

CPT Code Reference Guide



Raleigh Radiology Locations

Raleigh Radiology Blue Ridge

3200 Blue Ridge Road, Suite 100
Raleigh, NC 27612

Raleigh Radiology Cary

150 Parkway Office Court, Suite 100
Cary, NC 27518

Raleigh Radiology Chapel Hill

120 Banks Drive, Suite 110
Chapel Hill, NC 27514

Raleigh Radiology Clayton

11618 Clayton Blvd, Suite 102
Clayton, NC 27520

Raleigh Radiology Fuquay-Varina

601 Attain Street, Suite 100
Fuquay-Varina, NC 27526

Raleigh Radiology Holly Springs

1060 S. Main Street, Suite 110
Holly Springs, NC 27540

Raleigh Radiology Knightdale

1101 Great Falls Court, Suite 100
Knightdale, NC 27545

Raleigh Radiology Midtown

5111 Falls of Neuse Road, Suite 100
Raleigh, NC 27609

Raleigh Radiology Oberlin

505 Oberlin Road, Suite 110
Raleigh, NC 27605

Raleigh Radiology South

2400 North Main Street, Suite 150
Fuquay Varina, NC 27526

Raleigh Radiology Wake Forest

11640 Northpark Drive, Suite 110
Wake Forest, NC 27587



Numbers to Know

Adult Scheduling

919.781.1437 (phone)

919.787.4870 (fax)

schedulingteam@raleighrad.com

Vascular and Interventional Scheduling

919.787.1389 (phone)

919.256.3577 (fax)

Pediatric Scheduling

Breast Imaging & DEXA

Biopsies

Procedure	CPT Code	Notes
Aspiration of Cyst of Breast	19000	
Breast Biopsy; Stereotactic Guidance	19081	
Breast Biopsy; Ultrasound Guidance	19083	

Bone Density (DEXA)

Procedure	CPT Code	Notes
Bone Densitometry With Vertebral Fracture Assessment	77085	
Bone Densitometry Without Vertebral Fracture Assessment	77080	

Breast MRI

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Breast	77049	Newly Diagnosed Cancer Personal History of BC BRCA 1 or 2 Gene High Risk Screening Implant Integrity, Rupture	Evaluate Response to Chemo Dense Breasts Palpable Lump w/ Abnormal US or Mammographic Findings	Yes	MRI Breast Bilateral W/ and W/O
	77048			Yes	Unilateral W/ and W/O

Breast Ultrasound

Procedure	CPT Code	Notes
Breast, Unilateral - Limited	76642	

Mammography

Procedure	CPT Code	Notes
Screening Mammography, 3D	77063	3D Mammography Screening
Screening Mammography, 2D	77067	2D Mammography Screening
Diagnostic Mammography, 3D, Bilateral or Unilateral	G0279	3D Mammography
Diagnostic Mammography; 2D, Bilateral	77066	2D Mammography
Diagnostic Mammography; 2D, Unilateral	77065	2D Mammography

CT Head & Neck

Head & Neck

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Brain (Cranium only)	70450	Trauma Headaches CVA Stroke, Bleed Alzheimer's Memory Loss, Confusion Facial Droop Loss of Balance	Shunt Check Hydrocephalus TIA Change in Mental Status Dizziness, Vertigo Syncope Tinnitus	No	CT Head W/O
	70470	Mass, Tumor Infection, Abscess Meningioma	Metastatic Staging HIV	Yes	CT Head W/O & W (MR Brain may be preferred if patient is able)
Orbits	70480	Trauma Fracture	Foreign Body Bony Abnormalities	No	CT Orbits W/O
	70481	Graves Disease Mass, Swelling Pain	Abscess Cellulitis	Yes	CT Orbits w/ contrast
Sinus	70486	Sinusitis Mass Pain Foreign Body	Congestion Nasal Polyps Deviated Septum Sinus Headache	No	CT Sinus W/O
Face (From above frontal sinuses through mandible)	70486	Trauma Pain	Fracture Bony Abnormalities	No	CT Maxillofacial W/O
	70487	Tumor Swelling, Mass in Face	Infection Abscess	Yes	CT Maxillofacial W/ Contrast
Temporal Bones/ Mastoids	70480	Congenital Hearing Loss Tinnitus Trauma	Cholesteatoma Tinnitus Mass in Ear	No	CT Temporal Bones W/O
Neck (From above frontal sinus through the aortic arch)	70491	Focal Mass Lymphadenopathy Lymphoma	Dysphagia Goiter Esophageal Cancer	Yes	CT Soft Tissue Neck W/
	70490	Salivary Gland Stone		No	CT Soft Tissue Neck W/O

