I	74430
Vasography/Vesiculo or Epididymo	74440

OTHER PROCEDURES	
Fluoro only - up to 1 hour	76000
Fluoro - more than 1 hour	76001
FB child, nose to rectum, 1v.	76010
Manual app of stress joint rad	77071
Bone Age studies	77072
Bone Length studies	77073
Osseous survey; limited	77074
complete (axial & appendicular)	77075
Osseous survey, infant	77076
Joint survey, 1v., 2+ jnts (specify)	77077
SEXA skeletal	G0130
DXA, 1+ sites; axial	77080
DXA, 1+ sites, appendicular	77081
DXA, vertebral fracture assessment	77082
Radio. absorptiometry, 1+ sites	77083
Abscess, fistula or sinus tract	76080
Complex motion, body sect; unilat	76101
bilateral	76102
Written consult, outside xray	76140
Subtraction w/contrast studies	76350
Unlisted diagnostic radio.procedure	76499

KEY

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CT/ULTRASOUND

Reference Sheets for Radiology Coding 2010

CT SCAN	W/O	WITH	WITH & W/O
Head	70450	70460	70470
Orbit	70480	70481	70482
Maxillofacial	70486	70487	70488
Soft Tissue Neck	70490	70491	70492
Chest	71250	71260	71270
Spine-Cervical	72125	72126	72127
Spine-Thoracic	72128	72129	72130
Spine-Lumbar	72131	72132	72133
Pelvis	72192	72193	72194
Upper Extremity	73200	73201	73202
Lower Extremity	73700	73701	73702
Abdomen	74150	74160	74170
Heart, includes image post processing & quantitative eval of coronary calcium			75571*
Heart, includes cardiac gating and 3D image Post processing; cardiac structure & morphology			75572*
Heart, including cardiac gating & 3D image Post processing; congenital heart disease			75573*

CT SCAN-OTHER

Bone density, 1+ sites; axial skeleton	77078
Bone density; appendicular skeleton	77079
Cisternal/lateral cervical puncture; w/inj. medication or other	61055
Injection myelography &/or CT, spinal	62284
CT Guidance for stereotactic localization	77011
CT Guidance needle placement (biopsy, aspir. Inject), RS & I	77012
CT Guidance for parenchymal tissue ablation	77013
CT Guidance placement of radiation therapy fields	77014
CT limited or localized follow-up study	76380

CTA

Head	70496
Neck	70498
Chest (noncoronary)	71275
Pelvis	72191
Upper Extremity	73206
Lower Extremity	73706
Abdomen	74175
Abd. aorta & bilat. iliofemoral lower extremity runoff, RS & I	75635
Coronary arteries, including cal eval	75574*

Virtual Colonoscopy

CT Colonography, Screening	74263
CT Colonography, Diagnostic wo contrast	74261
CT Colonography, Diagnostic with contrast	74262

OB-Ultrasound

Ultrasound, pregnant uterus, real time w image documentation, fetal & maternal eval,first trimester (<14 wks 0 dys) trans approach; single or first gestation.	76801
Each additional gestation (list separately in addition to code for primary procedure.)	76802
Ultrasound, pregnant uterus, real time w image documentation, fetal & maternal eval,first trimester (>14 wks 0 dys) trans approach; single or first gestation.	76805
Each additional gestation (list separately in addition to code for primary procedure.)	76810
Ultrasound, pregnant uterus, real time w image documentation, plus detailed fetal anatomic exam, trans approach; single or first gestation	76811
each additional gestations (list separately in addition to code for prim proc.	76812
Ultrasound, pregnant uterus, real time w image documentation, first trim fetal nuchal trans single	76813
each additional gesration (list separately in addition to code for primary procedure.)	76814
Pregnant Uterus, limited	76815
Pregnant Uterus, Follow-up	76816
OB, Transvaginal	76817
Fetal Profile w/non-stress testing	76818
Fetal Profile w/o stress or non-stress test	76819
Doppler, Fetal, Umbilical Artery	76820
Doppler, Fetal, Middle Cerebral Artery	76821

NON-INVASIVE VASCULAR	
Extracranial	93875
Carotid/Imaging/Duplex, complete bilat. study	93880
Carotid/Imaging/Duplex, unilat. or limited	93882
Intracranial Art/Doppler complete study	93886
Intracranial Art/Doppler, limited study	93888
Intracranial Art/vasoreactivity	93890
Intracranial Art/emboli detection w/o injection	93892
Intracranial Art/emboli detection w/injection	93893
Upper/lower Extrem., Single level	93922
Upper/Lower Extremity, multiple level	93923
Lower Extrem/Duplex, complete bilat. study	93925
Lower Extrem/Duplex, unilat. or limited	93926
Upper Extrem/Duplex., complete bilat. study	93930
Upper Extrem/Duplex, unilat. or limited	93931
Extremity noninvasive, complete bilat. study	93965
Extrem. Vein, complete bilat. study	93970
Extrem. Vein, unilateral. or limited	93971
Visceral Vascular, Duplex Abdomen/Pelvis	93975
Visceral Vascular, Duplex, limited study	93976
Visceral Vasc, Aorta, IVC, Iliac	93978
Visceral Vasc, Aorta, IVC, Iliac, unilat./limited	93979
Visceral Vasc, Penile, Complete	93980
Visceral Vasc, Penile, limited or follow up	93981
Extremity/Duplex/Hemodialysis Access	93990
Chemo. Admin. into CNS w/spinal puncture	96450

