

Radiology 2009

NATIONAL REFERENCE PRICE LIST FOR RADIOLOGISTS, EFFECTIVE FROM 1 JANUARY 2009

The following reference price list is not a set of tariffs that must be applied by medical schemes and/or providers. It is rather intended to serve as a baseline against which medical schemes can individually determine benefit levels and health service providers can individually determine fees charged to patients. Medical schemes may, for example, determine in their rules that their benefit in respect of a particular health service is equivalent to a specified percentage of the national health reference price list. It is especially intended to serve as a basis for negotiation between individual funders and individual health care providers with a view to facilitating agreements which will minimise balance billing against members of medical schemes. Should individual medical schemes wish to determine benefit structures, and individual providers determine fee structures, on some other basis without reference to this list, they may do so as well.

In calculating the prices in this schedule, the following rounding method is used: Values R10 and below rounded to the nearest cent, R10+ rounded to the nearest 10cent. Modifier values are rounded to the nearest cent. When new item prices are calculated, e.g. when applying a modifier, the same rounding scheme should be followed.

VAT EXCLUSIVE PRICES APPEAR IN BRACKETS.

This schedule is for the exclusive use of registered specialist radiology practices (Pr No "038") and nuclear medicine practices (Pr No "025"). "025" practices may only charge the codes with a 3rd digit of 9. "038" practices may charge all codes except codes with a 3rd digit of 9. Practitioners registered as both radiologists and nuclear physicians may charge all codes.

This schedule must be used in conjunction with the Radiological Society of S A Guidelines. Please refer to the PET guidelines in Annexure D.

Code Structure Framework

- a. The tariff code consists of 5 digits
 - i. 1st digit indicates the main anatomical region or procedural category.
 - 0 = General (non specific)
 - 1 = Head
 - 2 = Neck
 - 3 = Thorax
 - 4 = Abdomen and Pelvis (soft tissue)
 - 5 = Spine, Pelvis and Hips
 - 6 = Upper limbs
 - 7 = Lower limbs
 - 8 = Interventional
 - 9 = Soft tissue regions (nuclear medicine)
 eg "Head" = 1xxxx
 - ii. 2nd digit indicates the sub region within a main region or category eg.
 - "Head / Skull and Brain" = 10xxx
 - iii. 3rd digit indicates modality
 - 1 = General (Black and White) x-rays
 - 2 = Ultrasound
 - 3 = Computed Tomography
 - 4 = Magnetic Resonance Imaging
 - 5 = Angiography
 - 6 = Interventional radiology
 - 9 = Nuclear Medicine (Isotopes)
 eg:
 "Head / Skull and Brain / General x-ray" = 101xx
 - iv. 4th and 5th digits are specific to a procedure / examination, eg
 "Head / Skull and Brain / General / X-ray of the skull" = 10100.

Guidelines for use of coding structure

- The vast majority of the codes describe complete procedures / examination and their use for the appropriate studies is self-explanatory.
- Some codes may have multiple applications and their use is described in notes associated with each code
- Codes 00510 to 00560 (Angiography machine codes) may only be used by owners of the equipment and who have registered such equipment with the Board of Healthcare Funders / RSSA.
- The machine codes 00510, 00520, 00530, 00540, 00550, 00560 may not be added to 60540, 60550, 70530, 70535 (Antegrade Venography, upper and lower limbs)
- Where public sector hospital equipment is used for a procedure, the units will be reduced by 33.33%.

Consumables

- Contrast Medium
 - o Prior to the implementation of Act 90, contrast will be billed according to the official 2004 RSSA reimbursement price list, without mark up.
 - o After the implementation of Act 90, contrast medium will be billed according to the suppliers' list price, without mark up.
- Angiography catheters, angioplasty balloons, stents, coils and other embolisation materials, guide wires and drains are to be billed at net acquisition cost, without mark up, until the implementation of Act 90.
- All other consumables are to be billed at net acquisition price, until the implementation of Act 90. Thereafter Act 90 regulations apply.
- The cost of film is included in the comprehensive procedure codes and is not billed for separately.
- Appropriate codes must be provided for consumables.

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
General Comments on Procedural Codes							
<ul style="list-style-type: none"> All x-ray tomography codes are stand alone studies and may be used as a unique study or in combination with the appropriate regional study if done simultaneously. May not be added to 20130, 42110, 42115. Setting of sterile tray is included in all appropriate procedure codes. Where introduction of contrast is necessary eg. sialography, arthrography, angiography, etc, the codes used for the procedures are comprehensive and include the introduction of contrast or isotopes. The use of Doppler or Colour Doppler as an adjunct to a study (eg small parts thyroid) is included in the code for that study. CT Angiography (10330, 20330, 32300, 32310, 44300, 44310, 44320, 44330, 60310, 70310, 70320) are stand alone studies and may not be added to the regional contrasted studies (see 10335, 20340, 20350, 44325 for combined studies). Angiography and interventional procedures include selective and super selective catheterization of vessels as are necessary to perform the procedures. 							
Codes 00230 (Ultrasound guidance), 00320 (CT guidance) and 00430 (MR guidance) are stand alone procedures that include the regional study and may not be added to any of the ultrasound, CT or MR regional studies							
General Codes							
Modifiers							
00091	Radiology and nuclear medicine services rendered to hospital inpatients						04.00
00092	Radiology and nuclear medicine services rendered to outpatients						04.00
00093	A reduction of one third (33.33%) will apply to radiological examinations where hospital equipment it used						04.00
Equipment / Diagnostic							
Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
00090	Consumables used in radiology procedures: cost price PLUS 26% (up to a maximum of R26,00). (Where applicable, VAT should be added to the above).	05.04				-	-
	Appropriate code to be provided. See separate codes for contrast and isotopes	04.00					
00110	X-ray skeletal survey under five years	04.00				6.260	464.80 (407.70)
00115	X-ray skeletal survey over five years	04.00				10.400	772.20 (677.30)
00120	X-ray sinogram any region	04.00				10.890	808.50 (709.20)
00130	X-ray with mobile unit in other facility	09.00	+			1.900	141.10 (123.70)
	To be added to applicable procedure codes eg 30100.	04.00					
00135	X-ray control view in theatre any region	04.00				5.260	390.50 (342.60)
00140	X-ray fluoroscopy any region	09.00	+			2.260	167.80 (147.20)
	May only be added to the examination when fluoroscopy is not included in the standard procedure code. May not be added to: • any angiography, venography, lymphangiography or interventional codes. • any contrasted fluoroscopy examination.	04.00					
00145	X-ray fluoroscopy guidance for biopsy, any region	09.00	+			5.300	393.50 (345.20)
	Add to the procedure eg. 80600, 80605, 80610.	04.00					
00150	X-ray C-Arm (equipment fee only, not procedure) per half hour	04.00				2.420	179.70 (157.60)
	Only to be used if equipment is owned by the radiologist.	04.00					
00155	X-ray C-arm fluoroscopy in theatre per half hour (procedure only)	04.00				2.300	170.80 (149.80)
00160	X-ray fixed theatre installation (equipment fee only)	04.00				2.260	167.80 (147.20)
	Only to be used if equipment is owned by the radiologist.	04.00					
00190	X-ray examination contrast material	04.00				-	-
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	04.00					
00210	Ultrasound with mobile unit in other facility	09.00	+			1.840	136.60 (119.80)
	Add to the relevant ultrasound examination codes eg 10200.	04.00					
00220	Ultrasound intra-operative study	04.00				7.320	543.50 (476.70)
	Covers all regions studied. Single code per operative procedure.	04.00					
00230	Ultrasound guidance	09.00	+			12.100	898.40 (788.00)
	Comprehensive ultrasound code including regional study and guidance. Guided procedure code to be added eg. 80600, 80605, 80610.	04.00					

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
00240	Ultrasound guidance for tissue ablation	04.00				11.240	834.50 (732.00)
	Comprehensive ultrasound code including regional study and guidance. Radiologist assistance (01030) may be added if procedure is performed by a non-radiologist. Guided procedure code to be added if performed by a radiologist. 80620 or 80630.	04.00					
00250	Ultrasound limited Doppler study any region	05.03				6.500	482.60 (423.30)
	Stand alone code may not be added to any other code.	05.03					
00290	Ultrasound examination contrast material	04.00				-	-
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	04.00					
00310	CT planning study for radiotherapy	04.00				21.370	1586.60 (1391.80)
00591	Radiology prosthetic device	06.02					
	To be used once per planning session for any region	04.00					
00320	CT guidance (separate procedure)	04.00				16.920	1256.20 (1102.00)
	Comprehensive CT code including regional study and guidance. Guided procedure code to be added eg 80600, 80605, and 80610.	04.00					
00330	CT guidance, with diagnostic procedure	09.00	+			8.460	628.10 (551.00)
	To be added to the diagnostic procedure code. Guided procedure code to be added eg 80600, 80605, 80610.	04.00					
00340	CT guidance and monitoring for tissue ablation	04.00				21.150	1570.30 (1377.50)
	May only be used once per procedure for a region. Radiologist assistance (01030) may be added if procedure is performed by a non-radiologist. If performed by radiologist, add procedural code 80620, or 80630.	04.00					
00390	CT examination contrast material	04.00				-	-
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	04.00					
00410	MR study of the whole body for metastases screening	04.00				70.400	5226.90 (4585.00)
00420	MR Spectroscopy any region	09.00	+			28.900	2145.70 (1882.20)
	May be added to the regional study, once only.	04.00					
00430	MR guidance for needle replacement	09.00	+			42.560	3159.90 (2771.90)
	Comprehensive MRI code including region studied and guidance. Guided procedure code to be added eg 80600, 80605, 80610.	04.00					
00440	MR low field strength imaging of peripheral joint any region	04.00				12.000	891.00 (781.50)
00450	MR planning study for radiotherapy or surgical procedure	04.00				38.000	2821.30 (2474.90)
00455	MR planning study for radiotherapy or surgical procedure, with contrast	04.00				47.000	3489.60 (3061.00)
00490	MR examination contrast material	04.00				-	-
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	04.00					
00510	Analogue monoplane screening table	09.00	+			41.010	3044.80 (2670.90)
	A machine code may be added once per complete procedure / patient visit.	04.00					
00520	Analogue monoplane table with DSA attachment	09.00	+			47.500	3526.70 (3093.60)
	A machine code may be added once per complete procedure / patient visit.	04.00					
00530	Dedicated angiography suite: Analogue monoplane unit. Once off charge per patient by owner of equipment.	09.00	+			47.500	3526.70 (3093.60)
	A machine code may be added once per complete procedure / patient visit.	04.00					
00540	Digital monoplane screening table	09.00	+			79.920	5933.70 (5205.00)
	A machine code may be added once per complete procedure / patient visit.	04.00					
00550	Dedicated angiography suite: Digital monoplane unit. Once off charge per patient by owner of equipment.	09.00	+			93.030	6907.10 (6058.90)
	A machine code may be added once per complete procedure / patient visit.	04.00					
00560	Dedicated angiography suite: Digital bi-plane unit. Once off charge per patient by owner of equipment.	09.00	+			125.000	9280.80 (8141.00)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
	A machine code may be added once per complete procedure / patient visit.	04.00					
00590	Angiography and interventional examination contrast material	04.00				-	-
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	04.00					
00900	Nuclear Medicine study - Bone, whole body, appendicular and axial skeleton	04.00		34.920	2592.70 (2274.30)		
00903	Nuclear Medicine study - Bone, whole body, appendicular and axial skeleton and SPECT	04.00		48.330	3588.30 (3147.60)		
00906	Nuclear Medicine study - Venous thrombosis regional	04.00		21.540	1599.30 (1402.90)		
00909	Nuclear Medicine study - Tumour whole body	04.00		34.150	2535.50 (2224.10)		
00912	Nuclear Medicine study - Tumour whole body multiple studies	04.00		47.560	3531.10 (3097.50)		
00915	Nuclear Medicine study - Tumour whole body and SPECT	04.00		47.560	3531.10 (3097.50)		
00918	Nuclear Medicine study - Tumour whole body multiple studies & SPECT	04.00		60.980	4527.50 (3971.50)		
00921	Nuclear Medicine study – Infection whole body	04.00		31.450	2335.00 (2048.30)		
00924	Nuclear Medicine study – infection whole body with SPECT	04.00		44.860	3330.70 (2921.60)		
00927	Nuclear Medicine study – infection whole body multiple studies	04.00		44.860	3330.70 (2921.60)		
00930	Nuclear Medicine study – infection whole body with SPECT multiple studies	04.00		58.270	4326.30 (3795.00)		
00933	Nuclear Medicine study - Bone marrow imaging limited area	04.00		24.100	1789.30 (1569.60)		
00936	Nuclear Medicine study - Bone marrow imaging whole body	04.00		37.510	2785.00 (2443.00)		
00939	Nuclear Medicine study - Bone marrow imaging limited area multiple studies	04.00		37.510	2785.00 (2443.00)		
00942	Nuclear Medicine study - Bone marrow imaging whole body multiple studies	04.00		50.920	3780.60 (3316.30)		
00945	Nuclear Medicine study - Spleen imaging only - haematopoietic	04.00		24.100	1789.30 (1569.60)		
00960	Nuclear Medicine therapy – Hyperthyroidism	04.00		11.990	890.20 (780.90)		
00965	Nuclear Medicine therapy - Thyroid carcinoma and metastases	04.00		6.470	480.40 (421.40)		
00970	Nuclear Medicine therapy – Intra-cavity radio-active colloid therapy	04.00		6.470	480.40 (421.40)		
00975	Nuclear Medicine therapy - Interstitial radio-active colloid therapy	04.00		6.470	480.40 (421.40)		
00980	Nuclear Medicine therapy - Intravascular radio pharmaceutical therapy particulate	04.00		6.470	480.40 (421.40)		
00985	Nuclear Medicine therapy - Intra-articular radio pharmaceutical therapy	04.00		6.470	480.40 (421.40)		
00990	Nuclear Medicine Isotope	04.00		-	-		
	Identification code for the use of isotope with a procedure. Appropriate codes to be supplied.	04.00					
00991	Nuclear Medicine Substrate	04.00		-	-		
00956	PET/CT scan whole body without contrast	09.00				165.130	-
00957	PET/CT scan whole body with contrast	09.00				163.190	-
00950	PET scan local	09.00				-	-
00951	PET/CT local	09.00				120.000	-
00952	PET/CT local with contrast	09.00				124.680	-
00955	PET scan whole body	09.00				-	-
Call and assistance							
	<ul style="list-style-type: none"> • Emergency call out code 01010 only to be used if radiologist is called out to the rooms to report on an examination after normal working hours. May not be used for routine reporting during extended working hours. • Emergency call out code 01020 only to be used when a radiologist reports on subsequent cases after having been called out to the rooms to report an initial after hours procedure. This code may also be used for home tele-radiology reporting of an emergency procedure. May not be used for routine reporting during normal or extended working hours. • Radiologist assistance in theatre code 01030 only to be used if the radiologist is actively involved in assisting another radiologist or clinician with a procedure. • Radiographer assistance in theatre 01040 may not be used for procedures performed in facilities owned by the radiologist; ie only for attendance in hospital theatres etc. Does not apply to Bed Side Unit (BSU) examinations. • Second opinion consultations only to be used if a written report is provided as indicated in codes 01050, 01055, 01060. Not intended for ad hoc verbal consultations. 	05.05					