CT Angiography

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
CTA Head	70496	Aneurysm AV Malformation Stenosis Occlusion Thrombosis	Dissection Congenital Abnormalities Vascular Injury Pre-Op Evaluation for Tumor Blood Supply	Yes	CTA Head W/ and W/O
CTA Neck	70498	Aneurysm AV Malformation Stenosis Occlusion Thrombosis Dissection	Congenital Abnormalities Vascular Injury Pre-Op Evaluation for Tumor Blood Supply Post-Op Carotid Endarterectomy, Post Carotid Stenting	Yes	CTA Neck W/ and W/O
CTA Chest	71275	Pulmonary Embolism Chest Pain Aneurysm	Shortness of Breath Aortic Dissection	Yes	CTA Chest W/ and W/O
CTA Abdomen (From Lung Bases to Iliac Crest)	74175	Abdominal Aortic Aneurysm Renal Artery Stenosis Trauma	Abnormal US Post Stent Grafting Mesenteric Ischemia	Yes	CTA Abdomen W/ and W/O
CTA Abdomen and Pelvis (From Lung Bases to Pubis)	74174	Abdominal Aortic Aneurysm Renal Artery Stenosis Dissection Trauma	Abnormal US Post Stent Grafting Mesenteric Ischemia	Yes	CTA Abdomen and Pelvis W and W/O

CTA Runoff: Abdomen & Bilateral Lower Extremities

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
From Diaphragm to Toes	75635	Occlusion of Vessels Absence of Pulse	Vascular Assessment Peripheral Artery Disease	Yes	CTA, Abdominal Aorta and Bilateral Iliofemoral Lower Extremity Runoff. (NOTE: Some indications may be better visualized with MRI or US)

CT Abdominal Organs

Abdominal Organs

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Liver	74170	Liver Cancer Cirrhosis Hepatitis	Hemachromatosis Hepatoma Jaundice	Yes	CT Abdomen W/ and W/O
Pancreas	74160	Pancreatic lesion		Yes	CT Abdomen W/
Renal Stone	74176	Hematuria Flank Pain Urinary Frequency	Renal Stone Dysuria Retroperitoneal Bleed	No	CT Abdomen and Pelvis W/O
Renal	74170	Renal Mass Work-Up Complex Renal Cyst	Abnormal US Hematuria	Yes	CT Abdomen W/ and W/O
CT Urogram (Urinary System) (Kidneys to Bladder)	74178	Hematuria Abnormal Cystogram	Bladder Mass	Yes	CT Abdomen and Pelvis W/ and W/O
Adrenal	74170	Adrenal Mass		Yes	CT Abdomen Contrast as Medically Indicated (A CT Abdomen W/ may be added at the discretion of the radiologist in cases where mass measurement result from the W/O scan are abnormal)

CT Chest, Abdomen and Pelvis

Chest

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
General Chest	71260	Abnormal CXR Pneumonia, Cough Hemoptysis Sarcoidosis Hilar Abnormality Hx Cancer, Tumor, Mets, Chest Pain Trauma	Neoplasm, Mass Abscess Enlarged Aortic Arch Lymphadenopathy Asbestos or Asbestos Exposure Shortness of Breath (not concerned for PE)	Yes	CT Chest W/
	71275	*If ruling out PE, use CTA Chest		Yes	CTA Chest
	71250	Lung Nodule follow-up Bony Abnormality	Rib Fractures, Trauma Chronic Cough	No	CT Chest W/O
Hi-Resolution Chest	71250	Interstitial Disease Fibrosis Bronchiectasis	COPD, Emphysema Asbestos Exposure	No	CT Chest W/O
Lung Screening	71271	50-80 years old with 20+ pack/year smoking history Asbestos Exposure or Obstructive Airway Disease	Patients with Smoking History and Additional Risk Factors such as radon gas exposure, certain occupational exposure, COPD, and Pulmonary Fibrosis	No	CT Lung Screening