ULTRASOUND

Brain	76506
Ophthalmic, diagnostic, B-Scan & A-Scan	76510
Ophthalmic, diagnostic, A-Scan Only	76511
Ophthalmic, diagnostic, B-Scan	76512
Soft Tissue Head/Neck	76536
Chest	76604
Breast	76645
Abdomen	76700
Abdomen, limited	76705
Retroperitoneal	76770
Retroperitoneal, limited	76775
Kidney Transplant	76776
Spinal canal & contents	76800
Transvaginal	76830
Pelvic, Non-OB	76856
Pelvic, Non-OB, limited or follow up	76857
Scrotum	76870
Transrectal	76872
Prostate, brachytherapy treatment (sep. proc.)	76873
Extremity, Non-Vascular	76880
Infant Hips Dynamic	76885
Infant Hips Static	76886
Guided Repair Pseudoaneurysm	76936
Guidance, vascular access; eval access sites	76937+
Guidance, visceral tissue ablation	76940
Guidance Intrauterine Fetal Transfusion	76941
Guidance Chronic Villus Sampling	76945
GI Endoscopic	76975
Bone density measurement, peripheral site(s)	76977
Intraoperative	76998

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MRI
Reference Sheets for Radiology Coding 2010

<u>MRI</u>	<u>W/O</u>	<u>WITH</u>	<u>WITH & W/O</u>
Chest complete, w/fluoro	70551	70552	70553
Brain, during open intracranial procedure	70557	70558	70559
Brain, functional MRI; inc test selection & admin of stimulation			70554
Brain functional MRI; Requiring neurofunctional testing			70555
Orbit, Face and/or Neck	70540	70542	70543
Chest	71550	71551	71552
Upper Extremity, other than joint	73218	73219	73220
Upper Extremity, any joint	73221	73222	73223
Lower Extremity, other than joint	73718	73719	73720
Lower Extremity, any joint	73721	73722	73723
Spine-Cervical	72141	72142	72156
Spine-Thoracic	72146	72147	72157
Spine-Lumbar	72148	72149	72158
Pelvis	72195	72196	72197
Abdomen	74181	74182	74183
Cardiac for Morphology	75557	-	75561
Cardiac for Morphology with stress imaging	75559	-	75563
Cardiac for velocity flow mapping - add on +			75565*
TMJ's			70336
Breast, Unilateral			77058
Breast, Bilateral			77059
CAD for MRI breast			0159T+
MR Spectroscopy			76390
Bone marrow blood supply			77084

<u>MRA</u>	<u>W/O</u>	<u>WITH</u>	<u>WITH & W/O</u>
Head	70544	70545	70546
Neck	70547	70548	70549
Chest w/ or w/o contrast			71555
Spinal Canal w/ or w/o contrast			72159
Pelvis w/ or w/o contrast			72198
Upper extremity w/ or w/o contrast			73225
Lower extremity w/ or w/o contrast			73725
Abdomen w/ or w/o contrast			74185

3D Reconstruction

Not requiring image post processing on independent workstation	76376
Requiring image post processing on independent workstation	76377

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NUCLEAR MEDICINE

Reference Sheets for Radiology Coding 2010

<u>ENDOCRINE</u>	
Thyroid: uptake only (single)	78000
Thyroid: uptake (multiple)	78001
Thyroid: imaging w/uptake single	78006
Thyroid: imaging w/uptake multi.	78007
Thyroid: imaging only	78010
Thyroid: CA metastases (Ltd)	78015
Thyroid: CA mets whole body	78018
Parathyroid Imaging	78070
Adrenal Imaging	78075

<u>HEMATOPOIETIC/RETICL./LYMPH</u>	
Bone marrow: limited	78102
Bone marrow: whole body	78104
Spleen imaging w/ or w/o flow	78185
Lymph & lymph gland imaging	78195

<u>GI SYSTEM</u>	
Liver imaging: static only	78201
Liver imaging: static w/flow	78202
Liver imaging: SPECT	78205
Liver imaging w/Vascular flow	78206
Liver & Spleen imaging static	78215
Liver & Spleen imaging w/flow	78216
Liver function study	78220
Hepatobiliary-gallbladder study	78223
Salivary gland imaging: single	78230
Salivary gland imaging: multiple	78231
Gastroesophageal reflux	78262
Gastric emptying	78264
Bowel Imaging (Meckel's)	78290
Peritoneal-venous shunt(LeVeen)	78291
GI imaging/Unlisted Proc.	78299