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
01010	Emergency call out fee, first case	04.00				3.000	222.70 (195.40)
01020	Emergency call out fee, subsequent cases same trip	04.00				2.000	148.50 (130.30)
01030	Radiologist assistance in theatre, per half hour	04.00				6.000	445.50 (390.80)
01040	Radiographer attendance in theatre, per half hour	04.00				1.600	118.80 (104.20)
01050	Written report on study done elsewhere, short	04.00				1.500	111.40 (97.70)
01055	Written report on study done elsewhere, extensive	04.00				4.200	311.80 (273.50)
01060	Written report for medico legal purposes, per hour	04.00				9.720	721.70 (633.00)
01070	Consultation for pre-assessment of interventional procedure	04.00				4.860	360.80 (316.50)
01100	X-ray procedure after hours, per procedure	04.00				2.000	-
01200	Ultrasound procedure after hours, per procedure	04.00				4.000	-
01300	CT procedure after hours, per procedure	04.00				10.000	-
01400	MR procedure after hours, per procedure	04.00				14.000	-
01500	Angiography procedure after hours, per procedure	04.00				20.000	-
01600	Interventional procedure after hours, per procedure	04.00				26.000	-
01970	Consultation for nuclear medicine study	04.00		2.200	163.30 (143.30)		
Monitoring							
	• ECG / Pulse oximetry monitoring (02010). Use for monitoring patients requiring conscious sedation during imaging procedure. Not to be used as a routine.						04.00
02010	ECG/pulse Oximeter monitoring	04.00				2.000	148.50 (130.30)
Head							
Skull and Brain							
	Codes 10100 (skull) and 10110 (tomography) may be combined.						04.00
10100	X-ray of the skull	04.00				3.860	286.60 (251.40)
10110	X-ray tomography of the skull	04.00				4.300	319.30 (280.10)
10120	X-ray shuntogram for VP shunt	04.00				15.360	1140.40 (1000.40)
10200	Ultrasound of the brain – Neonatal	04.00				7.380	547.90 (480.60)
10210	Ultrasound of the brain including doppler	04.00				13.220	981.50 (861.00)
10220	Ultrasound of the intracranial vasculature, including B mode, pulse and colour doppler	04.00				15.040	1116.70 (979.50)
10300	CT Brain uncontrasted	04.00				22.650	1681.70 (1475.20)
10310	CT Brain with contrast only	04.00				33.280	2470.90 (2167.50)
10320	CT Brain pre and post contrast	04.00				40.480	3005.50 (2636.40)
10325	CT brain pre and post contrast for perfusion studies	05.03				49.100	3645.50 (3197.80)
	Stand alone code may not be added to any other CT studies of the brain, except for code 10330	05.03					
10330	CT angiography of the brain	04.00				77.580	5760.00 (5052.60)
10335	CT of the brain pre and post contrast with angiography	04.00				97.910	7269.40 (6376.70)
10340	CT brain for cranio-stenosis including 3D	04.00				34.160	2536.20 (2224.80)
10350	CT Brain stereotactic localisation	04.00				19.360	1437.40 (1260.90)
10360	CT base of skull coronal high resolution study for CSF leak	05.03				34.900	2591.20 (2273.00)
10400	MR of the brain, limited study	04.00				43.560	3234.20 (2837.00)
10410	MR of the brain uncontrasted	04.00				63.800	4736.90 (4155.20)
10420	MR of the brain with contrast	04.00				75.940	5638.20 (4945.80)

Code	Description	Ver	Add	Nuclear Medicine		Radiology		
				RVU	Fee	RVU	Fee	
10430	MR of the brain pre and post contrast	04.00				104.040	7724.60 (6775.90)	
10440	MR of the brain pre and post contrast, for perfusion studies	04.00				107.440	7977.00 (6997.40)	
10450	MR of the brain plus angiography	04.00				92.200	6845.50 (6004.80)	
10460	MR of the brain pre and post contrast plus angiography	04.00				121.230	9000.80 (7895.50)	
10470	MR angiography of the brain uncontrasted	04.00				58.500	4343.40 (3810.00)	
10480	MR angiography of the brain contrasted	04.00				74.020	5495.70 (4820.80)	
10485	MR of the brain, with diffusion studies	04.00				79.000	5865.40 (5145.10)	
10490	MR of the brain, pre and post contrast, with diffusion studies,	04.00				110.640	8214.60 (7205.80)	
10492	MR study of the brain plus angiography plus diffusion, uncontrasted	04.00				95.000	7053.40 (6187.20)	
10495	MR of the brain pre and post contrast plus angiography and diffusion	04.00				125.440	9313.40 (8169.70)	
10500	Arteriography of intracranial vessels: 1 - 2 vessels	04.00				48.600	3608.40 (3165.20)	
10510	Arteriography of intracranial vessels: 3 - 4 vessels	04.00				82.330	6112.70 (5362.00)	
10520	Arteriography of extra-cranial (non-cervical) vessels	04.00				48.440	3596.50 (3154.80)	
10530	Arteriography of intracranial and extra-cranial (non-cervical) vessels	04.00				118.090	8767.70 (7691.00)	
10540	Arteriography of intracranial vessels (4) plus 3 D rotational angiography	04.00				97.570	7244.20 (6354.50)	
10550	Arteriography of intracranial vessels (1) plus 3D rotational angiography	04.00				37.290	2768.60 (2428.60)	
10560	Venography of dural sinuses	04.00				52.230	3877.90 (3401.60)	
10900	Nuclear Medicine study – Bone regional, static	04.00		21.500	1596.30 (1400.30)			
10905	Nuclear Medicine study – Bone regional, static, with flow	04.00		27.530	2044.00 (1793.00)			
10910	Nuclear Medicine study – Bone regional, static with SPECT	04.00		34.920	2592.70 (2274.30)			
10915	Nuclear Medicine study – Bone regional, static, with flow, with SPECT	04.00		40.940	3039.60 (2666.30)			
10920	Nuclear Medicine study – Brain, planar, complete, static	04.00		16.920	1256.20 (1102.00)			
10925	Nuclear Medicine study – Brain complete static with vascular flow	04.00		22.950	1703.90 (1494.70)			
10930	Nuclear Medicine study – Brain, planar, complete, static, with SPECT	04.00		30.330	2251.90 (1975.30)			
10935	Nuclear Medicine study – Brain, planar, complete, static, with flow, with SPECT	04.00		36.360	2699.60 (2368.10)			
10940	Nuclear Medicine study - CSF flow imaging cisternography	04.00		21.600	1603.70 (1406.80)			
10945	Nuclear Medicine study – Ventriculography	04.00		13.410	995.60 (873.40)			
10950	Nuclear Medicine study - Shunt evaluation static, planar	04.00		13.410	995.60 (873.40)			
10955	Nuclear Medicine study - CFS leakage detection and localisation	04.00		13.410	995.60 (873.40)			
10960	Nuclear medicine study - CSF SPECT	04.00		13.410	995.60 (873.40)			
10970	PET scan of the brain	09.00				-	-	
10971	PET/CT scan of the brain uncontrasted	09.00				110.120	-	
10972	PET/CT of the brain contrasted	09.00				116.110	-	
10980	PET perfusion scan of the brain	09.00				-	-	
10981	PET/CT perfusion scan of the brain	09.00				131.070	-	
Facial bones and nasal bones								
	Codes 11100 (facial bones) and 11110 (tomography) may be combined							04.00
11100	X-ray of the facial bones	04.00				3.930	291.80 (256.00)	

Code	Description	Ver	Add	Nuclear Medicine		Radiology		
				RVU	Fee	RVU	Fee	
11110	X-ray tomography of the facial bones	04.00				4.300	319.30 (280.10)	
11120	X-ray of the nasal bones	04.00				2.390	177.40 (155.70)	
11300	CT of the facial bones	04.00				20.960	1556.20 (1365.10)	
11310	CT of the facial bones with 3D reconstructions	04.00				30.400	2257.10 (1979.90)	
11320	CT of the facial bones/soft tissue, pre and post contrast	04.00				41.260	3063.40 (2687.20)	
11400	MR of the facial soft tissue	04.00				62.400	4633.00 (4064.00)	
11410	MR of the facial soft tissue pre and post contrast	04.00				100.600	7469.10 (6551.90)	
11420	MR of the facial soft tissue plus angiography, with contrast	04.00				110.300	8189.30 (7183.60)	
11430	MR angiography of the facial soft tissue	04.00				74.020	5495.70 (4820.80)	
Orbits, lacrimal glands and tear ducts								
	Code 12130 (tomography) may be added to 12100 or 12110 or 12120 (orbits) or 12140 (dacrocystography).							04.00
12100	X-ray orbits less than three views	04.00				3.560	264.30 (231.90)	
12110	X-ray of the orbits, three or more views, including foramina	04.00				5.300	393.50 (345.20)	
12120	X-ray of the orbits for foreign body	04.00				3.560	264.30 (231.90)	
12130	X-ray tomography of the orbits	04.00				4.300	319.30 (280.10)	
12140	X-ray dacrocystography	04.00				11.200	831.60 (729.40)	
12200	Ultrasound of the orbit/eye	04.00				5.130	380.90 (334.10)	
12210	Ultrasound of the orbit/eye including doppler	04.00				10.970	814.50 (714.50)	
12300	CT of the orbits single plane	04.00				15.700	1165.70 (1022.50)	
12310	CT of the orbits, more than one plane	04.00				20.590	1528.70 (1341.00)	
12320	CT of the orbits pre and post contrast single plane	04.00				36.030	2675.10 (2346.60)	
12330	CT of the orbits pre and post contrast multiple planes	04.00				39.700	2947.60 (2585.60)	
12400	MR of the orbits	04.00				62.460	4637.40 (4067.90)	
12410	MR of the orbitae, pre and post contrast	04.00				100.640	7472.10 (6554.50)	
12900	Nuclear Medicine study – Dacrocystography	04.00		20.770	1542.10 (1352.70)			
Paranasal sinuses								
	Code 13120 (tomography) may be added to 13100, 13110 (paranasal sinuses), 13130 (nasopharyngeal).							04.00
13100	X-ray of the paranasal sinuses, single view	04.00				2.740	203.40 (178.50)	
13110	X-ray of the paranasal sinuses, two or more views	04.00				3.660	271.70 (238.40)	
13120	X-ray tomography of the paranasal sinuses	04.00				4.300	319.30 (280.10)	
13130	X-ray of the naso-pharyngeal soft tissue	04.00				2.740	203.40 (178.50)	
13300	CT of the paranasal sinuses single plane, limited study	04.00				7.200	534.60 (468.90)	
13310	CT of the paranasal sinuses, two planes, limited study	04.00				12.400	920.70 (807.60)	
13320	CT of the paranasal sinuses, any plane, complete study	04.00				15.420	1144.90 (1004.30)	
13330	CT of the paranasal sinuses, more than one plane, complete study	04.00				20.770	1542.10 (1352.70)	
13340	CT of the paranasal sinuses, any plane, complete study: pre and post contrast	04.00				34.740	2579.30 (2262.50)	
13350	CT of the paranasal sinuses, more than one plane, complete study; pre and post contrast	04.00				41.010	3044.80 (2670.90)	

