

**RADIOLOGY REFERENCE GUIDE**

**Please Note:**

**CT/MRI/Arthrograms Prior Authorizations:**  Progress notes and demographics must be sent with orders so Novello Imaging can obtain prior authorizations for CT/MRI Exams.

\*\*Same day STATs for CT must have prior authorization by ordering office before test\*\*

**CT Lung Cancer Screening:**  **Eligibility form must be completely filled out and sent with order/notes.** Patients must meet all criteria, only patients aged 50-77 qualify. The Eligibility form can be found on the Novello Imaging website [Lung Cancer Screening Form](https://www.novelloimaging.org/application/files/3016/7664/8043/Lung_Screen_Form_2023-2.pdf).

**Contrasted CT Studies and labs:** If the patient is 60 or older, has diabetes, hypertension, renal insufficiency (kidney disease/one kidney), or pheochromocytoma, labs (GFR/Creatinine) within 30 days must be included in the order.

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| --- | --- | --- | --- | --- | --- |
| BODY PART | REASON FOR EXAM | IV CONTRAST | ORAL CONTRAST | PROCEDURE NAME | CPT CODE |
| HEAD | * Stenosis * Aneurysm | YES | NO | CT ANGIO BRAIN W/ CONTRAST | 70496 |
| NECK | * Carotid Stenosis * Aneurysm * Occlusions * Non-acute stroke symptoms | YES | NO | CT ANGIO NECK W/ CONTRAST | 70498 |
| CHEST  PE Protocol | * Suspected PE * Thoracic Aneurysm | YES | NO | CT ANGIO CHEST W/CONTRAST | 71275 |
| THORACIC AORTA | * Without Stent | YES | NO | CT ANGIO CHEST W/CONTRAST | 71275F |
| * With Stent | YES | NO | CT ANGIO CHEST W/CONTRAST | 71275G |
| ABDOMEN | * Abdominal aortic aneurysm | YES | NO | CT ANGIO ABDOMEN W/ CONTRAST | 74175 |
| ABDOMEN/ PELVIS | * Mesenteric ischemia * Pre op AAA surgery * Pre or post op evaluation | YES | NO | CT ANGIO ABDOMEN/PELVIS W/ CONTRAST | 72191 |