<u>CARDIOVASCULAR SYSTEM</u>	
Cardiac shunt detection	78428
Vascular flow imaging	78445
Venogram: unilateral	78457
Venogram: bilateral	78458
Myocard. PET, Metabolic Evaluation	78459
Myocard. Perfusion: single, wall & EF	78453*
Myocard. Perfusion: multiple, wall & EF	78454*
Myocard. Perf: SPECT single, wall & EF	78451*
Myocard. Perf: SPECT multi, wall & EF	78452*
Infarct Imaging: planar	78466
Infarct Imaging: 1st pass w/EF	78468
Infarct Imaging: SPECT	78469
CBPG: sgl, wall motion+EF w or w/o	78472
CBPG: multi., wall motion+EF	78473
CBP-1st pass, sgl, wall mtn+EF	78481
CBP-1st pass, multi., wall mtn+EF	78483
PET Myocard. Perf. Single Study	78491
PET Myocard. Perf. Multi.. Study	78492
CBP-SPECT	78494
CBP-gated w/rt ventricular EF	78496 +

<u>CENTRAL NERVOUS SYSTEM</u>	
Brain imaging: comp. Static	78605
Brain imaging: comp. W/flow	78606
Brain imaging: SPECT	78607
PET; metabolic evaluation	78608
PET; perfusion evaluation	78609
Cerebral blood flow, inert	78615
CSF-Imaging (Inj. 61055)	78630
CSF-Shunt Eval. (Inj. 61070)	78645
CSF-Imaging Tomo SPECT	78647
CSF-Leak Detect/Loc (Inj. 61055)	78650
Dacryocystography	78660

<u>MUSCULOSKELETAL SYSTEM</u>	
Bone &/or Joint; limited	78300
Bone &/or Joint; multiple areas	78305
Bone &/or Joint; whole body	78306
Bone &/or Joint; 3 phase study	78315
Bone &/or Joint; tomographic (SPECT)	78320

<u>MISC. STUDIES</u>	
Tumor loc; limited	78800
Tumor loc; multiple areas	78801
Tumor loc; whole body, single day	78802
Tumor loc; SPECT	78803
Tumor loc; whole body, 2+ days	78804
Abscess localization, limited area	78805
Abscess localization, whole body	78806
Abscess localization, SPECT	78807

<u>THERAPEUTIC</u>	
Radiopharmaceutical, oral	79005
Radiopharmaceutical, intravenous	79101
Radiopharmaceutical, intracavitary	79200
Rx, anitbody, intravenous	79403
Radiopharmaceutical, intra-arterial	79445

<u>RESPIRATORY SYSTEM</u>	
Pulmonary Perfusion Imaging	78580
Pulm. Perf particulate w/vent; single breath	78584
- rebreathing & washout (Xenon)	78585
Pulm. Vent, aerosol; single projection	78586
Pulm. Vent, aerosol; multiple projections	78587
Pulm. Perf particulate w/vent, aerosol (DTPA)	78588
Pulm. Vent, gas, single breath	78591
Pulm. Vent, gas, single projection	78593
Pulm. Vent, gas, multiple projections	78594
Pulm. Quant. Diff. Function (V/Q study)	78596

<u>GU SYSTEM</u>	
Kidney imaging morphology: static only	<78700>
w/vascular flow	78701
w/vasc. flow/funct. sgl w/o pharm	<78707>
w/vasc. flow/funct. sgl w/pharm	<78708>
w/vasc. flow/funct. multi. w/wo pharm	<78709>
tomographic (SPECT)	<78710>
Kidney function study non-imaging radio	78725
Ureteral Reflux	78740
Testicular imaging w/vascular flow	<78761>

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VENOUS ACCESS PROCEDURES
Reference Sheets for Radiology Coding 2010

CENTRALLY INSERTED DEVICE

PERIPHERALLY INSERTED DEVICE

Placement		Placement	
Non Tunneled child <5	36555 @	Non Tunneled PICC child <5	36568 @
Non Tunneled (5+ older)	36556	Non Tunneled PICC (5+ older)	36569
Tunneled <5 no port, no pump	36557 @	PICC w/port child <5	36570 @
Tunneled (5+ older) no port, no pump	36558 @	PICC w/port (5+ older)	36571 @
Tunneled port child <5	36560 @		
Tunneled port (5+ older)	36561 @	Repair	
Tunneled pump	36563 @	PICC no port, no pump	36575
2 tunneled cath., 2 access sites (no port, no pump)	36565 @	PICC w/port	36576 @
2 tunneled cath., two access sites, w/port	36566 @		

Repair		Partial Replacement (Cath. Only)	
Non Tunneled no port, no pump, cent. or peripheral	36575	PICC w/port	36578 @
Tunneled no port, no pump, cent. or peripheral	36575		
Tunneled port, cent. or peripheral	36576 @	Complete Replacement through same access	
Tunneled pump, cent. or peripheral	36576 @	PICC	36584
2 Tunneled cath., 2 access sites (no port, no pump)	36575 (x2)	PICC w/port	36585 @
2 Tunneled cath., 2 access sites, w/port	36576 (x2) @		