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
13400	MR of the paranasal sinuses	04.00				60.270	4474.80 (3925.30)
13410	MR of the paranasal sinuses, pre and post contrast	04.00				96.590	7171.40 (6290.70)
Mandible, teeth and maxilla							
	Code 14110 (orthopantomogram) may be combined with 14100 (mandible) if two separate studies are performed. Code 14110 (orthopantomogram) may be combined with 15100 and / or 15110 (TM joint) if complete separate studies are performed. Code 14160 (tomography) may be combined with 14130 or 14140 or 14150 (teeth). Code 14160 (tomography) may be combined with 15100 and / or 15110 (TM joint) if complete separate studies are performed. Code 14330 and 14340 (Dental implants) may be combined if mandible and maxilla are examined at the same visit.						04.00
14100	X-ray of the mandible	04.00				3.660	271.70 (238.40)
14110	X-ray orthopantomogram of the jaws and teeth	04.00				4.060	301.40 (264.40)
14120	X-ray maxillofacial cephalometry	04.00				2.770	205.70 (180.40)
14130	X-ray of the teeth single quadrant	04.00				2.000	148.50 (130.30)
14140	X-ray of the teeth more than one quadrant	04.00				2.530	187.80 (164.80)
14150	X-ray of the teeth full mouth	04.00				3.620	268.80 (235.80)
14160	X-ray tomography of the teeth per side	04.00				3.230	239.80 (210.40)
14300	CT of the mandible	04.00				22.280	1654.20 (1451.10)
14310	CT of the mandible, pre and post contrast	04.00				41.260	3063.40 (2687.20)
14320	CT mandible with 3D reconstructions	04.00				30.400	2257.10 (1979.90)
14330	CT for dental implants in the mandible	04.00				27.450	2038.10 (1787.80)
14340	CT for dental implants in the maxilla	04.00				27.450	2038.10 (1787.80)
14400	MR of the mandible/maxilla	04.00				63.800	4736.90 (4155.20)
14410	MR of the mandible/maxilla, pre and post contrast	04.00				98.640	7323.60 (6424.20)
TM Joints							
	Code 15100 (TM joint) and 15120 (tomography) may be combined. Code 15110 (TM joint) and 15130 (tomography) may be combined. Code 15140 (arthrography) and 15120 (tomography) may be combined. Code 15150 (arthrography) and 15130 (tomography) may be combined. Codes 15320 (CT arthrogram) and 15420 (MR arthrogram) include introduction of contrast (00140 may not be added).						04.00
15100	X-ray temporo-mandibular joint, left	04.00				3.560	264.30 (231.90)
15110	X-ray temporo-mandibular joint, right	04.00				3.560	264.30 (231.90)
15120	X-ray tomography temporo-mandibular joint, left	04.00				4.300	319.30 (280.10)
15130	X-ray tomography temporo-mandibular joint, right	04.00				4.300	319.30 (280.10)
15140	X-ray arthrography of the temporo-mandibular joint, left	04.00				15.410	1144.10 (1003.60)
15150	X-ray arthrography of the temporo-mandibular joint, right	04.00				15.410	1144.10 (1003.60)
15200	Ultrasound temporo-mandibular joints, one or both sides	04.00				6.560	487.10 (427.20)
15300	CT of the temporo-mandibular joints	04.00				25.380	1884.40 (1653.00)
15310	CT of the temporo-mandibular joints plus 3D reconstructions	04.00				34.500	2561.50 (2246.90)
15320	CT arthrogram of the temporo-mandibular joints	04.00				35.960	2669.90 (2342.00)
15400	MR of the temporo-mandibular joints	04.00				63.800	4736.90 (4155.20)
15410	MR of the temporo-mandibular joints, pre and post contrast	04.00				100.840	7487.00 (6567.50)
15420	MR arthrogram of the temporo-mandibular joints	04.00				74.710	5546.90 (4865.70)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
Mastoids and internal auditory canal							
	Code 16100 (mastoids) and 16120 (tomography) may be combined. Code 16110 (mastoids bilat) and 16130 (tomography) may be combined Code 16140 (IAM's) and 16150 (tomography) may be combined.						04.00
16100	X-ray of the mastoids, unilateral	04.00				3.590	266.50 (233.80)
16110	X-ray of the mastoids, bilateral	04.00				7.180	533.10 (467.60)
16120	X-ray tomography of the petro-temporal bone, unilateral	04.00				4.300	319.30 (280.10)
16130	X-ray tomography of the petro-temporal bone, bilateral	04.00				8.600	638.50 (560.10)
16140	X-ray internal auditory canal, bilateral	04.00				5.230	388.30 (340.60)
16150	X-ray tomography of the internal auditory canal, bilateral	04.00				4.300	319.30 (280.10)
16300	CT of the mastoids	04.00				12.600	935.50 (820.60)
16310	CT of the internal auditory canal	04.00				21.470	1594.10 (1398.30)
16320	CT of the internal auditory canal, pre and post contrast	04.00				34.200	2539.20 (2227.40)
16330	CT of the ear structures, limited study	04.00				13.400	994.90 (872.70)
16340	CT of the middle and inner ear structures, high definition including all reconstructions in various planes	04.00				43.350	3218.60 (2823.30)
16400	MR of the internal auditory canals, limited study	04.00				43.560	3234.20 (2837.00)
16410	MR of the internal auditory canals, pre and post contrast, limited study	04.00				68.930	5117.80 (4489.30)
16420	MR of the internal auditory canals, pre and post contrast, complete study	04.00				102.640	7620.60 (6684.70)
16430	MR of the ear structures	04.00				64.400	4781.40 (4194.20)
16440	MR of the ear structures, pre and post contrast	04.00				102.640	7620.60 (6684.70)
Sella turcica							
	Code 17100 (sella) and 17110 (tomography) may be combined.						04.00
17100	X-ray of the sella turcica	04.00				3.080	228.70 (200.60)
17110	X-ray tomography of the sella turcica	04.00				4.300	319.30 (280.10)
17300	CT of the sella turcica/hypophysis	04.00				17.450	1295.60 (1136.50)
17310	CT of the sella turcica/hypophysis, pre and post contrast	04.00				42.260	3137.60 (2752.30)
17400	MR of the hypophysis	04.00				43.560	3234.20 (2837.00)
17410	MR of the hypophysis, pre and post contrast	04.00				74.030	5496.40 (4821.40)
Salivary glands and floor of the mouth							
	Code 18100 (calculus) and 18110 (open mouth) may be combined. Codes 18120 (sialography) and 18320 (CT sialography) include introduction of contrast and fluoroscopy (00140 may not be added).						04.00
18100	X-ray of the salivary glands and ducts for calculus	04.00				2.840	210.90 (185.00)
18110	X-ray of the salivary ducts, open mouth for calculus	04.00				1.900	141.10 (123.70)
18120	X-ray sialography, per gland	04.00				14.080	1045.40 (917.00)
18200	Ultrasound of the salivary glands/floor of the mouth	04.00				6.560	487.10 (427.20)
18300	CT of the salivary glands, uncontrasted	04.00				12.600	935.50 (820.60)
18310	CT of the salivary glands/floor of the mouth, pre and post contrast	04.00				42.100	3125.80 (2741.90)
18320	CT sialography	04.00				26.280	1951.20 (1711.60)
18400	MR of the salivary glands/floor of the mouth	04.00				63.200	4692.30 (4116.10)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
18410	MR of the salivary glands/floor of the mouth, pre and post contrast	04.00				100.840	7487.00 (6567.50)
18900	Nuclear Medicine study - Salivary gland imaging	04.00		20.770	1542.10 (1352.70)		
Soft Tissue							
19900	Nuclear Medicine study - Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)		
19905	Nuclear Medicine study - Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)		
19910	Nuclear Medicine study - Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)		
19915	Nuclear Medicine study - Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	3531.10 (3097.50)		
19920	Nuclear medicine study - Infection localisation planar, static	04.00		18.040	1339.40 (1174.90)		
19925	Nuclear medicine study - Infection localisation planar, static, multiple studies	04.00		31.450	2335.00 (2048.30)		
19930	Nuclear medicine study - Infection localisation planar, static and SPECT	04.00		31.450	2335.00 (2048.30)		
19935	Nuclear medicine study - Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	3330.70 (2921.60)		
Neck							
	Code 20120 (laryngography) includes fluoroscopy (00140 may not be added). Code 20130 (speech) includes tomography and cinematography (00140 may not be added). Code 20450 (MR Angiography) may be combined with 10410 (MR brain).						04.00
20100	X-ray of soft tissue of the neck	04.00				2.740	203.40 (178.50)
20110	X-ray of the larynx including tomography	04.00				9.390	697.20 (611.60)
20120	X-ray laryngography	04.00				8.280	614.80 (539.30)
20130	X-ray evaluation of pharyngeal movement and speech by screening and / or cine with or without video recording	04.00				8.300	616.20 (540.60)
20200	Ultrasound of the thyroid	04.00				6.560	487.10 (427.20)
20210	Ultrasound of soft tissue of the neck	04.00				6.560	487.10 (427.20)
20220	Ultrasound of the carotid arteries, bilateral including B mode, pulsed and colour doppler	04.00				15.000	1113.70 (976.90)
20230	Ultrasound of the entire extracranial vascular tree including carotids, vertebral and subclavian vessels with B mode, pulse and colour doppler	04.00				21.840	1621.50 (1422.40)
20240	Ultrasound study of the venous system of the neck including pulse and colour Doppler	05.03				10.800	801.90 (703.40)
20300	CT of the soft tissues of the neck	04.00				18.250	1355.00 (1188.60)
20310	CT of the soft tissues of the neck, with contrast	04.00				38.150	2832.50 (2484.60)
20320	CT of the soft tissues of the neck, pre and post contrast	04.00				43.810	3252.70 (2853.30)
20330	CT angiography of the extracranial vessels in the neck	04.00				79.360	5892.20 (5168.60)
20340	CT angiography of the extracranial vessels in the neck and intracranial vessels of the brain	04.00				107.500	7981.40 (7001.30)
20350	CT angiography of the extracranial vessels in the neck and intracranial vessels of the brain plus a pre and post contrast study of the brain	04.00				124.430	9238.40 (8103.90)
20400	Mr of the soft tissue of the neck	04.00				63.600	4722.00 (4142.10)
20410	MR of the soft tissue of the neck, pre and post contrast	04.00				102.040	7576.10 (6645.70)
20420	MR of the soft tissue of the neck and uncontrasted angiography	04.00				92.600	6875.20 (6030.90)
20430	MR angiography of the extracranial vessels in the neck, without contrast	04.00				59.600	4425.10 (3881.60)
20440	MR angiography of the extracranial vessels in the neck, with contrast	04.00				74.020	5495.70 (4820.80)
20450	MR angiography of the extra and intracranial vessels with contrast	04.00				116.050	8616.20 (7558.10)
20460	MR angiography of the intra and extra cranial vessels plus brain, without contrast	05.05				135.170	10035.80 (8803.40)
20470	MR angiography of the intra and extra cranial vessels plus brain, with contrast	04.00				156.050	11586.10 (10163.20)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
20500	Arteriography of cervical vessels: carotid 1 - 2 vessels	04.00				44.430	3298.70 (2893.60)
20510	Arteriography of cervical vessels: vertebral 1 - 2 vessels	04.00				50.730	3766.50 (3303.90)
20520	Arteriography of cervical vessels: carotid and vertebral	04.00				77.630	5763.70 (5055.90)
20530	Arteriography of aortic arch and cervical vessels	04.00				91.970	6828.40 (5989.80)
20540	Arteriography of aortic arch, cervical and intracranial vessels	04.00				108.870	8083.20 (7090.50)
20550	Venography of jugular and vertebral veins	04.00				48.950	3634.30 (3188.00)
Thyroid (Nuclear Medicine)							
21900	Nuclear Medicine study - Thyroid, single uptake	04.00		9.680	718.70 (630.40)		
21910	Nuclear medicine study - Thyroid, multiple uptake	04.00		14.690	1090.70 (956.70)		
21920	Nuclear medicine study - Thyroid imaging with uptake	04.00		17.720	1315.60 (1154.10)		
21930	Nuclear medicine study - Thyroid imaging	04.00		12.720	944.40 (828.40)		
21940	Nuclear medicine study - Thyroid imaging with vascular flow	04.00		18.740	1391.40 (1220.50)		
21950	Nuclear medicine study - Thyroid suppression/stimulation	04.00		12.720	944.40 (828.40)		
21960	PET scan of the thyroid	09.00				-	-
Parathyroid (Nuclear Medicine)							
22900	Nuclear Medicine study - Parathyroid, planar, static	04.00		16.520	1226.50 (1075.90)		
22910	Nuclear medicine study - Parathyroid, planar, static, multiple	04.00		28.910	2146.50 (1882.90)		
22920	Nuclear medicine study - Parathyroid, planar, static with subtraction technique	04.00		21.880	1624.50 (1425.00)		
22930	Nuclear medicine study - Parathyroid SPECT	04.00		13.410	995.60 (873.40)		
22940	PET scan of the parathyroid	09.00				-	-
Soft Tissue							
29900	Nuclear Medicine study - Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)		
29905	Nuclear medicine study - Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)		
29910	Nuclear medicine study - Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)		
29915	Nuclear medicine study - Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	3531.10 (3097.50)		
29920	Nuclear medicine study - Tumour localisation planar, static	04.00		18.040	1339.40 (1174.90)		
29925	Nuclear medicine study - Infection localisation planar, static, multiple studies	04.00		31.450	2335.00 (2048.30)		
29930	Nuclear medicine study - Infection localisation planar, static and SPECT	04.00		31.450	2335.00 (2048.30)		
29935	Nuclear medicine study - Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	3330.70 (2921.60)		
29940	Nuclear medicine study - Regional lymph node mapping, static, planar	04.00		24.100	1789.30 (1569.60)		
29945	Nuclear medicine study - Regional lymph node mapping, static, planar, multiple	04.00		36.490	2709.20 (2376.50)		
29950	Nuclear medicine study - Lymph node localisation with gamma probe	04.00		12.390	919.90 (806.90)		
29960	PET scan of the soft tissue of the neck	09.00				-	-
29961	PET/CT scan of the soft tissue of the neck uncontrasted	09.00				105.870	-
29962	PET/CT scan of the soft tissue of the neck contrasted	09.00				111.690	-

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
Thorax							
Chest wall, pleura, lungs and mediastinum							
	Code 30140 (tomography) may be combined with 30100 or 30110 (chest) or 30150 or 30155 (ribs) or 30160 (thoracic inlet). Codes 30170 (Sterno-clavicular) and 30175 (tomography) may be combined. Code 30180 (sternum) and 30185 (tomography) may be combined. Code 30340 (CT limited high resolution) may be combined with 30310 or 30320 or 30330 (CT chest). Motivation may be required. Code 30350 (high resolution) is a stand alone study. Code 30360, (CT chest for pulmonary embolism) is a complete examination and includes the preceding uncontrasted CT scan of the chest, and may not be combined with 40330 or 40333 (CT abdomen and pelvis). Code 30370 (CT pulmonary embolism plus CT venography) may not be combined with 70230 (Doppler).						04.00
30100	X-ray of the chest, single view	04.00				3.040	225.70 (198.00)
30110	X-ray of the chest two views, PA and lateral	04.00				3.840	285.10 (250.10)
30120	X-ray of the chest complete with additional views	04.00				4.240	314.80 (276.10)
30130	X-ray of the chest complete including fluoroscopy	04.00				4.480	332.60 (291.80)
30140	X-ray tomography of the chest	04.00				4.300	319.30 (280.10)
30150	X-ray of the ribs	04.00				4.790	355.60 (312.00)
30155	X-ray of the chest and ribs	04.00				6.420	476.70 (418.10)
30160	X-ray of the thoracic inlet	04.00				2.560	190.10 (166.70)
30170	X-ray of the sterno-clavicular joints	04.00				4.210	312.60 (274.20)
30175	X-ray tomography of the sterno-clavicular joint	04.00				4.300	319.30 (280.10)
30180	X-ray of the sternum	04.00				4.210	312.60 (274.20)
30185	X-ray tomography of the sternum	04.00				4.300	319.30 (280.10)
30200	Ultrasound of the chest wall, any region	04.00				6.560	487.10 (427.20)
30210	Ultrasound of the pleural space	04.00				6.560	487.10 (427.20)
30220	Ultrasound of the mediastinal structures	04.00				6.560	487.10 (427.20)
30300	CT of the chest, limited study	04.00				9.500	705.30 (618.70)
30310	CT of the chest uncontrasted	04.00				26.600	1974.90 (1732.40)
30320	CT of the chest contrasted	04.00				42.430	3150.30 (2763.40)
30330	CT of the chest, pre and post contrast	04.00				45.700	3393.00 (2976.40)
30340	CT of the chest, limited high resolution study	04.00				11.200	831.60 (729.40)
30350	CT of the chest, complete high resolution study	04.00				24.010	1782.60 (1563.70)
30355	CT of the chest, complete high resolution study with additional prone and expiratory studies	05.03				33.300	2472.40 (2168.80)
30360	CT of the chest for pulmonary embolism	04.00				57.120	4240.90 (3720.10)
30370	CT of the chest for pulmonary embolism with CT venography of abdomen, pelvis and lower limbs	04.00				80.280	5960.50 (5228.50)
30400	MR of the chest	04.00				63.600	4722.00 (4142.10)
30410	MR of the chest with uncontrasted angiography	04.00				92.600	6875.20 (6030.90)
30420	MR of the chest, pre and post contrast	04.00				102.040	7576.10 (6645.70)
30900	Nuclear Medicine study - Lung perfusion	04.00		21.540	1599.30 (1402.90)		
30910	Nuclear Medicine study - Lung ventilation, aerosol	04.00		21.500	1596.30 (1400.30)		
30920	Nuclear Medicine study - Lung perfusion and ventilation	04.00		42.030	3120.60 (2737.30)		

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
30930	Nuclear Medicine study - Lung ventilation using radio-active gas	04.00		14.170	1052.10 (922.90)		
30940	Nuclear Medicine study - Lung perfusion and ventilation using radio-active gas	04.00		34.690	2575.60 (2259.30)		
30950	Nuclear medicine study - Muco-ciliary clearance study dynamic	05.03		26.510	1968.30 (1726.50)		
30960	Nuclear medicine study - alveolar permeability	05.03		26.510	1968.30 (1726.50)		
	Stand alone code. Not to be combined with 30910.	05.03					
30970	Nuclear medicine study - quantitative evaluation of lung perfusion and ventilation	05.03		6.020	447.00 (392.10)		
	Stand alone code. Not to be combined with 30920.	05.03					
30980	PET scan of the chest	09.00				-	-
30981	PET/CT scan of the chest uncontrasted	09.00				111.440	-
30982	PET/CT scan of the chest contrasted	09.00				117.420	-
30983	PET/CT scan of the chest pre and post contrast	09.00				148.320	-
Oesophagus							
	Codes 31100, 31110, 31120 (swallow) include fluoroscopy (00140 may not be added).						04.00
31100	X-ray barium swallow	04.00				6.600	490.00 (429.80)
31105	Xray 3 phase dynamic contrasted swallow	05.03				12.600	935.50 (820.60)
31110	X-ray barium swallow, double contrast	04.00				7.920	588.00 (515.80)
31120	X-ray barium swallow with cinematography	04.00				10.070	747.70 (655.80)
Aorta and large vessels							
	Codes 32210 and 32220 (Ivus) may be combined						04.00
32200	Ultrasound intravascular arterial or venous assessment for intervention, once per complete procedure	04.00				4.200	311.80 (273.50)
32210	Ultrasound intravascular (IVUS) first vessel	04.00				8.440	626.60 (549.70)
32220	Ultrasound intravascular (IVUS) subsequent vessels	04.00				5.300	393.50 (345.20)
32300	CT angiography of the aorta and branches	04.00				79.080	5871.40 (5150.30)
32305	CT angiography of the thoracic and abdominal aorta and branches	05.03				105.500	7833.00 (6871.00)
32310	CT angiography of the pulmonary vasculature	04.00				79.080	5871.40 (5150.30)
32400	MR angiography of the aorta and branches	04.00				78.500	5828.30 (5112.60)
32410	MR angiography of the pulmonary vasculature	04.00				105.270	7815.90 (6856.00)
32500	Arteriography of thoracic aorta	04.00				28.260	2098.20 (1840.50)
32510	Arteriography of bronchial intercostal vessels alone	04.00				50.150	3723.40 (3266.20)
32520	Arteriography of thoracic aorta, bronchial and intercostal vessels	04.00				67.430	5006.40 (4391.60)
32530	Arteriography of pulmonary vessels	04.00				63.270	4697.50 (4120.70)
32540	Arteriography of heart chambers, coronary arteries	04.00				44.270	3286.90 (2883.20)
32550	Venography of thoracic vena cava	04.00				28.380	2107.10 (1848.30)
32560	Venography of vena cava, azygos system	04.00				56.310	4180.80 (3667.40)
32570	Venography patency of A-port or other central line	04.00				19.640	1458.20 (1279.10)
Heart							
	Codes 33300 (CT anatomy / function) and 33310 (CT Angiography) may be done as stand alone studies or as additive studies if both are performed at the same time.						04.00
33205	Ultrasound study of the heart for foetal or paediatric cases including doppler	04.00				12.300	913.20 (801.10)
	Code 33205 is a stand alone study and may not be added to 33200 or 33210. This code is intended for paediatric and foetal cases only	04.00					