Abdomen & Pelvis

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Abdomen: General (From Lung Bases to Iliac Crest)	74160	Abdominal Pain Abnormal US Neoplasm, Mass Weight Loss	Hernia Trauma Elevated LFT Pancreatitis	Yes	CT Abdomen W/
Abdomen & Pelvis: General (Lung bases to Pubis)	74177	Mass, Abdominal Pain Pelvic Pain Appendicitis Lymphoma Nausea, Vomiting, Diarrhea Bloody Stools Diverticulitis Diverticulosis Abnormal US	Neoplasm Fever, Elevated WBC Weight Loss Hernia, Trauma Constipation, Obstruction IBD, Metastasis All Cancer Staging except melanoma or carcinoid	Yes	CT Abdomen and Pelvis W/
Pelvis: General (Iliac Crest to Pubis)	72193	Pelvic Pain, Groin Pain Abnormal Pelvic US Pelvic Mass, Abscess	Hernia, Trauma Adnexal Mass Infection, Cellulitis	Yes	CT Pelvis W/
CT Abd/Pelvis Enterography	74177	Crohn's Disease or suspected Crohn's Disease	Small Bowel Tumors GI Bleeding (chronic)	Yes	CT Abdomen and Pelvis W/

CT Extremities, Spine, Pelvis

Extremities

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Upper Extremities: Hand, Wrist, Elbow, Radius, Ulna, Humerus, Shoulder	73200 73700	Pain Arthritis Fracture	Fusion Malunion	No	CT W/O Upper Extremity CT W/O Lower Extremity
Lower Extremities: Foot, Ankle, Knee, Hip, Tibia, Fibula, Femur	73201 73701	Infection Tumor, Mass, Cancer, Mets	(MRI is more sensitive)	Yes	CT W/ Upper Extremity CT W/ Lower Extremity

Spine

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Spine	72125 72128 72131	Pain Trauma Pre or Post Surgery	Fracture Fusion	No	CT W/O Cervical CT W/O Thoracic CT W/O Lumbar
	72126 72129 72132	Infection Tumor, Mass, Cancer, Mets	(MRI is more sensitive) Disc Degeneration	Yes	CT W/ Cervical CT W/ Thoracic CT W/ Lumbar

Pelvis

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Pelvis/Hips (Bony) Acetabulum	72192	Pain Fracture	Arthritis Bone Lesions	No	CT Pelvis W/O

Fluoroscopy

Procedure	CPT Code	Notes
Barium Swallow	74220	
Chest, With Fluoroscopy	76000	
Colon, Barium Enema; With Air Contrast	74280	
Colon, Barium Enema; Without Air Contrast	74270	
Cystography	74430	
Hysterosalpinogram (HSG)	74740 & 58435	
IVP (Intravenous Pyelogram)	74400	
Small Bowel Study, Single Contrast	74250	
Upper GI; Single Contrast With/Without KUB	74240	
Upper GI; Double Contrast With/Without KUB	74246	
Upper GI, single contrast, w/ Small Bowel Follow Through	74248 & 74240	
Upper GI, double contrast, w/ Small Bowel Follow Through	74248 & 74246	