\*\*All CTA’s come standard with arterial phase 3D work-ups\*\*

\*\*CTA Head and Neck for post TIA symptoms can be done per request\*\*

| BODY PART | REASON FOR EXAM | IV CONTRAST | ORAL CONTRAST | PROCEDURE NAME | CPT CODE |
| --- | --- | --- | --- | --- | --- |
| HEAD/NECK | | | | | |
| HEAD/BRAIN | * CVA/TIA * Dizziness * Memory loss * Trauma * Hemorrhage * Seizures | NO | NO | CT HEAD W/O CONTRAST | 70450 |
| * Lesion * Infection * Tumor/mass/ metastasis | YES | NO | CT HEAD W/ AND W/O CONTRAST | 70470 |
| SINUS | * Polyps * Postnasal drip * Sinusitis * Surgical planning | NO | NO | CT SINUS W/O CONTRAST | 70486 |
| FACE | * Cellulitis * Infection/abscess * Soft tissue mass | YES | NO | CT FACIAL BONES W/ CONTRAST | 70487 |
| * Injury/trauma, concern for fracture | NO | NO | CT FACIAL BONES W/O CONTRAST | 70486 |
| ORBITS | * Mass * Apoptosis * Infection * Swelling * Vision Changes | YES | NO | CT ORBITS W/ CONTRAST | 70481 |
| TEMPORAL BONES | * Otitis Media * Cholesteatoma * Conductive hearing loss * Mastoiditis | NO | NO | CT TEMPORAL BONES W/O CONTRAST | 70480 |
| SOFT TISSUE NECK | * Adenopathy * Dysphagia * Infection/abscess * Mass/neoplasm * Vocal cord paralysis | YES | NO | CT SOFT TISSUE NECK W/ CONTRAST | 70491 |
| * Salivary gland calculi/adenitis * Foreign Body | YES | NO | CT SOFT TISSUE NECK W/ AND W/O CONTRAST | 70492 |
| SPINE | | | | | |
| CERVICAL SPINE | * Evaluate hardware/fusion status * Degenerative changes * R/O Fracture | NO | NO | CT CERVICAL SPINE W/O CONTRAST | 72125 |
| THORACIC SPINE | * Evaluate hardware/fusion status * Degenerative changes * R/O Fracture | NO | NO | CT THORACIC SPINE W/O CONTRAST | 72128 |
| LUMBAR SPINE | * Evaluate hardware/fusion status * Degenerative changes * R/O Fracture | NO | NO | CT LUMBAR SPINE W/O CONTRAST | 72131 |
| ABDOMEN AND PELVIS | | | | | |
| ABDOMEN | * Renal mass * ABD Renal Mass Protocol | YES | YES | MULTIPHASE CT ABDOMINAL/RENAL PROTOCOL W/ AND W/O CONTRAST | 74170 |
| * Abnormal liver enzymes * Jaundice * Liver Mass | YES | YES | MULTIPHASE CT ABDOMEN/LIVER W/ AND W/O CONTRAST | 74170 |
| * Pancreatitis * Pancreatic Mass | YES | YES | MULTIPHASE CT ABDOMEN/PANCREAS W/ AND W/O CONTRAST | 74170 |
| * Ventral, umbilical hernia | NO | NO | CT ABDOMEN W/O CONTRAST  (w/ contrast if painful) | 74150 |
| ABDOMEN AND PELVIS | * Abdominal pain * Abnormal labs * Abscess * Adenopathy * Ascites * Injury/trauma * Metastasis * Pancreatitis * Pelvic pain * Tumor/mass * Unexplained weight loss | YES | YES | CT ABDOMEN AND PELVIS W/ CONTRAST | 74177 |
| KIDNEY (RENAL)  Stone Protocol | * Flank pain * Renal stones | NO | NO | CT ABDOMEN AND PELVIS W/O CONTRAST | 74176 |
| UROGRAM  Hematuria Protocol | * Hydronephrosis without flank pain * Flank pain * Renal stones with hematuria | YES | YES | CT ABDOMEN AND PELVIS W/ AND W/O CONTRAST | 74178 |
| SOFT TISSUE PELVIS | * Inguinal hernia * Adenopathy * Mass * Pain | YES | YES | CT PELVIS W/ CONTRAST | 72193 |
| BONY PELVIS | * Trauma, concern for fracture | NO | NO | CT PELVIS W/O CONTRAST | 72192 |
| CHEST | | | | | |
| CHEST | * Asthma * Atelectasis Bronchiectasis * COPD * Cough * Emphysema * Continued pulmonary nodule follow up * Injury Trauma * Pericardial effusion * Pleural effusion * Pneumothorax * Rib Fracture | NO | NO | CT CHST W/O CONTRAST | 71250 |
| * Abnormality involving hilum * Empyema * Infiltrate * Lung cancer * Mass * Pneumonia * Work up of other cancer/malignancy   First time nodule follow up | YES | NO | CT CHEST W/ CONTRAST | 71260 |
| HIGH RESOLUTION CHEST | * Interstitial lung disease | NO | NO | CT CHEST W/O CONTRAST | 71250 |
| LUNG | * History of smoking | NO | NO | CT LUNG CANCER SCREEN  (Must meet all screening criteria) |  |
| EXTREMITIES | | | | | |
| HIPS, KNEES, ANKLES, FEET | * Traumatic joint/bone injury * Non-traumatic joint/bone injury * Presurgical Scans | NO | NO | CT LOWER EXTREMITIES W/O CONTRAST | 73700 |
| SHOULDERS, ELBOWS, WRISTS | * Traumatic joint/bone injury * Non-traumatic joint/bone injury * Presurgical Scans | NO | NO | CT UPPER EXTREMITIES W/O CONTRAST | 73200 |