Partial Replacement (Cath. Only)		Removal	
Port, central or peripheral	36578 @	Non tunneled no port, no pump	99XXX**
Pump, central or peripheral	36578 @	PICC w/port or pump	36590 @
2 Tunneled cath., 2 access sites, w/port	36578 @ (x2)		

CENTRAL/PERIPHERAL CVA DEVICE MAINTENANCE

CVAD Patency check	<36598>	
Reposition central venous catheter	36597	76000
Thrombolytic declotting of vascular access	36550	N/A
CVA maintenance fibrin stripping (sep access)	36595	75901
CVA maintenance through lumen (brushing)	36596	75902

Complete Replacement through same access		IMAGING FOR CENTRAL/PERIPHERAL DEVICE PROC	
Non Tunneled	36580	Fluoro guidance placement	77001+
Tunneled, no port no pump	36581 @	Fluoro guidance replacement, partial or complete	77001+
Tunneled port	36582 @	Fluoro guidance removal	77001+
Tunneled pump	36583 @	US guidance for vascular access	76937 +
2 Tunneled cath., 2 access sites (no port, no pump)	36581 @ (x2)	Venography,caval,superior w/serialography	75827
2 Tunneled cath., 2 access sites w/port	36582 @ (x2)	Venography,extremity,unilateral	75820
Chest complete, w/fluoro	36583 @ (x2)	Fluoro for Exchange Only	76000
Removal		ENDOVENOUS ABLATION THERAPY OF VEIN	
Non Tunneled no port, no pump	99XXX**	Venipuncture, <3 yrs old, (not routine)	36400
Tunneled no port, no pump	36589	Venipuncture, >3+ yrs, diagnostic or therapeutic	36410
Tunneled port	36590 @	Inj for treatment of extremity pseudoaneurysm	36002
Tunneled pump	36590 @	Transfusion, blood or blood components	36430
2 Tunneled cath., 2 access sites (no port, no pump)	36589 (x2)	Single or multi inj of sclerosing solution, limb/trunk	36468
2 Tunneled cath., 2 access sites port	36590 @ (x2)	Single or Multi inj of sclerosing solution, face	36469
		Extremity, percutaneous, radiofrequency; 1st vein	36475
		Single extremity, 2nd & subsequent vein (sep access)	36476 +
		Extremity, percutaneous, laser; 1st vein	36478
		Single extremity, 2nd & subsequent vein (sep access)	36479 +

* For multi-cath. devices use the appropriate repair, partial or complete replacement or removal code describing the service with a frequency of two.

** Removal of a non-tunneled device is considered inherent to E & M, report appropriate level of E & M provided.

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SURGERIES & INTERVENTIONAL RADIOLOGY
Reference Sheets for Radiology Coding 2010

Selective Vascular Catheterizations

ARTERIAL VASCULAR FAMILY	1st Order	1st & 2nd Order *	1st, 2nd & 3rd Order *	Each Add'l 2nd or 3rd Order *
Rt Brachiocephalic (Carotid/Subclavian)	36215	36216	36217	36218 x__
Left Carotid	36215	36216	36217	36218 x__
Left Subclavian	36215	36216	36217	36218 x__
Other Thoracic Aorta Vascular Family	36215	36216	36217	36218 x__
Celiac	36245	36246	36247	36248 x__
SMA	36245	36246	36247	36248 x__
IMA	36245	36246	36247	36248 x__
Right Renal	36245	36246	36247	36248 x__
Left Renal	36245	36246	36247	36248 x__
Iliac, Ipsilateral	36245	36246	36247	36248 x__
Common Iliac, Contralateral	36245	36246	36247	36248 x__
Common Femoral, Ipsilateral	36245	36246	36247	36248 x__
Common Femoral, Contralateral	N/A	36246	36247	36248 x__
Other Abdominal Aorta Vascular Family	36245	36246	36247	36248 x__
Right Heart or Main Pulmonary Artery	36013	N/A	N/A	N/A
Left Pulmonary (includes pressures)	N/A	36014	36015	36015 x__
Right Pulmonary (includes pressures)	N/A	36014	36015	36015 x__
VENOUS VASCULAR FAMILY	1st Order	1st & 2nd Order *	1st, 2nd & 3rd Order *	Each Add'l 2nd or 3rd Order *
Right Renal	36011	36012	36012	36012
Left Renal	36011	36012	36012	36012
Jugular	36011	36012	36012	36012
Left Adrenal	N/A	36012	36012	36012
Right Adrenal	36011	36012	36012	36012
Selective Organ Blood Sampling	36500 x__			
Other Venous Vascular Family	36011	36012	36012	36012
Portal Venogram	36481			

Code catheterizations of Different Vascular Families Separately.

* Code Multiple Catheterizations in the Same Vascular Family to the Highest Order.

Use the "Each Additional" Code for Each Additional 2nd or 3rd Order Vessel.