Injections & Biopsies

Procedure	CPT Code	Notes
Arthrocentesis, Aspiration and/or Injection; MAJOR Joint/Bursa (Shoulder, Hip, Knee)	20610	Specify exact body part/joint(s) to be aspirated
Arthrocentesis, Aspiration and/or Injection; MAJOR Joint/Bursa, Ultrasound Guidance (Shoulder, Hip, Knee)	20611	Specify exact body part/joint(s) to be aspirated
Arthrocentesis, Aspiration and/or Injection; MEDIUM Joint/Bursa (Hand, Wrist, Elbow, Foot, Ankle)	20605	Specify exact body part/joint(s) to be aspirated
Arthrocentesis, Aspiration and/or Injection; SMALL Joint/Bursa (Fingers, Toes)	20600	Specify exact body part/joint(s) to be aspirated
Aspiration and/or Injection of Baker's Cyst or Ganglion Cyst(s)	20612	
Thyroid Fine Needle Aspiration	10022	
CT Guided Epidural Steriod Injection; Lumbar or Sacral	62323	Specify spinal level(s) to be injected
CT Guided Epidural Steriod Injection; Cervical or Thoracic	62321	Specify spinal level(s) to be injected
CT Guided Facet Injection; Cervical or Thoracic	64490	Specify spinal level(s) to be injected
CT Guided Facet Injection; Lumbar or Sacral	64493	Specify spinal level(s) to be injected
Tendon/Ligament Sheath Injection	20551	

MRI Head, Neck, Chest

WARP Metal Suppression Capabilities Available

Head & Neck

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Brain	70551	Alzheimer's Mental Status Change Confusion Dementia Memory Loss Suspected MS	Stroke, CVA TIA Trauma Dizziness, Vertigo (CVA) Headaches	No	MRI Brain W/O
	70553	Tumor, Mass, Cancer Cranial Nerve Lesions HIV Infection Multiple Sclerosis Neurofibromatosis Hearing Loss, IAC Mass Pituitary Lesion	Acoustic Neuroma Syrinx Visual Change Vascular Lesion (AVM) Elevated Prolactin Vertigo, Dizziness (IAC) Bell's Palsy	Yes	MRI Brain W/ and W/O
MRV Brain	70544	Venous Thrombosis		No	MRV W/O
Orbits (includes whole brain plus thin cuts through the orbits)	70540	Trauma		No	MRI Orbits, Face, Neck W/O
	70543	Graves Disease Exophthalmos, Proptosis Vascular Lesions (Hemangioma)	Tumor, Mass, Cancer, Mets Pseudotumor	Yes	MRI Orbits, Face, Neck W/ and W/O
Neck	70543	Infection Pain	Tumor, Mass, Cancer, Mets Vocal Cord Paralysis	Yes	MRI Orbits, Face, Neck W/ and W/O

Chest

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Mediastinum	71552	Tumor, Mass, Cancer, Mets		Yes	MRI Chest, Mediastinum W/ and W/O
Brachial Plexus	71552	Brachial Plexus Injury	Nerve Avulsion	Yes	MRI Chest, Mediastinum W/ and W/O

MRI Abdomen and Pelvis

WARP Metal Suppression Capabilities Available

Abdomen & Pelvis

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Abdomen: General	74183	Tumor, Mass, Cancer, Mets	Abdominal Pain Hematuria	Yes	MRI Abdomen W/ and W/O
Abdomen: Liver	74183	Post Embolization Hemangioma Hepatoma	Hepatitis Cirrhosis Increased LFTs	Yes	MRI Abdomen W/ and W/O
MRCP: Biliary	74181	Biliary Obstruction Stones	Jaundice Abnormal Enzymes	No	MRI Abdomen W/O (MRCP)
MRCP: Renal	74183	Renal Mass (cyst or solid) Hematuria	Transitional Cell Carcinoma of Kidney Abnormal Finding	Yes	MRI Abdomen W/ and W/O
MRCP: Adrenal	74181	Adrenal Mass or Lesion	Pheochromocytoma Hypertension	No	MRI Abdomen W/O
Pancreas	74183	Pancreatitis Pancreas Mass Cholangiocarcinoma PSC (Primary Sclerosing Cholangitis)	Increased LFTs Painless Jaundice Ampulla Evaluation	Yes	MRI Abdomen W/ and W/O
Pelvis Soft Tissue: General	72197	Tumor, Mass, Cancer, Mets Pain	Abscess Decubitus Ulcer	Yes	MRI Pelvis W/ and W/O
Pelvis Soft Tissue: Uterus	72197	Fibroid Adenomyosis	Pre/Post Fibroid Embolization Infertility	Yes	MRI Pelvis W/ and W/O
Pelvis Soft Tissue: Ovaries	72197	Ovarian Mass	Endometrioma	Yes	MRI Pelvis W/ and W/O
Pelvis Soft Tissue	72195	Bicornuate Uterus	Septate Uterus	No	MRI Pelvis W/O
Pelvis Soft Tissue: Prostate	72195	Cancer Staging	Treatment Planning	No	MRI Pelvis W/O
MRI Abdomen/ Pelvis Enterography	74183 72197	Diagnosis and follow-up of Crohn's Disease Low-grade Small Bowel Obstruction	Small Bowel Tumors	Yes Glucagon is also administered to relax bowel motion	MRI Abdomen W/ and W/O MRI Pelvis W/ and W/O