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
33200	Ultrasound study of the heart, including Doppler	04.00				8.200	608.80 (534.10)
33210	Ultrasound study of the heart trans-oesophageal	04.00				10.520	781.10 (685.10)
33220	Ultrasound intravascular imaging to guide placement of intracoronary stent once per vessel	04.00				5.200	386.10 (338.70)
33300	CT anatomical/functional study of the heart	04.00				34.610	2569.70 (2254.10)
33310	CT angiography of heart vessels	04.00				81.280	6034.70 (5293.60)
33400	MR of the heart, anatomical study	04.00				62.200	4618.10 (4051.00)
33410	MR of the heart, anatomical and functional study	04.00				69.000	5123.00 (4493.80)
33420	MR of the heart, pre and post contrast	04.00				103.040	7650.30 (6710.80)
33430	MR angiography of the heart vessels	04.00				70.710	5249.90 (4605.20)
33440	MR of the heart, anatomical, functional and coronary angiography	04.00				106.840	7932.40 (6958.30)
33900	Nuclear Medicine study - Cardiac shunt detection	04.00		21.500	1596.30 (1400.30)		
33905	Nuclear Medicine study - Cardiac blood pool imaging, ejection fraction plus wall motion single study	04.00		26.510	1968.30 (1726.50)		
33910	Nuclear Medicine study - Cardiac blood pool imaging, ejection fraction plus wall motion multiple studies	04.00		34.920	2592.70 (2274.30)		
33915	Nuclear Medicine study - Cardiac blood pool imaging, gated SPECT	04.00		13.410	995.60 (873.40)		
33920	Nuclear medicine study - Cardiac blood pool imaging, first pass technique	04.00		26.510	1968.30 (1726.50)		
33925	Nuclear medicine study - Myocardial perfusion, single, rest (thallium/mibi) planar, non gated	04.00		16.520	1226.50 (1075.90)		
33930	Nuclear medicine study - Myocardial perfusion, single, stress (thallium/mibi) planar, non gated	04.00		16.520	1226.50 (1075.90)		
33935	Nuclear medicine study - Myocardial perfusion, single, rest (thallium/mibi), SPECT (non gated)	04.00		16.520	1226.50 (1075.90)		
33940	Nuclear medicine study - Myocardial perfusion, single, stress (thallium/mibi), SPECT non gated	04.00		16.520	1226.50 (1075.90)		
33945	Nuclear medicine study - Myocardial perfusion, single, rest (thallium/mibi), SPECT (gated)	04.00		28.910	2146.50 (1882.90)		
33950	Nuclear medicine study - Myocardial perfusion, single, stress (thallium/mibi), SPECT (gated)	04.00		28.910	2146.50 (1882.90)		
33955	Nuclear medicine study - Plus wall movement and ejection fraction, SPECT	04.00		6.020	447.00 (392.10)		
33960	Nuclear medicine study - Cardiac hot spot imaging (infarction) planar	04.00		21.500	1596.30 (1400.30)		
33965	Nuclear medicine study - Cardiac hot spot imaging (infarction) SPECT	04.00		13.410	995.60 (873.40)		
33970	Nuclear Medicine study - Multi stage treadmill ECG test	04.00		6.660	494.50 (433.80)		
33980	PET scan of the heart	09.00				-	-
33981	PET/CT scan of the heart?	09.00				153.140	-
Mamma							
	Codes 34110 (localization), 34120 (stereo-tactic localization) and 34130 (stereo-tactic biopsy) may not be combined. Code 34130 (stereo-tactic biopsy). Add procedural code 80610 (cutting needle) or 34150 (mammotome) Code 34205 (U/S FNA) includes the procedural code (may not be combined with 34150).						04.00
34100	X-ray mammography including ultrasound	04.00				10.440	775.10 (679.90)
34101	X-Ray mammography unilateral, including ultrasound	06.04				8.352	620.10 (543.90)
	Code 34100 may not be combined with 34205 when these two procedures are done in the same sitting. Code 34100 includes ultrasound. In this situation use code 80605 (fine needle aspiration) with 34100	04.00					
34105	X-ray mammography galactography	04.00				9.400	697.90 (612.20)
	Once off fee per visit. May be added to 34100	04.00					
34110	X-ray mammography study for localisation	04.00				7.240	537.50 (471.50)
34120	X-ray stereotactic mammography – localisation	04.00				10.400	772.20 (677.30)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
34130	X-ray stereotactic mammography – biopsy	04.00				11.600	861.30 (755.50)
34140	X-ray of biopsy specimen of the mamma	04.00				2.740	203.40 (178.50)
34150	X-ray Mammotome hand held biopsy apparatus	04.00				9.800	727.60 (638.30)
34200	Ultrasound study of the breast	04.00				7.900	586.50 (514.50)
34205	Ultrasound guided aspiration FNA/localisation of the breast	04.00				12.100	898.40 (788.00)
34300	Computer assisted diagnosis for mammography	04.00				1.400	103.90 (91.20)
34400	MR study of the breast	04.00				62.600	4647.80 (4077.00)
34410	MR study of the breast pre and post contrast	04.00				100.840	7487.00 (6567.50)
34900	PET scan of the breast/mamma	09.00				-	-
Soft Tissue							
39900	Nuclear medicine study - Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)		
39905	Nuclear medicine study - Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)		
39910	Nuclear medicine study - Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)		
39915	Nuclear medicine study - Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	3531.10 (3097.50)		
39920	Nuclear medicine study - Infection localisation planar, static	04.00		18.040	1339.40 (1174.90)		
39925	Nuclear medicine study - Infection localisation planar, static, multiple studies	04.00		31.450	2335.00 (2048.30)		
39930	Nuclear medicine study - Infection localisation planar, static and SPECT	04.00		31.450	2335.00 (2048.30)		
39935	Nuclear medicine study - Infection localisation planar, static, multiple studies, SPECT	04.00		44.860	3330.70 (2921.60)		
39940	Nuclear medicine study - Regional lymph node mapping, static, planar	04.00		24.100	1789.30 (1569.60)		
39945	Nuclear medicine study - Regional lymph node mapping, static, planar, multiple	04.00		36.490	2709.20 (2376.50)		
39950	Nuclear medicine study – Lymph node localisation with gamma probe	04.00		12.390	919.90 (806.90)		
Abdomen and Pelvis							
Abdomen/stomach/bowel							
	Code 40120 (tomography) may be combined with 40100 or 40105 or 40110 (abdomen). Codes 40140 to 40190 (barium studies) include fluoroscopy (00140 may not be added). Code 40190 (intussusception) is a stand alone code and may not be combined with 40160 or 40165 (barium enema), (00140 may not be added).						04.00
40100	X-ray of the abdomen	04.00				3.320	246.50 (216.20)
40105	X-ray of the abdomen supine and erect, or decubitus	04.00				5.360	398.00 (349.10)
40110	X-ray of the abdomen multiple views including chest	04.00				8.100	601.40 (527.50)
40120	X-ray tomography of the abdomen	04.00				4.300	319.30 (280.10)
40140	X-ray barium meal single contrast	04.00				8.870	658.60 (577.70)
40143	X-ray barium meal double contrast	04.00				11.990	890.20 (780.90)
40147	X-ray barium meal double contrast with follow through	04.00				15.800	1173.10 (1029.00)
40150	X-ray small bowel enteroclysis (meal)	04.00				25.450	1889.60 (1657.50)
	Code 40150 excludes duodenal intubation and 40175 (Duodenal intubation) may be added.	06.02					
40153	X-ray small bowel meal follow through single contrast	04.00				19.550	1451.50 (1273.30)
40157	X-ray small bowel meal with pneumocolon	04.00				25.630	1902.90 (1669.20)
40160	X-ray large bowel enema single contrast	04.00				12.970	963.00 (844.70)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
40165	X-ray large bowel enema double contrast	04.00				19.630	1457.40 (1278.50)
40170	X-ray guided gastro oesophageal intubation	04.00				1.600	118.80 (104.20)
40175	X-ray guided duodenal intubation	04.00				2.800	207.90 (182.40)
40180	X-ray defaecogram	04.00				12.970	963.00 (844.70)
40190	X-ray guided reduction of intussusception	04.00				16.270	1208.00 (1059.60)
40200	Ultrasound study of the abdominal wall	04.00				5.540	411.30 (360.80)
40210	Ultrasound study of the whole abdomen including the pelvis	04.00				8.240	611.80 (536.70)
40300	CT study of the abdomen	04.00				26.410	1960.80 (1720.00)
40310	CT study of the abdomen with contrast	04.00				44.820	3327.70 (2919.00)
40313	CT study of the abdomen pre and post contrast	04.00				52.990	3934.30 (3451.10)
40320	CT of the pelvis	04.00				26.130	1940.00 (1701.80)
40323	CT of the pelvis with contrast	04.00				47.480	3525.20 (3092.30)
40327	CT of the pelvis pre and post contrast	04.00				53.870	3999.60 (3508.40)
40330	CT of the abdomen and pelvis	04.00				38.500	2858.50 (2507.40)
40333	CT of the abdomen and pelvis with contrast	04.00				62.170	4615.90 (4049.00)
40337	CT of the abdomen and pelvis pre and post contrast	04.00				67.430	5006.40 (4391.60)
40340	CT triphasic study of the liver, abdomen and pelvis pre and post contrast	04.00				74.110	5502.40 (4826.60)
40345	CT of the chest, abdomen and pelvis without contrast	04.00				70.120	5206.10 (4566.80)
40350	CT of the chest, abdomen and pelvis with contrast	04.00				88.350	6559.60 (5754.10)
40355	CT of the chest triphasic of the liver, abdomen and pelvis with contrast	04.00				93.050	6908.60 (6060.20)
40360	CT of the base of skull to symphysis pubis with contrast	04.00				102.730	7627.30 (6690.60)
40365	CT colonoscopy	04.00				34.780	2582.30 (2265.20)
	Stand alone study, may not be added to any code between 40300 and 40360	04.00					
40400	MR of the abdomen	04.00				64.580	4794.80 (4206.00)
40410	MR of the abdomen pre and post contrast	04.00				100.840	7487.00 (6567.50)
40420	MR of the pelvis, soft tissue	04.00				64.580	4794.80 (4206.00)
40430	MR of the pelvis, soft tissue, pre and post contrast	04.00				102.040	7576.10 (6645.70)
40900	Nuclear Medicine study - Gastro oesophageal reflux and emptying	04.00		21.500	1596.30 (1400.30)		
40905	Nuclear Medicine study - Gastro oesophageal reflux and emptying multiple studies	04.00		34.920	2592.70 (2274.30)		
40910	Nuclear Medicine study - Gastro intestinal protein loss	04.00		21.500	1596.30 (1400.30)		
40915	Nuclear Medicine study - Gastro intestinal protein loss multiple studies	04.00		34.920	2592.70 (2274.30)		
40920	Nuclear Medicine study – Acute GIT bleed static/dynamic	04.00		21.500	1596.30 (1400.30)		
40925	Nuclear medicine study – Acute GIT bleed multiple studies	04.00		34.920	2592.70 (2274.30)		
40930	Nuclear medicine study - Meckel's localisation	04.00		20.770	1542.10 (1352.70)		
40935	Nuclear medicine study - Gastric mucosa imaging	04.00		20.770	1542.10 (1352.70)		
40940	Nuclear medicine study - colonic transit multiple studies	05.03		44.860	3330.70 (2921.60)		