Non-Selective Vascular Catheterizations

Aorta, Catheter (Femoral, Brachial, Axillary)	36200
Extremity Artery, Needle/Intracatheter, Unilateral	36140
Radial artery catheter for pressures/monitoring	36620
Arteriovenous Dialysis Shunt & Imaging	36147*
Arteriovenous Dialysis Shunt 2nd puncture	36148*
Extremity Vein, Needle/Intracath., Uni (inc contrast)	36005
Aorta, Translumbar	36160
Carotid/Vertebral, direct puncture	36100
Retrograde Brachial	36120
Superior or Inferior Vena Cava, Catheter	36010

CONSCIOUS SEDATION

Under 5 yrs of age, 1st 30 mins intra-service time	99143
Age 5 or older, 1st 30 mins intra-service time	99144
Each addl 15 mins intra-service time	99145 +
Closure Device	G0269

UNLISTED IMAGING CODES

Unlisted, Fluoroscopic procedure	76496
Unlisted, CT procedure	76497
Unlisted, MR procedure	76498
Unlisted, US procedure	76999

KEY

* NEW CODE

◇ REVISED CODE

@ CONSCIOUS SEDATION INCLUDED

Supervision & Interpretation

ARTERIOGRAPHY	
Thoracic Aortography	75605
Abdominal Aortography	75625
Abdominal Aortogram w/Run-offs	75630
Cervicocerebral (Arch)	75650
Brachial, Retrograde	75658
Carotid, External, Unilateral	75660
Carotid, External, Bilateral	75662
Carotid, Cerebral, Unilateral	75665
Carotid, Cerebral, Bilateral	75671
Carotid, Cervical, Unilateral	75676
Carotid, Cervical, Bilateral	75680
Vertebral, Unilateral	75685
Vertebral, Bilateral	75685 x2
Spinal, Selective, Each Vessel	75705 x__
Extremity, Unilateral	75710
Extremity, Bilateral	75716
Renal, Unilateral (w or w/o flush)	75722
Renal, Bilateral (w or w/o flush)	75724
Visceral, w-w.o Flush, Each Vessel	75726 x__
Adrenal, Unilateral	75731
Adrenal, Bilateral	75733
Pelvic, Each Vessel, Selective	75736 x__
Pulmonary, Unilateral	75741
Pulmonary, Bilateral	75743
Pulmonary, Nonselective	75746
Internal Mammary	75756
Each additional vessel after basic	75774+ x__
AV Dialysis Shunt /separate access	75791*
VENOGRAPHY	
Extremity, Unilateral	75820
Extremity, Bilateral	75822
IVC	75825
SVC	75827
Renal, Unilateral	75831
Renal, Bilateral	75833
Adrenal, Unilateral	75840
Adrenal, Bilateral	75842
Sinus or Jugular	75860
Superior Sagittal Sinus	75870
Epidural	75872
Orbital	75880
Hepatic w/Hemodynamic Eval.	75889
Hepatic wedge press; no venogram	75889-52
Hepatic w/o Hemodynamic Eval	75891
Venous Sampling (eg. Renins)	75893 x__
LYMPHANGIOGRAPHY	
Extremity only, Unilateral	75801
Extremity only, Bilateral	75803
Pelvic/abdominal, Unilateral	75805
Pelvic?abdominal, Bilateral	75807
OTHER	
Splenoportography	75810

SURGERIES & INTERVENTIONAL RADIOLOGY

Reference Sheets for Radiology Coding 2010

PERC. TRANSLUM. ANGIOPLASTY	SURGICAL	S&I	SPINE INTERVENTIONS	SURGICAL	S&I
PTA-Peripheral Tibioperoneal	35470 @	75962	Perc., one vertebral; thoracic	22520	*
PTA-Renal or Visceral Artery	35471 @	75966	Perc., one vertebral; lumbar	22521	*
PTA-Aorta	35472 @	75966	Each Add'l. thoracic or lumbar	22522 x	*
PTA-Iliac Artery	35473 @	75962	Perc. Vertebral augmentation; thoracic	22523	*
PTA-Femoral-Popliteal Arteries	35474 @	75962	Perc. Vertebral augmentation; lumbar	22524	*
PTA-Brachiocephalic Arteries	35475 @	75962	; each addtl thoracic or lumbar	22525 +	*
PTA-Venous	35476 @	75978	Inj, single, not indwelling cath; cervical or thoracic	62310	*
PTA, Each Add'l. Tibioperoneal vessel	35470 @ x	75964 x	Inj, single, not indwelling cath; lumbar,sacral	62311	*
PTA, Each Add'l. Visceral vessel	35471 @ x	75968 x	Inj, incld cath placement, continuous infusion;		
PTA, Each Add'l. Iliac vessel	35473 @ x	75964 x	cervical or thoracic	62318	*
PTA, Each Add'l Femoral-Popliteal	35474 @ x	75964 x	Inj, incld cath placement, continuous infusion;		
PTA, Each Add'l. Brachiocephalic	35475 @ x	75964 x	lumbar, sacral	62319	*
* CT Guidance (72292); Fluoro Guidance (72291)					

TIPS	S&I	ARTHROGRAPHY	SURGICAL	S&I
TIPS	37182	TMJ	21116	70332
TIPS Revision	37183	Shoulder	23350	73040