MRI Musculoskeletal

WARP Metal Suppression Capabilities Available

Musculoskeletal

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
EXTREMITY: NON JOINT UPPER Forearm, Humerus, Hand, Finger, Thumb LOWER Lower Leg, Calf Femur, Thigh, Hamstring Foot (midfoot, forefoot), Toes	73218 73718	Fracture Stress Fracture	Muscle, Tendon Tear	No	MRI - Non Joint W/O Contrast: UPPER EXTREMITY LOWER EXTREMITY
	73220 73720	Abscess Ulcer Tumor, Mass, Mets Cellulitis Fasciitis	Myositis Morton's Neuroma Osteomyelitis (contrast as needed) Soft Tissue Tumor, Mass, Mets	Yes	MRI - Non Joint W/ and W/O Contrast: UPPER EXTREMITY LOWER EXTREMITY
EXTREMITY: JOINT UPPER Wrist, Elbow Shoulder LOWER Ankle, hindfoot (includes distal, tibia, fibula thru baseline of metatarsals) Knee, Hip (will include whole pelvis)	73221 73721	Arthritis Avascular Necrosis (AVN) Stress Fracture Internal Derangement Pain Labral Tear	Meniscal Tear Muscle Tear Ligament Tear Cartilage Tear Osteochondritis Dissecans (OCD) Bony Cyst	No	MRI - Joint W/O Contrast: UPPER EXTREMITY LOWER EXTREMITY
	73223 73723	Abscess, Ulcer, Cellulitis Fasciitis Myositis Septic Arthritis	Inflammatory Arthritis Osteomyelitis (contrast as needed) Tumor, Mass, Mets	Yes	MRI - Joint W/ and W/O Contrast: UPPER EXTREMITY LOWER EXTREMITY
Bony Pelvis, Pelvis, Hip	72195	Fracture, Pain, Trauma	Muscle, Tendon Tear	No	MRI Pelvis W/O
	72197	Tumor, Mass, Cancer, Mets	Osteomyelitis Septic Arthritis	Yes	MRI Pelvis W/ and W/O
Spine: Cervical	72141	Arm, Shoulder Pain Numbness Neck Pain	Disc Herniation Radiculopathy Degenerative Disease	No	MRI Cervical Spine W/O
	72156	Syrinx, Discitis Osteomyelitis	Myelopathy Multiple Sclerosis Tumor, Mass, Cancer, Mets	Yes	MRI Cervical Spine W/ and W/O
Spine: Thoracic	72146	Back Pain Degenerative Disc Disease, Disc Herniation	Radiculopathy, Trauma Compression Fracture (no hx of malignancy)	No	MRI Thoracic Spine W/O
	72157	Discitis, Post-Op Fusion Syrinx Osteomyelitis Multiple Sclerosis	Myelopathy Tumor, Mass, Cancer, Mets Compression Fracture (no hx of malignancy)	Yes	MRI Thoracic Spine W/ and W/O
Spine: Lumbar	72148	Back, Leg Pain Degenerative Disease Disc Herniation Radiculopathy Trauma	Sciatica Spondylolisthesis Spinal Stenosis Compression Fracture (no hx of malignancy)	No	MRI Lumbar Spine W/O
	72158	Discitis, Osteomyelitis Tumor, Mass, Cancer, Mets	Post-Op Hx of Back Surgery	Yes	MRI Lumbar Spine W/ and W/O