| BODY PART | REASON FOR EXAM | IV CONTRAST | PROCEDURE NAME | CPT CODE |
| --- | --- | --- | --- | --- |
| BRAIN | | | | |
| BRAIN | * Tremors * Trigeminal * IAC lesion/hearing * Infection * Lesions * Multiple Sclerosis * Neurofibromatosis * Seizures * Pituitary lesion (pituitary protocol) * Metastasis | YES | MRI BRAIN W/ AND W/O CONTRAST  Specify on order if needed:   * IACS * Pituitary * MS * Seizure * Trigeminal | 70553 |
| BRAIN | * CVA/TIA * Headaches * Dizziness * Memory Loss * Trauma | NO | MRI BRAIN W/O | 70551 |
| ORBITS | * Diplopia * Hyperthyroidism * Nystagmus * Strabismus * Tumor/Mass/Mets   Vision changes | YES | MRI ORBITS W/ AND W/O CONTRAST | 70543 |
| FACE | * Infection * Tumor/Mass/Mets | YES | MRI FACE W/ AND W/O CONTRAST | 70543 |
| SINUS | * Infection * Tumor/Mass/Mets | YES | MRI SINUS W/ AND W/O CONTRAST |  |
| NECK SOFT TISSUE | * Dysphagia * Infection * Persistent hoarseness * Tumor/Mass/Mets   Vocal cord paralysis | YES | MRI SOFT TISSUE NECK W/ AND W/O CONTRAST | 70543 |
| NEUROGRAM | | | | |
| BRACHIAL PLEXUS | * Brachial plexus injury * Nerve avulsion * Tumor/Mass/Mets | YES | MRI BRACHIAL PLEXUS W/ AND W/O CONTRAST  (Brachial plexus protocol) | 73220 |
| LUMBOSACRAL PLEXUS | * Lumbosacral plexus injury * Nerve avulsion * Tumor/Mass/Mets | YES | MRI LUMBOSACRAL PLEXUS W/ AND W/O CONTRAST  (Lumbosacral plexus protocol) | 72197 |
| SPINE | | | | |
| CERVICAL | * Neck pain * Radiculopathy * Degenerative disc disease * Canal stenosis * Compression fracture | NO | MRI CERVICAL SPINE W/O CONTRAST | 72141 |
| * MS * Discitis/osteomyelitis * Post-op pain   Tumor/Mass/Mets | YES | MRI CERVICAL SPINE W/ AND W/O CONTRAST | 72156 |
| THORACIC | * Neck pain * Radiculopathy * Degenerative disc disease * Canal stenosis * Compression fracture | NO | MRI THORACIC SPINE W/O CONTRAST | 72146 |
| * MS * Discitis/osteomyelitis * Post-op pain (w/ T-S surgery in last 8 yrs.) * Tumor/Mass/Mets | YES | MRI THORACIC SPINE W/ AND W/O CONTRAST | 72157 |
| LUMBAR | * Neck pain * Radiculopathy * Degenerative disc disease * Canal stenosis   Compression fracture | NO | MRI LUMBAR SPINE W/O CONTRAST | 72148 |
| * Discitis/osteomyelitis * Post-op pain (w/ T-S surgery in last 8 yrs.) * Tumor/Mass/Mets | YES | MRI LUMBER SPINE W/ AND W/O CONRAST | 72158 |
| SACRUM/COCCYX |  | NO | MRI BONY PELVIS W/O CONTRAST  \*Please specify in comments | 72195 |
| ABDOMEN AND PELVIS | | | | |
| ABDOMEN | * MRCP (biliary/pancreatic ducts, stones, jaundice) | YES | MRCP AND MRI ABDOMEN W/ AND W/O CONTRAST | 74181 |
| * Liver Disease * Mass (adrenal, liver, pancreatic, renal) | YES | MRI ABDOMEN W/ AND W/O CONTRAST | 74183 |
| MSK PELVIS | * MSK pain (SI joints, sacrum, coccyx) * Muscle tear | NO | MRI PELVIS W/O CONTRAST | 72195 |
| * Osteomyelitis | YES | MRI PELVIS W/ AND W/O CONTRAST | 72197 |
| SOFT TISSUE PELVIS  (FEMALE PELVIS) | * Abscess * Adenomyosis * Endometrial abnormalities * Fibroids * Septic arthritis * Tumor/Mass/Mets | YES | MRI PELVIS MSK W/ AND W/O CONTRAST | 72197 |
| EXTREMITIES | | | | |
| NON-JOINT EXTREMITY (EX: HUMERUS, FEMUR) | * Morton’s Neuroma * Osteomyelitis * Abscess   Tumor/Mass/Mets (soft tissue) | YES | MRI UPPER/ LOWER EXTREMITY W/ AND W/OUT CONTRAST | 73220 |
| * Muscle/tendon tear   Stress fracture | NO | MRI UPPER/LOWER EXTREMITY W/O CONTRAST | 73718 |
| JOINT EXTREMITY (EX: SHOULDER, KNEE, WRIST) | * Arthritis * AVN * Joint Pain * Ligament/tendon/muscle/ cartilage/labral tear   Stress fracture | NO | MRI UPPER/LOWER EXTREITY JOINT W/O CONTRAST  \*\*EXAMPLE: MRI KNEE W/O CONTRAST | 73721 |
| ANGIOGRAPHY | | | | |
| MRA HEAD | * Stenosis * AVM * CVA/TIA * Aneurysm * Strong family hx cerebral aneurysms * Dissection | NO | MRA HEAD W/O CONTRAST | 70544 |
| MRV HEAD | * Venous thrombosis | YES | MRV HEAD W/ AND W/O CONTRAST | 70546 |
| MRA NECK | * Stenosis * Aneurysm * AVM * CVA/TIA * Dissection/vessel injury | YES | MRA NECK W/ AND W/O CONTRAST | 70549 |