INTRAVASCULAR STENTS	SURGICAL	S&I	SURGICAL	S&I	
Intravascular stent, percutaneous, initial (not coronary, carotid or vertebral Vessel)	37205	75960	Elbow	24220	73085
Intravasc. stent, perc., Each Add'l vessel	37206+	75960	Wrist	25246	73115
Intravascular stent, percutaneous, (cervical carotid) with embolic protection	37215 @	Included	Hip	27093	73525
Intravascular stent, percutaneous, (cervical carotid) w/o embolic protection	37216 @	Included	Knee	27370	73580
			Ankle	27648	73615
			Sacroiliac joint	27096	73542

Thrombectomy (Non Coronary, Non-AVF)	SURGICAL	S&I	MYELOGRAPHY/DISKOGRAPHY	SURGICAL	S&I
Prim Perc Trans Mechanical, arterial, initial	37184 @		Lumbar puncture, for myelogram	62284	
Perc Trans Mechanical, arterial, 2nd +	37185 @ +		Lumbar puncture, diagnostic,w/o inject.	62270	77003
Secondary Perc Trans Mechanical, arterial	37186 @ +		Lumbar puncture, therapeutic drug	62272	77003
Perc Trans Mechanical, veins	37187 @		Cervical puncture, for myelogram	61055	
Chest complete, w/fluoro	37188 @		Cervical puncture, w/o injection	61050	77003
			Puncture Shunt Tubing	61070	75809
			Cervical Myelogram		72240
TRANSCATHETER THERAPY MISC.	SURGICAL	S&I	Thoracic Myelogram		72255
Transcatheter biopsy	37200	75970	Lumbar Myelogram		72265
Infusion - thrombolysis, other than coronary	37201	75896	Complete Myelogram		72270
Infusion other than thrombolysis, any type	37202	75896	Diskography, Lumbar, Each Level	62290	72295
Foreign Body Retrieval	37203 @	75961	Diskography, Cerv/Thoracic, Ea Level	62291	72285
Exchange intravascular cath during thrombo thrpy	37209	75900	Facet inj/aspiration	20600/20605/	77002
IVC Filer (code IVC gram separately)	37620	75940	sm/inter/major joint	20610	

DIALYSIS ACCESS INTERVENTIONS	SURGICAL	S&I	EMBOLIZATION	SURGICAL	S&I
Clot Removal, Any Method	36870 @	N/A	Embolization (Non-Nuero)	37204	75894
Dialysis Fistulagram	36147*	included	Cerebral Balloon Occlusion Test (BOT)	61623	
Additional puncture	36148*	N/A	Embolization (CNS) permanet	61624	75894
PTA vein (Use once unless central also)	35476	75978	Embolization (Non-CNS) Head or Neck	61626	75894
Fistulagram with needles in	N/A	75791*	F/U Angio Post Embolization	N/A	75898 x
Peritoneal dialysis catheter placement	49421	75989	Embolization Uterine Artery (UFE)	37210	Included
Peritoneogram (Air &/or Contrast)	49400	74190			

HEMIC/LYMPHATIC	SURGICAL	S&I
Injection procedure; lymphangiography, unilat.	38790	75805
Injection procedure; lymphangiography, bilat.	38790-50	75807
Shuntogram prev. placed non-vasc shunt	49427	75809

KEY
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 <> REVISED CODE
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SURGERIES & INTERVENTIONAL RADIOLOGY
Reference Sheets for Radiology Coding 2010

GASTROINTESTINAL TRACT	SURGICAL	S & I
Perc. Transhepatic Cholangiogram (PTHC)	47500	74320
Inject., Cholangiography, exist cath (T-Tube)	47505	74305
Perc. Biliary drainage (External)	47510	75980
Perc. Biliary drainage (Int. and Ext.)	47511	75982
Change of Biliary drainage catheter	47525	75984
Revise/Reinsert Transhepatic tube	47530	75984
Perc. Dilation biliary stricture w/o stent	47555	74363
Perc. Dilation biliary stricture w/stent	47556	74363
Cholangioscopy, perc., w/ or w/o brush/wash	47552	N/A
Cholangioscopy, perc., with biopsy	47553	N/A
Cholangioscopy, perc., w/calculus/calculi rem.	47553	N/A
Biliary Stone Removal via T-Tube	47630	74327
Perc. Placement Gastrostomy Tube	43750	74350
Naso/Oro gastric tube placement	43752	
G tube insertion	49440 @	N/A
Duoden or Jejunost tube insertion	49441 @	N/A
Colonic tube insertion	49442 @	N/A
Convert G tube to G-J tube	49446 @	N/A
Replace G tube	49450	N/A
Replace Duoden or Jejunost tube	49451	N/A
Replace G-J tube	49452	N/A
Removal of material from any GI tube	49460	N/A
Contrast eval of any GI tube	49465	N/A
Long GI Tube, Enteric Tube Placement	44500 @	74340
Small bowel, via enterolysis tube	44500 @	74251
Perc. Cholecystostomy	47490	75989
ERCP Biliary ducts	-----	74328
ERCP Pancreatic ducts	-----	74329
ERCP Pancreatic and Biliary ducts	-----	74330
Herniography/Pneumoperitoneum	49400	74190
Perc RFA, Liver tumor(s), US guidance	47382	76940
Perc RFA, Liver tumor(s), CT guidance	47382	77013
Perc RFA, Liver tumor(s), MR guidance	47382	77022