MRI and Arthrography

Musculoskeletal MR Arthrography

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
Wrist Arthrogram	73222 25246 73115	TFCC Tear Intercarpal Ligaments	Soft Tissue Ganglia	*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Wrist Rad exam - Wrist
Elbow Arthrogram	73222 24220 73085	Loose Body	Internal Derangement Collateral Ligament Tear	*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Elbow Rad exam - Elbow
Shoulder Arthrogram	73222 23350 73040	Labral Tear Synovitis	RCT Adhesive Capsulitis	*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Shoulder Rad exam - Shoulder
Hip Arthrogram	73722 27093 73525	Labral Tear		*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Hip Rad exam - Hip
Knee Arthrogram	73722 27369 73580	Recurrent Meniscal Tear Post-Op	Loose Bodies Chondromalacia	*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Knee Rad exam - Knee
Ankle Arthrogram	73722 27648 73615	Loose Body	OCD	*Gad is injected int joint space; labs not required	MR Upper Ext Joint W/ Injection - Ankle Rad exam - Ankle

MRA Musculoskeletal

MRA

Body Part	CPT Code	Reason for Exam		IV w/ Contrast?	Procedure Required to Precert
MRA Brain (COW)	70544	Aneurysm, family hx Aneurysm	TIA Stroke, CVA	No	MRA Brain W/O
MRA Neck	70549	Bruit Stroke, CVA TIA	Abnormal Doppler Dizziness	Yes	MRA Neck W/ and W/O
MRA Arch and Great Vessels	70549	Stroke, CVA Bruit	TIA Stroke, CVA	Yes	MRA Neck W/ and W/O
MRA Abdominal Aorta	74185	Abdominal Aortic Dissection	Aneurysm	Yes	MRA Aorta W/ and W/O
MRA Chest	71555	Aneurysm Thoracic Aortic Dissection	Excluding Cardiac Myocardium	Yes	MRA Chest W/ and W/O
MRA Abdomen	74185	Renal Artery Stenosis Hypertension	Mesenteric Arterial Ischemia	Yes	MRA Abdomen W/ and W/O
MRA Pelvis	72198	Femoral Arteries		Yes	MRA Pelvis W/ and W/O
MRA Upper Extremity	73225	Subclavian Redness or Swelling	Tenderness	Yes	MRA Upper Extremity W/ and W/O
MRA Lower Extremity (Run Off)	73725	Peripheral Vascular Disease		Yes	MRA Lower Extremity W/ and W/O

Nuclear Medicine

Procedure	CPT Code	Notes
Bone Scan; Three-Phase	78315	
Bone Scan; Limited	78300	
Total Body Bone Scan (Bone Scan Multiple Sites Whole Body)	78306	
Breast Lymphoscintigraphy	38792	NM Sentinel Node Injection
MUGA Scan	78472	
Gastric Emptying Scan	78264	
HIDA Without CCK (Hepatobiliary)	78226	
HIDA With CCK (Hepatobiliary)	78227	
Meckels Scan	78290	
Renal With Diuretic (Lasix)	78708	
Renal Without Diuretic (Lasix)	78707	
Liver/Spleen Scan	78215	
Parathyroid Scan	78070	
Thyroid Carcinoma Metastases Scan	78018	
Thyroid Image Only	78013	
Thyroid Scan With Iodine RAIU	78014	
Thyroid Therapy I-131 (I-131 TX Capsule/mCi)	A9517	
Thyroid Uptake	78012	

PET/CT

PET/CT is routinely used for tumor imaging of the body.
This exam includes a non-contrast CT scan that is for attenuation correction only.
Please note: oral contrast may be administered at the discretion of the radiologist.