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
	Stand alone code	05.03					
40950	PET scan of the abdomen and pelvis	09.00				-	-
40951	PET/CT scan of the abdomen and pelvis uncontrasted	09.00				119.530	-
40952	PET/CT scan of the abdomen and pelvis contrasted	09.00				129.310	-
40953	PET/CT scan of the abdomen and pelvis pre and post contrast	09.00				140.500	-
Liver, spleen, gall bladder and pancreas							
	Code 41110, 41120 and 41130 (cholangiography) include fluoroscopy (00140 may not be added).						04.00
41100	X-ray ERCP including screening	04.00				18.900	1403.20 (1230.90)
41105	X-ray ERCP reporting on images done in theatre	04.00				2.400	178.20 (156.30)
41110	X-ray cholangiography intra-operative	04.00				8.450	627.40 (550.30)
41120	X-ray T-tube cholangiography post operative	04.00				14.050	1043.20 (915.00)
41130	X-ray transhepatic percutaneous cholangiography	04.00				32.340	2401.10 (2106.20)
41200	Ultrasound study of the upper abdomen	04.00				7.000	519.70 (455.90)
41210	Ultrasound doppler of the hepatic and splenic veins and inferior vena cava in assessment of portal venous hypertension or thrombosis	04.00				9.800	727.60 (638.30)
	Code 41210 is a stand alone study and may not be added to 40200, 40210, 41200 or 42200	04.00					
41300	CT of the abdomen triphasic study – liver	04.00				54.900	4076.10 (3575.50)
41400	MR study of the liver/pancreas	04.00				64.780	4809.70 (4219.00)
41410	MR study of the liver/pancreas pre and post contrast	04.00				100.840	7487.00 (6567.50)
41420	MRCP	04.00				49.200	3652.90 (3204.30)
41430	MR study of the abdomen with MRCP	04.00				92.980	6903.40 (6055.60)
41440	MR study of the abdomen pre and post contrast with MRCP	04.00				133.600	9919.30 (8701.10)
41900	Nuclear Medicine study - Liver and spleen, planar views only	04.00		21.500	1596.30 (1400.30)		
41905	Nuclear Medicine study - Liver and spleen, with flow study	04.00		27.530	2044.00 (1793.00)		
41910	Nuclear Medicine study - Liver and spleen, planar views SPECT	04.00		34.920	2592.70 (2274.30)		
41915	Nuclear Medicine study - Liver and spleen, with flow study and SPECT	04.00		40.940	3039.60 (2666.30)		
41920	Nuclear Medicine study - Hepatobiliary system planar static/dynamic	04.00		21.500	1596.30 (1400.30)		
41925	Nuclear Medicine study – hepatobiliary tract including flow	04.00		26.510	1968.30 (1726.50)		
41930	Nuclear medicine study – Hepatobiliary system planar, static/dynamic multiple studies	04.00		34.920	2592.70 (2274.30)		
41935	Nuclear medicine study – Hepatobiliary tract including flow multiple studies	04.00		39.920	2963.90 (2599.90)		
41940	Nuclear medicine study - Gall bladder ejection fraction	04.00		6.020	447.00 (392.10)		
41945	Nuclear medicine study – Biliary gastric reflux study	04.00		20.770	1542.10 (1352.70)		
Renal tract							
42100	X-ray tomography of the renal tract	04.00				4.300	319.30 (280.10)
	Code 42100 (tomography) may not be added to 42110 or 42115 (IVP). Codes 42115 (IVP), 42120 (cystography), 42130 (urethrography), 42140 (MCU), 42150 (retrograde), and 42160 (prograde) include fluoroscopy (00140 may not be added).	04.00					
42110	X-ray excretory urogram including tomography	04.00				24.860	1845.80 (1619.10)
42115	X-ray excretory urogram including tomography with micturating study	04.00				32.860	2439.70 (2140.10)
42120	X-ray cystography	04.00				15.050	1117.40 (980.20)
42130	X-ray urethrography	04.00				15.370	1141.20 (1001.00)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
42140	X-ray micturating cysto-urethrography	04.00				19.300	1432.90 (1257.00)
42150	X-ray retrograde/prograde pyelography	04.00				12.530	930.30 (816.10)
42155	X-ray retrograde/prograde pyelography reporting on images done in theatre	04.00				2.410	178.90 (157.00)
42160	X-ray prograde pyelogram – percutaneous	04.00				32.670	2425.60 (2127.70)
42200	Ultrasound study of the renal tract including bladder	04.00				7.420	550.90 (483.30)
42205	Ultrasound doppler for resistive index in vessels of transplanted kidney	04.00				3.800	282.10 (247.50)
	Code 42205 is a stand alone study and may not be added to 42200	04.00					
42210	Ultrasound study of the renal arteries including Doppler	05.03				10.600	787.00 (690.40)
42300	CT of the renal tract for a stone	04.00				25.150	1867.30 (1638.00)
42400	MR of the renal tract for obstruction	04.00				47.000	3489.60 (3061.00)
42410	MR of the kidneys without contrast	04.00				64.580	4794.80 (4206.00)
42420	MR of the kidneys pre and post contrast	04.00				102.240	7590.90 (6658.70)
42900	Nuclear Medicine study - Renal imaging, static (e.g. DMSA)	04.00		21.940	1629.00 (1428.90)		
42905	Nuclear Medicine study - Renal imaging, static (e.g. DMSA) with flow	04.00		27.960	2075.90 (1821.00)		
42910	Nuclear Medicine study - Renal imaging, static (e.g. DMSA) with SPECT	04.00		35.350	2624.60 (2302.30)		
42915	Nuclear Medicine study - Renal imaging, static (e.g. DMSA), with flow, with SPECT	04.00		41.370	3071.60 (2694.30)		
42920	Nuclear Medicine study - Renal imaging dynamic (renogram) and vascular flow	04.00		26.510	1968.30 (1726.50)		
42930	Nuclear Medicine study – Renovascular study, baseline	04.00		26.510	1968.30 (1726.50)		
42940	Nuclear Medicine study – Renovascular study, with intervention	04.00		26.510	1968.30 (1726.50)		
42950	Nuclear medicine study - indirect voiding cystogram	05.05		6.020	447.00 (392.10)		
Reproductive system							
	Codes 43120 and 43130 (hystero-salpingography) include fluoroscopy (00140 may not be added). Codes 43230 (U/S ova aspiration) and 43240 (amniocentesis) are complete procedure codes.						04.00
	Codes 43230 (U/S ova aspiration) and 43240 (amniocentesis) are complete procedures and may not be combined with 00230 (ultrasound guidance) or 80605 (fine needle aspiration). Code 43240 may be combined with 43260 (second trimester), 43270 (third trimester) and 43273 (third trimester follow up)						04.00
43100	X-ray pelvimetry single	04.00				4.000	297.00 (260.50)
43110	X-ray pelvimetry multiple views	04.00				5.800	430.60 (377.70)
43120	X-ray hystero-salpingography	04.00				10.030	744.70 (653.20)
43130	X-ray hystero-salpingography with introduction of contrast	04.00				13.530	1004.50 (881.20)
43200	Ultrasound study of the pelvis transabdominal	04.00				5.700	423.20 (371.20)
43205	Ultrasound study of the female pelvis transvaginal	04.00				7.210	535.30 (469.60)
43210	Ultrasound study of the prostate transrectal	04.00				7.380	547.90 (480.60)
43215	Ultrasound transrectal prostate volume for brachytherapy	04.00				10.400	772.20 (677.30)
43220	Ultrasound study of the testes	04.00				7.380	547.90 (480.60)
43225	Ultrasound study for male impotence including doppler and injection of vaso constrictor	04.00				15.000	1113.70 (976.90)
	Code 43225 is a stand alone study and may not be added to 43200, 43210, 43220 or 44200	04.00					
43230	Ultrasound guided transvaginal aspiration for ova	04.00				13.500	1002.30 (879.20)
43240	Ultrasound guided amniocentesis	04.00				5.840	433.60 (380.30)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
43250	Ultrasound study of the pregnant uterus, first trimester	04.00				4.200	311.80 (273.50)
43260	Ultrasound study of the pregnant uterus, second trimester	04.00				6.360	472.20 (414.20)
43270	Ultrasound study of the pregnant uterus, third trimester, first visit	04.00				6.360	472.20 (414.20)
43273	Ultrasound study of the pregnant uterus, third trimester, follow-up visit	04.00				4.200	311.80 (273.50)
43277	Ultrasound study of the pregnant uterus, multiple gestation, second or third trimester, first visit	04.00				8.170	606.60 (532.10)
43280	Ultrasound doppler of the umbilical cord for resistive index	04.00				3.800	282.10 (247.50)
	Code 43280 is a stand alone study and may not be added to the following codes: 43250, 43260, 43270, 43273 or 43277	04.00					
43300	CT pelvimetry – Topogram	04.00				6.580	488.50 (428.50)
43400	MR study of pelvic reproductive organs - limited study	04.00				47.600	3534.10 (3100.10)
43405	MR study for pelvimetry	04.00				20.000	1484.90 (1302.60)
43410	MR study of pelvic reproductive organs - complete – uncontrasted	04.00				64.580	4794.80 (4206.00)
43420	MR study of pelvic reproductive organs - complete – pre and post contrast	04.00				102.240	7590.90 (6658.70)
43950	Nuclear medicine study - Radio pharmaceutical voiding cystogram	04.00		21.500	1596.30 (1400.30)		
43960	Nuclear medicine study - Testicular imaging	04.00		26.510	1968.30 (1726.50)		
43970	Nuclear medicine study - hystero-salpingography	05.03		26.510	1968.30 (1726.50)		
43961	PET scan of the testis	09.00				-	-
Aorta and vessels							
	Code 44400 (MR Angiography) may be combined with 40400 (MR abdomen).						04.00
44200	Ultrasound study of abdominal aorta and branches including doppler	04.00				18.320	1360.20 (1193.10)
44205	Ultrasound study of the IVC and pelvic veins including Doppler	05.03				14.000	1039.40 (911.80)
	This is a stand alone code and may not be added to 44200.	05.03					
44300	CT angiography of abdominal aorta and branches	04.00				76.720	5696.20 (4996.60)
44305	CT angiography of the abdominal aorta and branches and pre and post contrast study of the upper abdomen	04.00				94.320	7002.90 (6142.90)
44310	CT angiography of the pelvis	04.00				78.640	5838.70 (5121.70)
44320	CT angiography of the abdominal aorta and pelvis	04.00				89.540	6648.00 (5831.60)
44325	CT angiography of the abdominal aorta and pelvis and pre and post contrast study of the upper abdomen and pelvis	04.00				119.150	8846.40 (7760.00)
44330	CT portogram	04.00				74.400	5523.90 (4845.50)
44400	MR angiography of abdominal aorta and branches	04.00				76.640	5690.20 (4991.40)
44500	Arteriography of abdominal aorta alone	04.00				28.120	2087.80 (1831.40)
44503	Arteriography of aorta plus coeliac, mesenteric branches	04.00				75.630	5615.20 (4925.60)
44505	Arteriography of aorta plus renal, adrenal branches	04.00				63.010	4678.20 (4103.70)
44507	Arteriography of aorta plus non-visceral branches	04.00				60.790	4513.40 (3959.10)
44510	Arteriography of coeliac, mesenteric vessels alone	04.00				64.350	4777.70 (4191.00)
44515	Arteriography of renal, adrenal vessels alone	04.00				49.490	3674.40 (3223.20)
44517	Arteriography of non-visceral abdominal vessels alone	04.00				54.910	4076.80 (3576.20)
44520	Arteriography of internal and external iliac vessels alone	04.00				56.720	4211.20 (3694.10)
44525	Venography of internal and external iliac veins alone	04.00				62.110	4611.40 (4045.10)

Code	Description	Ver	Add	Nuclear Medicine		Radiology		
				RVU	Fee	RVU	Fee	
44530	Corpora cavernosography	04.00				25.060	1860.60 (1632.10)	
44535	Vasography, vesciculography	04.00				29.190	2167.20 (1901.10)	
44540	Venography of inferior vena cava	04.00				26.120	1939.30 (1701.10)	
44543	Venography of hepatic veins alone	04.00				53.770	3992.20 (3501.90)	
44545	Venography of inferior vena cava and hepatic veins	04.00				68.910	5116.30 (4488.00)	
44550	Venography of lumbar azygos system alone	04.00				43.890	3258.70 (2858.50)	
44555	Venography of inferior vena cava and lumbar azygos veins	04.00				65.460	4860.10 (4263.30)	
44560	Venography of renal, adrenal veins alone	04.00				43.990	3266.10 (2865.00)	
44565	Venography of inferior vena cava and renal/adrenal veins	04.00				68.390	5077.70 (4454.10)	
44570	Venography of spermatic, ovarian veins alone	04.00				40.390	2998.80 (2630.50)	
44573	Venography of inferior vena cava, renal, spermatic, ovarian veins	04.00				73.990	5493.50 (4818.80)	
44580	Venography indirect splenoportogram	04.00				48.670	3613.60 (3169.80)	
44583	Venography direct splenoportogram	04.00				31.590	2345.40 (2057.40)	
44587	Venography transhepatic portogram	04.00				66.750	4955.90 (4347.30)	
Soft Tissue								
49900	Nuclear Medicine study – Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)			
49905	Nuclear Medicine study – Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)			
49910	Nuclear Medicine study – Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)			
49915	Nuclear medicine study – Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	3531.10 (3097.50)			
49920	Nuclear medicine study – Infection localisation planar, static	04.00		18.040	1339.40 (1174.90)			
49930	Nuclear medicine study – Infection localisation planar, static, multiple studies	04.00		31.450	2335.00 (2048.30)			
49940	Nuclear medicine study – Infection localisation planar, static and SPECT	04.00		31.450	2335.00 (2048.30)			
49950	Nuclear medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	3330.70 (2921.60)			
49960	Nuclear medicine study – Regional lymph node mapping dynamic	04.00		5.010	372.00 (326.30)			
49965	Nuclear medicine study – Regional lymph node mapping, static, planar	04.00		24.100	1789.30 (1569.60)			
49970	Nuclear medicine study – Regional lymph node mapping, static, planar, multiple	04.00		37.510	2785.00 (2443.00)			
49975	Nuclear medicine study – Regional lymph node mapping SPECT	04.00		13.410	995.60 (873.40)			
49980	Nuclear medicine study – Lymph node localisation with gamma probe	04.00		13.410	995.60 (873.40)			
Spine, Pelvis and Hips								
	Code 51340 (CT myelography, cervical), 52330 (CT myelography thoracic) and 53340 (CT myelography lumbar) are stand alone studies and may not be combined with the conventional myelography codes viz. 51160, 52150, 53160						04.00	
General								
	Code 50130 (Lumbar puncture) and 50140 (cisternal puncture) include fluoroscopy and introduction of contrast (00140 may not be added).						04.00	
50100	X-ray of the spine scoliosis view AP only	04.00				7.000	519.70 (455.90)	
50105	X-ray of the spine scoliosis view AP and lateral	04.00				12.000	891.00 (781.50)	
50110	X-ray of the spine scoliosis view AP and lateral including stress views	04.00				18.540	1376.50 (1207.50)	
50120	X-ray bone densitometry	04.00				11.520	855.30 (750.30)	
50130	X-ray guided lumbar puncture	04.00				4.800	356.40 (312.60)	