URINARY PROCEDURES	SURGICAL	S & I
Remove & replace internal stent via perc	50382 @	incl
Removal of internally dwelling stent via perc	50384 @	incl
Removal/replacement external stent	50387	incl
Removal of nephrostomy tube	50389	
Antegrade pyelogram, new	50390	74425
Instillation Therapeutic Agent	50391	77002
Perc Nephrostomy	50392	74475
Ante pyelography, exist tube/nephrostogram	50394	74425
Change Perc. Tube-Kidney	50398	75984
Percutaneous Ureterostomy	50393	74480
Dilation Nephrostomy tract/Pyelostomy	50395	74485
US Guidance for needle placement	50390	76942
CT Guidance for needle placement	50390	77012
Aspiration, Renal Cyst by Needle (Fluoro)	50390	77002
Contrast study of renal cyst	50390	74470
Change of ureterostomy tube or externally access ureteral stent via ileal conduit	50688	75984
Ileoconduit Injection (Loopogram)	50690	74425
Cystogram	51600	74430
Urethrocystogram, Voiding	51600	74455
Urethrocystogram, Retrograde	51610	74450
* CT Guidance (77012 *) or Fluoro Guidance (77002 *)		

OB/GYN	SURGICAL	S & I
Pelvimetry	N/A	74710
Hysterosalpingogram	58340	74740
Hysterosalpingogram, w/ or w/o color flow	58340	76831
Sonohysterography	58345	74742
Fallopian tube recanalization	58345	74742

DRAINAGE	SURGICAL	S & I
Fistula or Sinus Tract Study	20501	76080
Thoracentesis, needle puncture	32421	*
Thoracentesis with catheter	32422	*
Chest tube for pneumothorax	32551 @	75989
Abscess drainage, pleural (Empyema)	32551 @	75989
Abscess drainage, lung	32201 @	75989
Abscess drainage, Appendiceal	44901 @	75989
Abscess/Cyst drainage, liver	47011 @	75989
Pancreatic pseudocyst drainage	48511 @	75989
Abscess drainage, Peritoneal	49021 @	75989
Abscess drainage, Subdiaphragmatic	49041 @	78989
Abscess drainage, Retroperitoneal	49061 @	75989
Para/Peritoneocentesis, Initial	49080	*
Para/Peritoneocentesis, Subsequent	49081	*
Change of Abscess Drain Cath (inc. inject.)	49423	75984
Abscessogram (Tube Check)	49424	76080
Abscess drainage, Renal or Perirenal	50021 @	75989
Perc. Drainage pelvic abscess, transvag/rect	58823 @	75989
Removal of tunneled pleural cath	32552*	N/A
Instillation chest tube agent for fibrinolysis	32561*	N/A
*** subsequent day	32562*	N/A
* CT (77012); Fluoro (77002); US (76942); MR (77021)		

BIOPSIES	SURGICAL	S & I
Muscle or soft tissue, percutaneous	20206	*
Bone, superficial, percutaneous	20220	*
Bone, deep, percutaneous	20225	*
Pleura, Percutaneous	32400	*
Lung/Mediastinum, Percutaneous	32405	*
Lymph nodes, superficial, percutaneous	38505	*
Liver, percutaneous, separate procedure	47000	*
Liver, percutaneous, w/Other procedure	47001 +	*
Liver, percutaneous,	48102	*
Abdomen/Retroperitoneal, Percutaneous	49180	*
Renal (Kidney), Percutaneous	50200	*
Renal Cyst, Percutaneous	50390	*
Prostate	55700	*
Thyroid, Percutaneous	60100	*
Spinal Cord, Percutaneous	62269	*
FNA w/o imaging guidance	10021	N/A
* CT (77012); Fluoro (77002); US (76942); MR (77021)		

BREAST	SURGICAL	S & I
Breast biopsy; percut., no image guidance	19000	**
Add'l. Breast Cyst Aspiration	19001+ x	**
FNA w/o imaging guidance	10021	**
Ductogram (Galactogram), single duct	19030	77053
Ductogram (Galactogram), multiple ducts	19030 x	77054
Breast Biopsy, percutaneous, needle core	19102	**
Vacuum assisted or rotating device	19103	**
Image guided plcmnt. of clip, during biopsy	19295+	**
Breast Wire Localization	19290	77032
Breast Loc. Each Addl. Lesion	19291 + x	77032
Sentinel Node Injection	38792	**
Rad Exam surgical specimen	-----	76098
**Guidance Modalities for Breast Procedures		S & I
Stereotactic guidance, each lesion		77031
Mammographic guidance, each lesion		77032
US guidance for needle placement		76942
CT guidance for needle placement		77012
Fluoro guidance for needle placement		77002
MR guidance for needle placement		77021