Agent	PET/CT	CPT Code	Notes
F-18 FDG	Base of Skull to thighs	78815	For most cancers and neurologic diseases
	Scalp to toes for melanoma	78816	For Melanoma
	Brain, dementia/seizure	78608	For dementia/seizures
F-18 Fluciclovine [Axumin]	Base of skull to thighs	78815	For prostate cancer recurrence with rising PSA
Cu64 Dotatate [Detectnet]	Base of skull to thighs	78815	For neuroendocrine tumor
F-18 Fluoroestradiol [Cerianna]		78815	For evaluation of ER+ lesions in recurrent or metastatic breast cancer
F-18 Florbetapir [Amyvid]	Brain, limited PET	78814	For evaluation of beta amyloid plaque/Alzheimer's dementia
F-18 NaF [Sodium Fluoride]	Scalp to toes	78816	Bone metastases
F-18 Piflufolastat [PYLARIFY®]	PET limited area (e.g., chest, head/neck)	78811	
	PET skull base to mid thigh	78812	
	PET whole body	78813	
	PET/CT limited area (e.g. chest, head/neck)	78814	
	PET/CT skull base to mid thigh	78815	The indications for Pylarify are as follows: <ul style="list-style-type: none"> • For PSMA positive lesions in prostate cancer patients • For suspected metastasis in candidates for initial definitive therapy • For suspected recurrence of prostate ca based on elevated PSA
	PET/CT whole body	78816	

Ultrasound

Procedure	CPT Code	Notes
Abdominal - Complete	76700	
Abdominal - Limited (i.e., Single Organ, Quadrant, Follow-up)	76705	
Aorta/Abdominal Aortic Aneurysm	76706	AAA Screening for Medicare Initial Preventive Physical Exam (IPPE)
Bladder Only - Pelvic - Limited	76857	Bladder Only - Pelvic; Limited
Bilateral Carotid Doppler	93880	
Transvaginal	76830	
Extremity; Upper or Lower - Limited	76882	
Head Ultrasound - Neonatal	76506	
Head Ultrasound - Soft Tissue Head/Neck	76536	
Infant Hips - Dynamic	76885	
OB Ultrasound (1st Trimester)	76801	1st Trimester
Pelvic; Complete with Endovaginal/Transvaginal	76856	
Penile Doppler - Complete	93980	
Penile Doppler - follow up or limited	93981	
Renal Complete	76770	
Saline Infused Hysteroqram/Sonohysteroqram	76831 & 58435	
Shoulder Complete	76881	
Spinal Canal and Contents - Complete	76800	
Thyroid and/or Neck	76536	
Venous Doppler - Bilateral	93970	
Venous Doppler - Limited	93971	

For Breast Ultrasound, please see Breast Imaging on Page 3.

Vascular and Interventional

Procedure	CPT Code	Notes
Abdominal Paracentesis (Diagnostic or Therapeutic)	49083	
Endovenous Laser Ablation Therapy, Extremity; 1st Veins	36478	
G Tube Exchange	49450	
Sclerotherapy, Multiple Veins	36470	
Sclerotherapy, Single Vein	36471	
IVC Filter Placements	37191	
IVC Filter Removals	37193	
Subcutaneous Port Insertion/Placement	36561	
Subcutaneous Port Evaluation	36598	
Subcutaneous Port Removal	36590	
Stab Phlebectomy of Varicose Veins; 1 Extremity, 10 to 20 Incisions	37765	
Stab Phlebectomy of Varicose Veins; 1 Extremity, More than 20 Incisions	37766	
Stab Phlebectomy of Varicose Veins; 1 Extremity, Less than 10 Incisions	37799	
Thoracentesis	32555	

Whole Body MRI

Procedure	CPT Code	Notes
Whole Body MRI	76498	



NPI Numbers

Blue Ridge, Cary, Fuquay-Varina, Knightdale - 1952527343

Clayton, Oberlin, Wake Forest, Holly Springs, Midtown, Chapel Hill, RR South - 1821694381

Tax ID Numbers

Blue Ridge, Cary, Fuquay-Varina, Knightdale - 56-1465117

Clayton, Oberlin, Wake Forest, Holly Springs, Midtown, Chapel Hill, RR South - 85-4041225

Let Us Handle Your Pre-Auths!

The image shows a Raleigh Radiology referral form. A blue arrow points to a checkbox labeled 'Pre-Auth' in the top right corner of the form. The form contains various fields for patient information, referral details, and a list of services to be performed.

Please check the box on the Raleigh Radiology referral form or indicate on your order from your EHR that you want us to obtain the insurance authorization.

Please send the below all together:

- Order for the exam including patient demographics and CPT code
- Clinical notes with patient history
- Insurance cards front and back
- ICD-10 Codes

If you are interested in this service, please contact us at
MarketingTeam@RaleighRad.com