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| ARTHROGRAM |

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| WRIST | * Ligament tear (pro and post op) | MR ARTHROGRAM WRIST | 73222/25246/77002 |
| ELBOW | * Ligament tear (post op) | MR ARTHROGRAM ELBOW | 73222/24220/77002 |
| SHOULDER | * Ligament tear * Rotator cuff (post op) | MR ARTHROGRAM SHOULDER | 73222/23350/77002 |
| HIP | * Labral/ligament tear (pre or post op) | MR ARTHROGRAM HIP | 73222/27093/77002 |
| KNEE | * Meniscus (post op) | MR ARTHROGRAM KNEE | 73222/27370/77002 |
| ANKLE | * Osteochondral Lesion (post op) | MR ARTHROGRAM ANKLE | 73222/27648/77002 |

| BODY PART | REASON FOR EXAM | PROCEDURE NAME | CPT CODE |
| --- | --- | --- | --- |
| ABDOMEN | * Abnormal lab values * Cirrhosis, fatty liver * Gallstones * Hepatomegaly * Jaundice * Pain (epigastric, ruq, etc) * Splenomegaly | ABDOMEN COMPLETE  (Pancreas, liver, gb, kidneys, spleen)  ABDOMEN RUQ  (Pancreas, liver, gb, right kidney)  ABDOMEN LUQ  (Spleen, left kidney) | 76700  76705  76705 |
| ABDOMEN/BACK | * Palpable * Fluid Collection | SOFT TISSUE ABDOMEN/TRUNK | 76705 |
| AORTA | * Pulsatile mass * Aneurysm follow-up * Bruit | ABDOMNAL AORTA | 76775 |
| * No symptoms * Hx of Tobacco Use * Family Hx AAA * HTN | AORTA SCREENING | 76706 |
| CAROTID | * Amaurosis fugax * Aphasia * Ataxia * Bruit * Hemiplegia * Syncope * Vision changes * Vertigo/dizziness | CAROTID DOPPLER | 93880 |
| CHEST | * Superficial mass (below the collar bone but not in the breast tissue) | CHEST – PLEASE SPECIFY WHICH SIDE | 76604 |
| FEMALE PELVIS | * Abnormal bleeding * Enlarged uterus * Fibroids * Locate IUD * PCOD * Pain (located in the pelvis) * Post menopausal bleeding * Ovarian cyst * Irregular cycles | PELVIC COMPLETE  (Transabdominal only)  TRANSVAGINAL  (TV only)  PELVIC COMPLETE W/TRANSVAGINAL  (TA and TV imaging) | 76856  76830  76856 and 76830 |
| KIDNEYS | * Hematuria * Hydronephrosis * Renal Failure/disease * Renal stone | RENAL | 76775 |
|  | * Hypertension * Renal artery aneurysm * Renal artery stenosis   Renal failure/disease | RENAL ARTERIAL DOPPLER  (Includes imaging of the kidneys) | 76775 and  93975 |
| KIDNEYS/BLADDER | * Bladder Diverticula * Hematuria * Hydronephrosis * Renal Stone * Neurogenic Bladder * UTI * Urinary Retention | RENAL AND BLADDER  BLADDER ONLY | 76770  76857 |
| SCROTUM/TESTICLES | * Epididymitis * Hydrocele * Swelling * Pain * Trauma * Torsion * Undescended Testicle * Varicocele | SCROTUM W/ DOPPLER | 76870 AND 93975 |
| GROIN | * Pain * Hernia | GROIN (SPECIFY SIDE) | 76882 |
| EXTREMITY | * Palpable * Fluid Collection | EXTREMITY NON-VASCULAR (Specify location) | 76882 |
| VENOUS LOWER/UPPER EXTREMITY | * Calf pain * DVT follow up * Edema/swelling | VENOUS DOPPLER  (Specify upper/lower and laterality) | 93971 (unilateral)  93970  (bilateral) |
| ARTERIAL LOWER/UPPER EXTREMITY | * Aneurysm * Stenosis * Embolism * Claudication | ARTERIAL DUPLEX  (Specify upper/lower and laterality | 93931  (unilateral)  93930  (bilateral) |
| NECK | * Palpable * Parotid * Submandibular Node | SOFT TISSUE NECK | 76536 |
| THYROID | * Abnormal labs * Enlarged thyroid * Hyper/Hypothyroidism * Mass | THYROID | 76536 |