KEY

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SURGERIES & INTERVENTIONAL RADIOLOGY

Reference Sheets for Radiology Coding 2010

<u>THORACIC AORTIC ANEURYSM REPAIR</u>	<u>SURGICAL</u>	<u>S & I</u>	<u>Unlisted Procedures</u>	<u>SURGICAL</u>
Endovascular Repair of descending thoracic aorta ; involving coverage of left subclavian origin	33880	75956	Unlisted, Vascular Injection	36299
			Unlisted, Vascular Surgery	37799
Endovascular Repair of descending thoracic aorta ; not involving coverage of left subclavian origin	33881	75957	Unlisted, Biliary Tract	44799
			Unlisted, Digestive Tract	49999
Placement of extension prosthesis for endovascular Repair of descending thoracic aorta	33883	75958	Unlisted, Urinary System	53899
; each addtl proximal extension	33884 +	75958	Unlisted, Endocrine System	60699
Placement of prosthesis delayed after endovascular repair	33886	75959		
Open sub to carotid artery transposition in conj w/endovascular repair of aorta, by neck, unilateral	33889			
Bypass graft, w/other vein, transcervical retro- pharyngeal in conj w/endovascular repair, by neck	33891			

<u>RF ABLATION & CRYO-ABLATION</u>	<u>SURGICAL</u>	<u>S & I</u>
Ablation, 1 or more renal tumors, unilateral, perc, radiofrequency	50592	*
Ablation, 1 or more renal tumors, bilateral, perc, radiofrequency	50592-50	*
Ablation, renal tumor(s), unilateral, perc, cryotherapy	50593	*
Ablation, 1 or more pulmonary tumors, including pleura or chest wall, perc, radiofrequency	32998	*
* CT (77013); US (76940); MR (77022)		

<u>INTRACRANIAL STENT / PTA</u>	<u>SURGICAL</u>	<u>S&I</u>
Balloon angio, percutaneous	61630	
Balloon dilatation intracranial vasospasm, perc. ; initial vessel	61640	
; each additional in same vascular family	61641 +	
; each additional in different vascular family	61642 +	
Trans cath plcmt of intravascular stent intracranial	61635	Inc
Trans cath plcmt of extracranial vertebral or intrathoracic carotid artery stent, perc, initial vessel	0075T	
; each additional vessel	0076T +	

KEY

* NEW CODE

<> REVISED CODE

@ CONSCIOUS SEDATION INCLUDED

MODIFIERS / GLOBAL PERIODS
Reference Sheets for Radiology Coding 2010

MODIFIERS	EXPLANATION
21	Prolonged E & M Services
22	Unusual Procedural Services
24	Unrelated E & M Service by Same Physician During Postoperative Period
25	Significant, Separately Identifiable E & M Service by the Same Physician on the Same Day of the Procedure or Other Service
26	Professional Component
32	Mandated Service
50	Bilateral Procedure
51	Multiple Procedure
52	Reduced Services
53	Discontinued Procedure
58	Staged or Related Procedures or Service by the Same Physician During the Postoperative Period
59	Distinct Procedural Service
62	Two Surgeons
76	Repeat Procedure by Same Physician
77	Repeat Procedure by Another Physician
78	Return to OR for a Related Procedure During Postoperative Period
79	Unrelated Procedure or Service by the Same Physician During Postoperative Period
80	Assistant Surgeon
GG	Performance and payment of a screening mammogram and diagnostic mammogram on the same patient, same day

CPT CODE	DESCRIPTION	GLOBAL PERIOD
32002	Chest tube pneumothorax	000
43750	Percutaneous placement gastrostomy tube	010
43752	Naso/oro gastric tube placement	000
43760	Replace/change G or J tube straight forward	000
43761	J tube through G tube	000
44500	Long GI tube, enteric tube placement	000
47490	Percutaneous cholecystostomy	090
47500	Percutaneous transhepatic cholangiogram	000
47505	Injection, cholangiography, existing tube	000
47510	Percutaneous biliary external drainage	090
47511	Percutaneous biliary internal/external drainage	090
47525	Change of the biliary drainage catheter	010
47530	Revise/reinsert transhepatic tube	090
47555	Percutaneous dilatation biliary stricture, w/stent	000
47556	Percutaneous dilatation biliary stricture, w/o stent	000
47630	Biliary stone removal via T-tube	090
49423	Change of abscess drainage catheter	000
50390	Antegrade Pyelogram, new	000
50392	Percutaneous nephrostomy	000
50393	Percutaneous ureterostomy	000
50394	Antegrade pyelogram, existing tube/nephrostogram	000
50395	Dilatation nephrostomy tract / pyelostomy	000
50398	Change percutaneous tube-kidney	000

000 - There is no global period for these services.

010 - there is a 10 day period in which the consecutive procedures would need to be modified in order to receive payment.

090 - There is a 90 day period in which the consecutive procedures would need to be modified in order to receive payment.

The modifiers utilized are -24, -25, -59, -78, and -79.

We will add the appropriate modifier to the E & M codes as they are necessary.