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
50140	X-ray guided cisternal puncture cisternogram	04.00				22.980	1706.20 (1496.60)
50300	CT quantitative bone mineral density	04.00				11.830	878.30 (770.50)
50500	Arteriogram of the spinal column and cord, all vessels	04.00				127.230	9446.30 (8286.20)
50510	Venography of the spinal, paraspinal veins	04.00				58.450	4339.70 (3806.70)
Cervical							
	Code 51100 (stress) is a stand alone study and may not be added to 51110, 51120 (cervical spine), 51160 (myelography) and 51170 (discography). Code 51140 (tomography) may be combined with 51110 or 51120 (spine). Code 51160s (myelography) and 51170 (discography) include fluoroscopy and introduction of contrast (00140 may not be added). Code 51300 (CT) limited - limited to a single cervical vertebral body. Code 51310 (CT) regional study - 2 vertebral bodies and intervertebral disc spaces. Code 51320 (CT) complete study - an extensive study of the cervical spine. Code 51340 (CT myelography) – post myelographic study and includes all disc levels, includes fluoroscopy and introduction of contrast (00140 may not be added).						04.00
51100	X-ray of the cervical spine, stress views only	04.00				4.140	307.40 (269.60)
51110	X-ray of the cervical spine, one or two views	04.00				3.010	223.50 (196.00)
51120	X-ray of the cervical spine, more than two views	04.00				4.280	317.80 (278.70)
51130	X-ray of the cervical spine, more than two views including stress views	04.00				7.580	562.80 (493.70)
51140	X-ray Tomography cervical spine	04.00				4.300	319.30 (280.10)
51160	X-ray myelography of the cervical spine	04.00				27.460	2038.80 (1788.40)
51170	X-ray discography cervical spine per level	04.00				25.170	1868.80 (1639.30)
51300	CT of the cervical spine limited study	04.00				9.500	705.30 (618.70)
51310	CT of the cervical spine – regional study	04.00				13.910	1032.80 (905.90)
51320	CT of the cervical spine – complete study	04.00				37.130	2756.80 (2418.20)
51330	CT of the cervical spine pre and post contrast	04.00				58.850	4369.40 (3832.80)
51340	CT myelography of the cervical spine	04.00				47.190	3503.70 (3073.40)
51350	CT myelography of the cervical spine following myelogram	04.00				21.690	1610.40 (1412.60)
51400	MR of the cervical spine, limited study	04.00				44.400	3296.50 (2891.70)
51410	MR of the cervical spine and cranio-cervical junction	04.00				64.820	4812.60 (4221.60)
51420	MR of the cervical spine and cranio-cervical junction pre and post contrast	04.00				102.140	7583.50 (6652.20)
51900	Nuclear Medicine study – Bone regional cervical	04.00		21.500	1596.30 (1400.30)		
51910	Nuclear Medicine study – Bone tomography regional cervical	04.00		13.410	995.60 (873.40)		
51920	Nuclear Medicine study – with flow	04.00		6.020	447.00 (392.10)		
Thoracic							
	Code 52120 (tomography) may be combined with 52100 or 52110 (spine). Code 52150 (myelography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 52300 (CT) limited study – limited to a single thoracic vertebral body. Code 52305 (CT) regional study - 2 vertebral bodies and intervertebral disc spaces. Code 52310 (CT) complete study - an extensive study of the thoracic spine. Code 52330 (CT myelography) - post myelographic study and includes all disc levels, fluoroscopy and introduction of contrast (00140 may not be added).						04.00
52100	X-ray of the thoracic spine, one or two views	04.00				3.210	238.30 (209.10)
52110	X-ray of the thoracic spine, more than two views	04.00				4.000	297.00 (260.50)
52120	X-ray tomography thoracic spine	04.00				4.300	319.30 (280.10)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
52140	X-ray of the thoracic spine, more that two views including stress views	04.00				6.640	493.00 (432.50)
52150	X-ray myelography of the thoracic spine	04.00				18.620	1382.50 (1212.70)
52300	CT of the thoracic spine limited study	04.00				9.500	705.30 (618.70)
52305	CT of the thoracic spine – regional study	04.00				13.910	1032.80 (905.90)
52310	CT of the thoracic spine complete study	04.00				35.780	2656.50 (2330.30)
52320	CT of the thoracic spine pre and post contrast	04.00				58.850	4369.40 (3832.80)
52330	CT myelography of the thoracic spine	04.00				48.090	3570.50 (3132.00)
52340	CT myelography of the thoracic spine following myelogram	04.00				20.370	1512.40 (1326.70)
52400	MR of the thoracic spine, limited study	04.00				46.600	3459.90 (3035.00)
52410	MR of the thoracic spine	04.00				64.340	4777.00 (4190.30)
52420	MR of the thoracic spine pre and post contrast	04.00				101.420	7530.00 (6605.30)
52900	Nuclear Medicine study – Bone regional dorsal	04.00		21.500	1596.30 (1400.30)		
52910	Nuclear Medicine study – Bone tomography regional dorsal	04.00		13.410	995.60 (873.40)		
52920	Nuclear Medicine study – with flow	04.00		6.020	447.00 (392.10)		
Lumbar							
	Code 53100 (stress) is a stand alone study and may not be added to 53110, 53120 (lumbar spine), 53160 (myelography) and 53170 (discography). Code 53140 (tomography) may be combined with 53110 or 53120 (spine). Codes 53160 (myelography) and 53170 (discography) include fluoroscopy and introduction of contrast (00140 may not be added). Code 53300 (CT) limited study – limited to a single lumbar vertebral body. Code 53310 (CT) regional study - 2 vertebral bodies and intervertebral disc spaces. Code 53320 (CT) complete study - an extensive study of the lumbar spine. Code 53340 (CT myelography) - post myelographic study and includes all disc levels, fluoroscopy and introduction of contrast (00140 may not be added).						04.00
53100	X-ray of the lumbar spine – stress study only	04.00				4.140	307.40 (269.60)
53110	X-ray of the lumbar spine, one or two views	04.00				3.560	264.30 (231.90)
53120	X-ray of the lumbar spine, more than two views	04.00				4.460	331.10 (290.50)
53130	X-ray of the lumbar spine, more that two views including stress views	04.00				7.520	558.30 (489.80)
53140	X-ray tomography lumbar spine	04.00				4.300	319.30 (280.10)
53160	X-ray myelography of the lumbar spine	04.00				23.940	1777.40 (1559.20)
53170	X-ray discography lumbar spine per level	04.00				25.170	1868.80 (1639.30)
53300	CT of the lumbar spine limited study	04.00				9.500	705.30 (618.70)
53310	CT of the lumbar spine – regional study	04.00				13.910	1032.80 (905.90)
53320	Ct of the lumbar spine complete study	04.00				37.640	2794.60 (2451.40)
53330	CT of the lumbar spine pre and post contrast	04.00				58.850	4369.40 (3832.80)
53340	CT myelography of the lumbar spine	04.00				49.110	3646.20 (3198.40)
53350	CT myelography of the lumbar spine following myelogram	04.00				23.460	1741.80 (1527.90)
53400	MR of the lumbar spine, limited study	04.00				46.200	3430.20 (3008.90)
53410	MR of the lumbar spine	04.00				64.320	4775.50 (4189.00)
53420	MR of the lumbar spine pre and post contrast	04.00				103.290	7668.90 (6727.10)

Code	Description	Ver	Add	Nuclear Medicine		Radiology		
				RVU	Fee	RVU	Fee	
53900	Nuclear medicine study – Bone regional lumbar	04.00		21.500	1596.30 (1400.30)			
53910	Nuclear medicine study – Bone tomography regional lumbar	04.00		13.410	995.60 (873.40)			
53920	Nuclear medicine study – with flow	04.00		6.020	447.00 (392.10)			
Sacrum								
	Code 54120 (tomography) may be combined with 54100 (sacrum) or 54110 (SI joints). Code 54300 (CT) limited study - limited to single sacral vertebral body. Code 54310 (CT) complete study - an extensive study of the sacral spine.							04.00
54100	X-ray of the sacrum and coccyx	04.00				3.580	265.80 (233.20)	
54110	X-ray of the sacro-iliac joints	04.00				4.100	304.40 (267.00)	
54120	X-ray tomography – sacrum and/or coccyx	04.00				4.300	319.30 (280.10)	
54300	CT of the sacrum – limited study	04.00				7.600	564.30 (495.00)	
54310	CT of the sacrum – complete study – uncontrasted	04.00				25.610	1901.40 (1667.90)	
54320	CT of the sacrum with contrast	04.00				46.930	3484.40 (3056.50)	
54330	CT of the sacrum pre and post contrast	04.00				52.970	3932.80 (3449.80)	
54400	MR of the sacrum	04.00				65.000	4826.00 (4233.30)	
54410	MR of the sacrum pre and post contrast	04.00				101.040	7501.80 (6580.50)	
Pelvis								
	Codes 55110 (tomography) and 55100 (pelvis) may be combined. Code 55300 (CT) limited study – limited to a small region of interest of the pelvis eg. acetabular roof or pubic ramus.							04.00
55100	X-ray of the pelvis	04.00				3.660	271.70 (238.40)	
55110	X-ray tomography – pelvis	04.00				4.300	319.30 (280.10)	
55300	CT of the bony pelvis limited	04.00				9.500	705.30 (618.70)	
55310	CT of the bony pelvis complete uncontrasted	04.00				25.610	1901.40 (1667.90)	
55320	CT of the bony pelvis complete 3D recon	04.00				37.470	2782.00 (2440.30)	
55330	CT of the bony pelvis with contrast	04.00				46.930	3484.40 (3056.50)	
55340	CT of the bony pelvis – pre and post contrast	04.00				52.970	3932.80 (3449.80)	
55400	MR of the bony pelvis	04.00				65.000	4826.00 (4233.30)	
55410	MR of the bony pelvis pre and post contrast	04.00				102.240	7590.90 (6658.70)	
55900	Nuclear medicine study – Bone regional pelvis	04.00		21.500	1596.30 (1400.30)			
55910	Nuclear medicine study – Bone tomography regional pelvis	04.00		13.410	995.60 (873.40)			
55920	Nuclear medicine study – with flow	04.00		6.020	447.00 (392.10)			
Hips								
	Code 56130 (tomography) may be combined with 56100 or 56110 or 56120 (hip). Code 56140 (stress) may be combined with 56100 or 56110 or 56120 (hip). Code 56150 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 56160 (introduction of contrast into hip joint) to be used with 56310 (CT hip) and 56410 (MR hip) and includes fluoroscopy. The combination of 56150 and 56310 and 56410 is not supported except in exceptional circumstances with motivation. Code 56300 (CT) study limited to small region of interest eg part of femur head.							04.00
56100	X-ray of the left hip	04.00				3.180	236.10 (207.10)	
56110	X-ray of the right hip	04.00				3.180	236.10 (207.10)	
56120	X-ray pelvis and hips	04.00				6.020	447.00 (392.10)	
56130	X-ray tomography – hip	04.00				4.300	319.30 (280.10)	

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
56140	X-ray of the hip/s – stress study	04.00				4.380	325.20 (285.30)
56150	X-ray arthrography of the hip joint including introduction contrast	04.00				15.750	1169.40 (1025.80)
56160	X-ray guidance and introduction of contrast into hip joint only	04.00				7.410	550.20 (482.60)
56200	Ultrasound of the hip joints	04.00				6.500	482.60 (423.30)
56300	CT of hip – limited	04.00				9.500	705.30 (618.70)
56310	CT of hip – complete	05.05				27.370	2032.10 (1782.60)
56320	CT of hip – complete with 3D recon	04.00				39.780	2953.50 (2590.80)
56330	CT of hip with contrast	04.00				43.260	3211.90 (2817.40)
56340	CT of hip pre and post contrast	04.00				47.880	3554.90 (3118.30)
56400	MR of the hip joint/s, limited study	04.00				44.900	3333.60 (2924.30)
56410	MR of the hip joint/s	04.00				64.100	4759.20 (4174.70)
56420	MR of the hip joint/s, pre and post contrast	04.00				101.640	7546.40 (6619.60)
56900	Nuclear medicine study – Bone regional pelvis	04.00		21.500	1596.30 (1400.30)		
56910	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
56920	Nuclear medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Upper limbs							
General							
	Code 60100 (stress only) is a stand alone study and may not be combined with other codes. Code 60110 (tomography) may be combined with any one of the defined regional x-ray studies of the upper limb. Motivation may be required for more than one regional tomographic study per visit. Code 60200 (U/S) may only be used once per visit. Code 60300 (CT) limited study – limited to a small region of interest eg. part of humeral head. Code 60400 (MR limited) may only be used once per visit.						04.00
60100	X-ray upper limbs - any region - stress studies only	04.00				4.520	335.60 (294.40)
60110	X-ray upper limbs - any region – tomography	04.00				4.300	319.30 (280.10)
60200	Ultrasound upper limb – soft tissue - any region	04.00				7.380	547.90 (480.60)
60210	Ultrasound of the peripheral arterial system of the left arm including B mode, pulse and colour doppler	04.00				13.640	1012.70 (888.30)
60220	Ultrasound of the peripheral arterial system of the right arm including B mode, pulse and colour doppler	04.00				13.640	1012.70 (888.30)
60230	Ultrasound peripheral venous system upper limbs including pulse and colour doppler for deep vein thrombosis	04.00				12.540	931.00 (816.70)
60240	Ultrasound peripheral venous system upper limbs including pulse and colour doppler	04.00				17.260	1281.50 (1124.10)
60300	CT of the upper limbs limited study	04.00				9.500	705.30 (618.70)
60310	CT angiography of the upper limb	04.00				78.280	5812.00 (5098.20)
60400	MR of the upper limbs limited study, any region	04.00				44.800	3326.20 (2917.70)
60410	MR angiography of the upper limb	04.00				74.660	5543.20 (4862.50)
60500	Arteriogram of subclavian, upper limb arteries alone, unilateral	04.00				45.670	3390.80 (2974.40)
60510	Arteriogram of subclavian, upper limb arteries alone, bilateral	04.00				82.670	6137.90 (5384.10)
60520	Arteriogram of aortic arch, subclavian, upper limb, unilateral	04.00				56.750	4213.50 (3696.00)
60530	Arteriogram of aortic arch, subclavian, upper limb, bilateral	04.00				88.110	6541.80 (5738.40)
60540	Venography, antegrade of upper limb veins, unilateral	04.00				26.120	1939.30 (1701.10)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
60550	Venography, antegrade of upper limb veins, bilateral	04.00				49.430	3670.00 (3219.30)
60560	Venography, retrograde of upper limb veins, unilateral	04.00				31.010	2302.40 (2019.60)
60570	Venography, retrograde of upper limb veins, bilateral	04.00				54.810	4069.40 (3569.70)
60580	Venography, shuntogram, dialysis access shunt	04.00				23.790	1766.30 (1549.40)
60900	Nuclear medicine study – Venogram upper limb	04.00		37.120	2756.00 (2417.60)		
Shoulder							
	Code 61160 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 61170 (introduction of contrast into the shoulder joint) may be combined with 61300 and 61305 (CT), or 61400 and 61405 (MR). The combination of 61160 (arthrography) and 61300 and 61305 (CT) or 61400 and 61405 (MR) is not supported except in exceptional circumstances with motivation.						04.00
61100	X-ray of the left clavicle	04.00				3.040	225.70 (198.00)
61105	X-ray of the right clavicle	04.00				3.040	225.70 (198.00)
61110	X-ray of the left scapula	04.00				3.040	225.70 (198.00)
61115	X-ray of the right scapula	04.00				3.040	225.70 (198.00)
61120	X-ray of the left acromio-clavicular joint	04.00				3.140	233.10 (204.50)
61125	X-ray of the right acromio-clavicular joint	04.00				3.140	233.10 (204.50)
61128	X-ray of acromio-clavicular joints plus stress studies bilateral	04.00				7.680	570.20 (500.20)
61130	X-ray of the left shoulder	04.00				3.480	258.40 (226.60)
61135	X-ray of the right shoulder	04.00				3.480	258.40 (226.60)
61140	X-ray of the left shoulder plus subacromial impingement views	04.00				5.920	439.50 (385.60)
61145	X-ray of the right shoulder plus subacromial impingement views	04.00				5.920	439.50 (385.60)
61150	X-ray of the left subacromial impingement views only	04.00				3.240	240.60 (211.00)
61155	X-ray of the right subacromial impingement views only	04.00				3.240	240.60 (211.00)
61160	X-ray arthrography shoulder joint including introduction of contrast	04.00				15.830	1175.30 (1031.00)
61170	X-ray guidance and introduction of contrast into shoulder joint only	04.00				7.410	550.20 (482.60)
61200	Ultrasound of the left shoulder joint	04.00				6.500	482.60 (423.30)
61210	Ultrasound of the right shoulder joint	04.00				6.500	482.60 (423.30)
61300	CT of the left shoulder joint – uncontrasted	04.00				24.360	1808.60 (1586.50)
61305	CT of the right shoulder joint – uncontrasted	04.00				24.360	1808.60 (1586.50)
61310	CT of the left shoulder – complete with 3D recon	04.00				37.660	2796.10 (2452.70)
61315	CT of the right shoulder – complete with 3D recon	04.00				37.660	2796.10 (2452.70)
61320	CT of the left shoulder joint - pre and post contrast	04.00				48.630	3610.60 (3167.20)
61325	CT of the right shoulder joint - pre and post contrast	04.00				48.630	3610.60 (3167.20)
61400	MR of the left shoulder	04.00				64.640	4799.30 (4209.90)
61405	MR of the right shoulder	04.00				64.640	4799.30 (4209.90)
61410	MR of the left shoulder pre and post contrast	04.00				101.040	7501.80 (6580.50)
61415	MR of the right shoulder pre and post contrast	04.00				101.040	7501.80 (6580.50)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
Humerus							
62100	X-ray of the left humerus	04.00				2.940	218.30 (191.50)
62105	X-ray of the right humerus	04.00				2.940	218.30 (191.50)
62300	CT of the left upper arm	04.00				24.360	1808.60 (1586.50)
62305	CT of the right upper arm	04.00				24.360	1808.60 (1586.50)
62310	CT of the left upper arm contrasted	04.00				39.970	2967.60 (2603.20)
62315	CT of the right upper arm contrasted	04.00				39.970	2967.60 (2603.20)
62320	CT of the left upper arm pre and post contrast	04.00				48.580	3606.90 (3163.90)
62325	CT of the right upper arm pre and post contrast	04.00				48.580	3606.90 (3163.90)
62400	MR of the left upper arm	04.00				64.200	4766.60 (4181.20)
62405	MR of the right upper arm	04.00				64.200	4766.60 (4181.20)
62410	MR of the left upper arm pre and post contrast	04.00				102.040	7576.10 (6645.70)
62415	MR of the right upper arm pre and post contrast	04.00				102.040	7576.10 (6645.70)
62900	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
62905	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
62910	Nuclear medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Elbow							
	Code 63120 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 63130 (introduction of contrast) may be combined with 63300 and 63305 (CT) or 63400 and 63405 (MR). The combination of 63120 (arthrography) and 63300 and 63305 or 63400 and 63405 (MR) is not supported except in exceptional circumstances with motivation.						04.00
63100	X-ray of the left elbow	04.00				3.140	233.10 (204.50)
63105	X-ray of the right elbow	04.00				3.140	233.10 (204.50)
63110	X-ray of the left elbow with stress	04.00				4.340	322.20 (282.70)
63115	X-ray of the right elbow with stress	04.00				4.340	322.20 (282.70)
63120	X-ray arthrography elbow joint including introduction of contrast	04.00				15.890	1179.80 (1034.90)
63130	X-ray guidance and introduction of contrast into elbow joint only	04.00				7.410	550.20 (482.60)
63200	Ultrasound of the left elbow joint	04.00				6.500	482.60 (423.30)
63205	Ultrasound of the right elbow joint	04.00				6.500	482.60 (423.30)
63300	CT of the left elbow	04.00				24.360	1808.60 (1586.50)
63305	CT of the right elbow	04.00				24.360	1808.60 (1586.50)
63310	CT of the left elbow – complete with 3D recon	04.00				37.660	2796.10 (2452.70)
63315	CT of the right elbow – complete with 3D recon	04.00				37.660	2796.10 (2452.70)
63320	CT of the left elbow contrasted	04.00				39.970	2967.60 (2603.20)
63325	CT of the right elbow contrasted	04.00				39.970	2967.60 (2603.20)
63330	CT of the left elbow pre and post contrast	04.00				48.630	3610.60 (3167.20)
63335	CT of the right elbow pre and post contrast	04.00				48.630	3610.60 (3167.20)
63400	MR of the left elbow	04.00				64.640	4799.30 (4209.90)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
63405	MR of the right elbow	04.00				64.640	4799.30 (4209.90)
63410	MR of the left elbow pre and post contrast	04.00				101.040	7501.80 (6580.50)
63415	MR of the right elbow pre and post contrast	04.00				101.040	7501.80 (6580.50)
63905	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
63910	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
63915	Nuclear medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Forearm							
64100	X-ray of the left forearm	04.00				2.940	218.30 (191.50)
64105	X-ray of the right forearm	04.00				2.940	218.30 (191.50)
64110	X-ray peripheral bone densitometry	04.00				1.960	145.50 (127.70)
64300	CT of the left forearm	04.00				24.360	1808.60 (1586.50)
64305	CT of the right forearm	04.00				24.360	1808.60 (1586.50)
64310	CT of the left forearm contrasted	04.00				39.970	2967.60 (2603.20)
64315	CT of the right forearm contrasted	04.00				39.970	2967.60 (2603.20)
64320	CT of the left forearm pre and post contrast	04.00				48.580	3606.90 (3163.90)
64325	CT of the right forearm pre and post contrast	04.00				48.580	3606.90 (3163.90)
64400	MR of the left forearm	04.00				64.200	4766.60 (4181.20)
64405	MR of the right forearm	04.00				64.200	4766.60 (4181.20)
64410	MR of the left forearm pre and post contrast	04.00				98.040	7279.10 (6385.20)
64415	MR of the right forearm pre and post contrast	04.00				98.040	7279.10 (6385.20)
64900	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
64905	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
64910	Nuclear medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Hand and Wrist							
	Code 65120 (finger) may not be combined with 65100 or 65105 (hands). Codes 65130 and 65135 (wrists) may be combined with 65140 or 65145 (scaphoid) respectively if requested and additional views done. Code 65160 (arthrography) includes fluoroscopy and the introduction of contrast (00140 may not be added). Code 65170 (contrast) may be combined with 65300 and 65305 (CT) or 65400 and 65405 (MR). The combination of 65160 (arthrography) and 65300 and 65305 or 65400 and 65405 is not supported except in exceptional circumstances with motivation.						04.00
65100	X-ray of the left hand	04.00				3.080	228.70 (200.60)
65105	X-ray of the right hand	04.00				3.080	228.70 (200.60)
65110	X-ray of the left hand – bone age	04.00				3.080	228.70 (200.60)
65120	X-ray of a finger	04.00				2.670	198.20 (173.90)
65130	X-ray of the left wrist	04.00				3.180	236.10 (207.10)
65135	X-ray of the right wrist	04.00				3.180	236.10 (207.10)
65140	X-ray of the left scaphoid	04.00				3.300	245.00 (214.90)
65145	X-ray of the right scaphoid	04.00				3.300	245.00 (214.90)
65150	X-ray of the left wrist, scaphoid and stress views	04.00				7.560	561.30 (492.40)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
65155	X-ray of the right wrist, scaphoid and stress views	04.00				7.560	561.30 (492.40)
65160	X-ray arthrography wrist joint including introduction of contrast	04.00				15.930	1182.70 (1037.50)
65170	X-ray guidance and introduction of contrast into wrist joint only	04.00				7.410	550.20 (482.60)
65200	Ultrasound of the left wrist	04.00				6.500	482.60 (423.30)
65210	Ultrasound of the right wrist	04.00				6.500	482.60 (423.30)
65300	CT of the left wrist and hand	04.00				24.360	1808.60 (1586.50)
65305	CT of the right wrist and hand	04.00				24.360	1808.60 (1586.50)
65310	CT of the left wrist and hand - complete with 3D recon	04.00				37.660	2796.10 (2452.70)
65315	CT of the right wrist and hand - complete with 3D recon	04.00				37.660	2796.10 (2452.70)
65320	CT of the left wrist and hand contrasted	04.00				39.970	2967.60 (2603.20)
65325	CT of the right wrist and hand contrasted	04.00				39.970	2967.60 (2603.20)
65330	CT of the left wrist and hand pre and post contrast	04.00				48.630	3610.60 (3167.20)
65335	CT of the right wrist and hand pre and post contrast	04.00				48.630	3610.60 (3167.20)
65400	MR of the left wrist and hand	04.00				64.640	4799.30 (4209.90)
65405	MR of the right wrist and hand	04.00				64.640	4799.30 (4209.90)
65410	MR of the left wrist and hand pre and post contrast	04.00				101.040	7501.80 (6580.50)
65415	MR of the right wrist and hand pre and post contrast	04.00				101.040	7501.80 (6580.50)
65900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
65905	Nuclear Medicine study – bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
65910	Nuclear Medicine study – bone tomography regional	04.00		13.410	995.60 (873.40)		
Soft Tissue							
69900	Nuclear medicine study – Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)		
69905	Nuclear medicine study – Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)		
69910	Nuclear medicine study – Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)		
69915	Nuclear medicine study – Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	3531.10 (3097.50)		
69920	Nuclear medicine study – Infection localisation planar, static	04.00		18.040	1339.40 (1174.90)		
69925	Nuclear medicine study – Infection localisation planar, static, multiple studies	04.00		31.450	2335.00 (2048.30)		
69930	Nuclear medicine study – Infection localisation planar, static and SPECT	04.00		31.450	2335.00 (2048.30)		
69935	Nuclear medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	3330.70 (2921.60)		
69940	Nuclear medicine study – Regional lymph node mapping dynamic	04.00		6.020	447.00 (392.10)		
69945	Nuclear medicine study – Regional lymph node mapping, static, planar	04.00		24.100	1789.30 (1569.60)		
69950	Nuclear medicine study – Regional lymph node mapping, static, planar, multiple	04.00		37.510	2785.00 (2443.00)		
69955	Nuclear medicine study – Regional lymph node mapping SPECT	04.00		13.410	995.60 (873.40)		
69960	Nuclear medicine study – Lymph node localisation with gamma probe	04.00		13.410	995.60 (873.40)		

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
Lower Limbs							
General							
	Code 70100 (stress) is a stand alone study and may not be combined with other codes. Code 70110 (tomography) may be combined with any one of the defined regional x-ray studies of the lower limb. Motivation may be required for more than one regional tomographic study per visit. Code 70200 (U/S) may only be billed once per visit. Code 70300 ((CT) limited study – limited to a small region of interest eg part of condyle of the knee. Codes 70310 and 70320 (CT angiography) may not be combined. Code 70400 (MR limited) may only be used once per visit. Code 70410 and 70420 (MR angiography) may not be combined.						04.00
70100	X-ray lower limbs - any region- stress studies only	04.00				4.520	335.60 (294.40)
70110	X-ray lower limbs - any region-tomography	04.00				4.300	319.30 (280.10)
70120	X-ray of the lower limbs full length study	04.00				6.460	479.60 (420.70)
70200	Ultrasound lower limb – soft tissue - any region	04.00				7.380	547.90 (480.60)
70210	Ultrasound of the peripheral arterial system of the left leg including B mode, pulse and colour Doppler	04.00				13.640	1012.70 (888.30)
70220	Ultrasound of the peripheral arterial system of the right leg including B mode, pulse and colour Doppler	04.00				13.640	1012.70 (888.30)
70230	Ultrasound peripheral venous system lower limbs including pulse and colour doppler for deep vein thrombosis	04.00				13.640	1012.70 (888.30)
70240	Ultrasound peripheral venous system lower limbs including pulse and colour doppler in erect and supine position including all compression and reflux manoeuvres, deep and superficial systems bilaterally	04.00				19.660	1459.70 (1280.40)
70300	CT of the lower limbs limited study	04.00				9.500	705.30 (618.70)
70310	CT angiography of the lower limb	04.00				79.430	5897.40 (5173.10)
70320	CT angiography abdominal aorta and outflow lower limbs	04.00				98.340	7301.40 (6404.70)
70400	MR of the lower limbs limited study	04.00				46.400	3445.00 (3021.90)
70410	MR angiography of the lower limb	04.00				76.660	5691.70 (4992.70)
70420	MR angiography of the abdominal aorta and lower limbs	04.00				118.860	8824.90 (7741.10)
70500	Angiography of pelvic and lower limb arteries unilateral	04.00				40.590	3013.60 (2643.50)
70505	Angiography of pelvic and lower limb arteries bilateral	04.00				75.920	5636.80 (4944.50)
70510	Angiography of abdominal aorta, pelvic and lower limb vessels unilateral	04.00				61.230	4546.10 (3987.80)
70515	Angiography of abdominal aorta, pelvic and lower limb vessels bilateral	04.00				85.660	6359.90 (5578.90)
70520	Angiography translumbar aorta with full peripheral study	04.00				45.680	3391.60 (2975.10)
70530	Venography, antegrade of lower limb veins, unilateral	04.00				25.460	1890.30 (1658.20)
70535	Venography, antegrade of lower limb veins, bilateral	04.00				49.430	3670.00 (3219.30)
70540	Venography, retrograde of lower limb veins, unilateral	04.00				31.170	2314.20 (2030.00)
70545	Venography, retrograde of lower limb veins, bilateral	04.00				56.790	4216.40 (3698.60)
70560	Lymphangiography, lower limb, unilateral	04.00				51.040	3789.50 (3324.10)
70565	Lymphangiography, lower limb, bilateral	04.00				83.970	6234.40 (5468.80)
70900	Nuclear medicine study – Venogram lower limb	04.00		37.120	2756.00 (2417.60)		
Femur							
71100	X-ray of the left femur	04.00				2.940	218.30 (191.50)
71105	X-ray of the right femur	04.00				2.940	218.30 (191.50)
71300	CT of the left femur	04.00				24.520	1820.50 (1596.90)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
71305	CT of the right femur	04.00				24.520	1820.50 (1596.90)
71310	CT of the left upper leg contrasted	04.00				41.830	3105.70 (2724.30)
71315	CT of the right upper leg contrasted	04.00				41.830	3105.70 (2724.30)
71320	CT of the left upper leg pre and post contrast	04.00				49.710	3690.80 (3237.50)
71325	CT of the right upper leg pre and post contrast	04.00				49.710	3690.80 (3237.50)
71400	MR of the left upper leg	04.00				64.800	4811.10 (4220.30)
71405	MR of the right upper leg	04.00				64.800	4811.10 (4220.30)
71410	MR of the left upper leg pre and post contrast	04.00				102.040	7576.10 (6645.70)
71415	MR of the right upper leg pre and post contrast	04.00				102.040	7576.10 (6645.70)
71900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
71905	Nuclear Medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
71910	Nuclear Medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Knee							
	Codes 72140 and 72145 (patella) may not be added to 72100, 72105, 72110, 72115, 72130, 72135 (knee views) Code 72160 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 72170 (introduction of contrast) may be combined with 72300 and 72305 (CT) or 72400 and 72405 (MR). The combination of 72160 (arthrography) and 72300 and 72305 (CT) or 72400 and 72405 (MR) is not supported except in exceptional circumstances with motivation.						04.00
72100	X-ray of the left knee one or two views	04.00				2.770	205.70 (180.40)
72105	X-ray of the right knee one or two views	04.00				2.770	205.70 (180.40)
72110	X-ray of the left knee, more than two views	04.00				3.320	246.50 (216.20)
72115	X-ray of the right knee, more than two views	04.00				3.320	246.50 (216.20)
72120	X-ray of the left knee including patella	04.00				4.620	343.00 (300.90)
72125	X-ray of the right knee including patella	04.00				4.620	343.00 (300.90)
72130	X-ray of the left knee with stress views	04.00				5.820	432.10 (379.00)
72135	X-ray of the right knee with stress views	04.00				5.820	432.10 (379.00)
72140	X-ray of left patella	04.00				2.770	205.70 (180.40)
72145	X-ray of right patella	04.00				2.770	205.70 (180.40)
72150	X-ray both knees standing – single view	04.00				2.800	207.90 (182.40)
72160	X-ray arthrography knee joint including introduction of contrast	04.00				15.810	1173.80 (1029.70)
72170	X-ray guidance and introduction of contrast into knee joint only	04.00				7.410	550.20 (482.60)
72200	Ultrasound of the left knee joint	04.00				6.500	482.60 (423.30)
72205	Ultrasound of the right knee joint	04.00				6.500	482.60 (423.30)
72300	CT of the left knee	04.00				24.520	1820.50 (1596.90)
72305	CT of the right knee	04.00				24.520	1820.50 (1596.90)
72310	CT of the left knee complete study with 3D reconstructions	04.00				35.930	2667.70 (2340.10)
72315	CT of the right knee complete study with 3D reconstructions	04.00				35.930	2667.70 (2340.10)
72320	CT of the left knee contrasted	04.00				41.830	3105.70 (2724.30)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
72325	CT of the right knee contrasted	04.00				41.830	3105.70 (2724.30)
72330	CT of the left knee pre and post contrast	04.00				49.760	3694.50 (3240.80)
72335	CT of the right knee pre and post contrast	04.00				49.760	3694.50 (3240.80)
72400	MR of the left knee	04.00				64.100	4759.20 (4174.70)
72405	MR of the right knee	04.00				64.100	4759.20 (4174.70)
72410	MR of the left knee pre and post contrast	04.00				100.840	7487.00 (6567.50)
72415	MR of the right knee pre and post contrast	04.00				100.840	7487.00 (6567.50)
72900	Nuclear Medicine study – Bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
72905	Nuclear Medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
72910	Nuclear Medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Lower Leg							
73100	X-ray of the left lower leg	04.00				2.940	218.30 (191.50)
73105	X-ray of the right lower leg	04.00				2.940	218.30 (191.50)
73300	CT of the left lower leg	04.00				24.520	1820.50 (1596.90)
73305	CT of the right lower leg	04.00				24.520	1820.50 (1596.90)
73310	CT of the left lower leg contrasted	04.00				41.830	3105.70 (2724.30)
73315	CT of the right lower leg contrasted	04.00				41.830	3105.70 (2724.30)
73320	CT of the left lower leg pre and post contrast	04.00				49.710	3690.80 (3237.50)
73325	CT of the right lower leg pre and post contrast	04.00				49.710	3690.80 (3237.50)
73400	MR of the left lower leg	04.00				64.200	4766.60 (4181.20)
73405	MR of the right lower leg	04.00				64.200	4766.60 (4181.20)
73410	MR of the left lower leg pre and post contrast	04.00				102.040	7576.10 (6645.70)
73415	MR of the right lower leg pre and post contrast	04.00				102.040	7576.10 (6645.70)
73900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
73905	Nuclear Medicine study – bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
73910	Nuclear Medicine study – bone tomography regional	04.00		13.410	995.60 (873.40)		
Ankle and Foot							
	Code 74145 (toe) may not be combined with 74120 or 74125 (foot). Code 71450 (sesamoid bones) may be combined with 74120 or 74125 (foot) if requested. Codes 74120 and 74125 (foot) may only be combined with 74130 and 74135 (calcaneus) if specifically requested. Code 74160 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added). Code 74170 (introduction of contrast) may be combined with 74300 and 74305 (CT) or 74400 and 74405 (MR). The combination of 74160 (arthrography) and 74300 and 74305 (CT) or 74400 and 74405 (MR) are not supported except in exceptional circumstances with motivation.						04.00
74100	X-ray of the left ankle	04.00				3.320	246.50 (216.20)
74105	X-ray of the right ankle	04.00				3.320	246.50 (216.20)
74110	X-ray of the left ankle with stress views	04.00				4.520	335.60 (294.40)
74115	X-ray of the right ankle with stress views	04.00				4.520	335.60 (294.40)
74120	X-ray of the left foot	04.00				2.800	207.90 (182.40)
74125	X-ray of the right foot	04.00				2.800	207.90 (182.40)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
74130	X-ray of the left calcaneus	04.00				2.740	203.40 (178.50)
74135	X-ray of the right calcaneus	04.00				2.740	203.40 (178.50)
74140	X-ray of both feet – standing – single view	04.00				2.800	207.90 (182.40)
74145	X-ray of a toe	04.00				2.670	198.20 (173.90)
74150	X-ray of the sesamoid bones one or both sides	04.00				2.800	207.90 (182.40)
74160	X-ray arthrography ankle joint including introduction of contrast	04.00				15.910	1181.30 (1036.20)
74170	X-ray guidance and introduction of contrast into ankle joint	04.00				7.410	550.20 (482.60)
74210	Ultrasound of the left ankle	04.00				6.500	482.60 (423.30)
74215	Ultrasound of the right ankle	04.00				6.500	482.60 (423.30)
74220	Ultrasound of the left foot	04.00				6.500	482.60 (423.30)
74225	Ultrasound of the right foot	04.00				6.500	482.60 (423.30)
74290	Ultrasound bone densitometry	04.00				2.040	151.50 (132.90)
74300	CT of the left ankle/foot	04.00				24.520	1820.50 (1596.90)
74305	CT of the right ankle/foot	04.00				24.520	1820.50 (1596.90)
74310	CT of the left ankle/foot – complete with 3D recon	04.00				37.810	2807.20 (2462.50)
74315	CT of the right ankle/foot – complete with 3D recon	04.00				37.810	2807.20 (2462.50)
74320	CT of the left ankle/foot contrasted	04.00				41.830	3105.70 (2724.30)
74325	CT of the right ankle/foot contrasted	04.00				41.830	3105.70 (2724.30)
74330	CT of the left ankle/foot pre and post contrast	04.00				49.710	3690.80 (3237.50)
74335	CT of the right ankle/foot pre and post contrast	04.00				49.710	3690.80 (3237.50)
74400	MR of the left ankle	04.00				64.100	4759.20 (4174.70)
74405	MR of the right ankle	04.00				64.100	4759.20 (4174.70)
74410	MR of the left ankle pre and post contrast	04.00				100.640	7472.10 (6554.50)
74415	MR of the right ankle pre and post contrast	04.00				100.640	7472.10 (6554.50)
74420	MR of the left foot	04.00				64.200	4766.60 (4181.20)
74425	MR of the right foot	04.00				64.200	4766.60 (4181.20)
74430	MR of the left foot pre and post contrast	04.00				102.040	7576.10 (6645.70)
74435	MR of the right foot pre and post contrast	04.00				102.040	7576.10 (6645.70)
74900	Nuclear Medicine study – Bone limited/regional static	04.00		21.500	1596.30 (1400.30)		
74905	Nuclear Medicine study – Bone limited static plus flow	04.00		27.530	2044.00 (1793.00)		
74910	Nuclear Medicine study – Bone tomography regional	04.00		13.410	995.60 (873.40)		
Soft Tissue							
79900	Nuclear Medicine study – Tumour localisation planar, static	04.00		20.740	1539.90 (1350.80)		
79905	Nuclear Medicine study – Tumour localisation planar, static, multiple studies	04.00		35.170	2611.20 (2290.60)		
79910	Nuclear Medicine study – Tumour localisation planar, static and SPECT	04.00		34.150	2535.50 (2224.10)		
79915	Nuclear Medicine study – Tumour localisation planar, static, multiple studies & SPECT	04.00		47.560	3531.10 (3097.50)		

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
79920	Nuclear Medicine study – Infection localisation planar, static	04.00		18.430	1368.40 (1200.30)		
79925	Nuclear Medicine study – Infection localisation planar, static, multiple studies	04.00		31.840	2364.00 (2073.70)		
79930	Nuclear Medicine study – Infection localisation planar, static and SPECT	04.00		31.840	2364.00 (2073.70)		
79935	Nuclear Medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00		45.250	3359.60 (2947.00)		
79940	Nuclear Medicine study – Regional lymph node mapping dynamic	04.00		6.020	447.00 (392.10)		
79945	Nuclear Medicine study – Regional lymph node mapping, static, planar	04.00		24.100	1789.30 (1569.60)		
79950	Nuclear Medicine study – Regional lymph node mapping, static, planar, multiple studies	04.00		37.510	2785.00 (2443.00)		
79955	Nuclear Medicine study – Regional lymph node mapping and SPECT	04.00		13.410	995.60 (873.40)		
79960	Nuclear Medicine study – Lymph node localisation with gamma probe	04.00		13.410	995.60 (873.40)		
Intervention							
General							
	Codes 80600, 80605, 80610, 80620, 80630, 81660, 81680, 82600, 84660, 85640, 85645, 86610, 86615, 86620, 86630, (aspiration / biopsy / ablations etc) may be combined with the relevant guidance codes (fluoroscopy, ultrasound, CT, MR) as previously described. The machine codes 00510, 00520, 00530, 00540, 00550, 00560 may not be combined with these codes. If ultrasound guidance (00230) is used for a procedure which also attracts one of the machine codes (00510, 00520, 00530, 00540, 00550, 00560), it may not be billed for separately. Codes 80640, 80645, 87682, 87683 include fluoroscopy. Machine fees may not be added. All other interventional procedures are complete unique procedures describing a whole comprehensive procedure and combinations of different codes will only be supported when motivated.						05.03
80600	Percutaneous abscess, cyst drainage, any region	04.00				9.370	695.70 (610.30)
80605	Fine needle aspiration biopsy, any region	04.00				4.220	313.30 (274.80)
80610	Cutting needle, trochar biopsy, any region	04.00				6.360	472.20 (414.20)
80620	Tumour/cyst ablation chemical	04.00				25.370	1883.60 (1652.30)
80630	Tumour ablation radio frequency, per lesion	05.03				21.210	1574.80 (1381.40)
80640	Insertion of CVP line in radiology suite	04.00				8.990	667.50 (585.50)
80645	Peripheral central venous line insertion	05.03				12.120	899.90 (789.40)
80650	Infiltration of a peripheral joint, any region	05.03				6.400	475.20 (416.80)
	May be combined with relevant guidance (fluoroscopy, ultrasound, CT and MR). May not be combined with machine codes 00510, 00520, 00530, 00540, 00550, 00560 or 86610 (facet joint or SI joint) or arthrogram codes.	05.03					
Neuro intervention							
81600	Intracranial aneurysm occlusion, direct	04.00				214.520	15927.30 (13971.30)
81605	Intracranial arteriovenous shunt occlusion	04.00				254.820	18919.40 (16595.90)
81610	Dural sinus arteriovenous shunt occlusion	04.00				264.330	19625.40 (17215.30)
81615	Extracranial arteriovenous shunt occlusion	04.00				157.280	11677.40 (10243.30)
81620	Extracranial arterial embolisation (head and neck)	04.00				163.120	12111.00 (10623.70)
81625	Carotocavernous fistula occlusion	04.00				192.290	14276.80 (12523.50)
81630	Intracranial angioplasty for stenosis, vasospasm	04.00				126.920	9423.30 (8266.10)
81632	Intracranial stent placement (including PTA)	05.03				133.720	9928.20 (8708.90)
81635	Temporary balloon occlusion test	04.00				83.420	6193.60 (5433.00)
	Code 81635 does not include the relevant preceding diagnostic study and may be combined with codes 10500, 10510, 10530, 10540, 10550.	05.03					
81640	Permanent carotid or vertebral artery occlusion (including occlusion test)	04.00				178.180	13229.20 (11604.50)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
81645	Intracranial aneurysm occlusion with balloon remodelling	04.00				216.350	16063.10 (14090.50)
81650	Intracranial aneurysm occlusion with stent assistance	04.00				230.450	17110.00 (15008.80)
81655	Intracranial thrombolysis, catheter directed	04.00				58.940	4376.10 (3838.60)
	Code 81655 may be combined with any of the other neuro interventional codes 81600 to 81650	05.03					
81660	Nerve block, head and neck, per level	05.03				7.660	568.70 (498.90)
81665	Neurolysis, head and neck, per level	05.03				20.140	1495.30 (1311.70)
81670	Nerve block, head and neck, radio frequency, per level	05.03				19.040	1413.60 (1240.00)
81680	Nerve block, coeliac plexus or other regions, per level	05.03				9.280	689.00 (604.40)
Thorax							
82600	Chest drain insertion	04.00				8.820	654.80 (574.40)
82605	Trachial, bronchial stent insertion	04.00				30.360	2254.10 (1977.30)
Gastrointestinal							
83600	Oesophageal stent insertion	04.00				31.220	2318.00 (2033.30)
83605	GIT balloon dilation	04.00				24.360	1808.60 (1586.50)
83610	GIT stent insertion (non-oesophageal)	04.00				32.020	2377.40 (2085.40)
83615	Percutaneous gastrostomy, jejunostomy	04.00				25.360	1882.90 (1651.60)
Hepatobiliary							
84600	Percutaneous biliary drainage, external	04.00				33.980	2522.90 (2213.10)
84605	Percutaneous external/internal biliary drainage	04.00				37.210	2762.70 (2423.40)
84610	Permanent biliary stent insertion	04.00				51.220	3802.90 (3335.90)
84615	Drainage tube replacement	04.00				20.220	1501.30 (1316.90)
84620	Percutaneous bile duct stone or foreign object removal	04.00				49.980	3710.80 (3255.10)
84625	Percutaneous gall bladder drainage	04.00				29.580	2196.20 (1926.50)
84630	Percutaneous gallstone removal, including drainage	04.00				69.250	5141.50 (4510.10)
84635	Transjugular liver biopsy	04.00				24.930	1851.00 (1623.60)
84640	Transjugular intrahepatic Portosystemic shunt	04.00				119.470	8870.20 (7780.90)
84645	Transhepatic Portogram including venous sampling, pressure studies	04.00				81.890	6080.00 (5333.30)
84650	Transhepatic Portogram with embolisation of varices	04.00				100.810	7484.70 (6565.60)
84655	Percutaneous hepatic tumour ablation	04.00				15.680	1164.20 (1021.20)
84660	Percutaneous hepatic abscess, cyst drainage	04.00				13.200	980.00 (859.70)
84665	Hepatic chemoembolisation	04.00				59.440	4413.20 (3871.20)
84670	Hepatic arterial infusion catheter placement	04.00				60.300	4477.00 (3927.20)
Urogenital							
85600	Percutaneous nephrostomy, external drainage	04.00				29.970	2225.20 (1951.90)
85605	Percutaneous double J stent insertion including access	04.00				40.820	3030.70 (2658.50)
85610	Percutaneous renal stone, foreign body removal including access	04.00				66.790	4958.90 (4349.90)
85615	Percutaneous nephrostomy tract establishment	04.00				29.270	2173.20 (1906.30)

Code	Description	Ver	Add	Nuclear Medicine		Radiology		
				RVU	Fee	RVU	Fee	
85620	Change of nephrostomy tube	04.00				15.900	1180.50 (1035.50)	
85625	Percutaneous cystostomy	04.00				16.520	1226.50 (1075.90)	
85630	Urethral balloon dilatation	04.00				14.240	1057.30 (927.40)	
85635	Urethral stent insertion	04.00				31.220	2318.00 (2033.30)	
85640	Renal cyst ablation	04.00				11.920	885.00 (776.30)	
85645	Renal abscess, cyst drainage	04.00				15.160	1125.60 (987.30)	
85655	Fallopian tube recanalisation	04.00				45.060	3345.50 (2934.70)	
Spinal								
86600	Spinal vascular malformation embolisation	04.00				275.160	20429.50 (17920.60)	
86605	Vertebroplasty per level	04.00				22.300	1655.70 (1452.40)	
86610	Facet joint block per level, uni- or bilateral	05.03				9.540	708.30 (621.30)	
	Code 86610 may only be billed once per level, and not per left and right side per level	04.00						
86615	Spinal nerve block per level, uni- or bilateral	05.03				8.160	605.80 (531.40)	
86620	Epidural block	04.00				9.420	699.40 (613.50)	
86625	Chemonucleolysis, including discogram	04.00				18.320	1360.20 (1193.10)	
86630	Spinal nerve ablation per level	04.00				11.600	861.30 (755.50)	
Vascular								
	Code 87654 (Thrombolysis follow up) may only be used on the days following the initial procedure, 87650 (thrombolysis). If a balloon angioplasty and / or stent placement is performed at more that one defined anatomical site at the same sitting the relevant codes may be combined. However multiple balloon dilatations or stent placements at one defined site will only attract one procedure code.						04.00	
87600	Percutaneous transluminal angioplasty: aorta, IVC	04.00				56.560	4199.40 (3683.60)	
87601	Percutaneous transluminal angioplasty: iliac	04.00				55.760	4140.00 (3631.50)	
87602	Percutaneous transluminal angioplasty: femoropopliteal	04.00				60.160	4466.60 (3918.10)	
87603	Percutaneous transluminal angioplasty: subpopliteal	04.00				73.340	5445.20 (4776.50)	
87604	Percutaneous transluminal angioplasty: brachiocephalic	04.00				67.120	4983.40 (4371.40)	
87605	Percutaneous transluminal angioplasty: subclavian, axillary	04.00				60.160	4466.60 (3918.10)	
87606	Percutaneous transluminal angioplasty: extracranial carotid	04.00				71.620	5317.50 (4664.50)	
87607	Percutaneous transluminal angioplasty: extracranial vertebral	04.00				73.300	5442.20 (4773.90)	
87608	Percutaneous transluminal angioplasty: renal	04.00				87.690	6510.60 (5711.10)	
87609	Percutaneous transluminal angioplasty: coeliac, mesenteric	04.00				87.690	6510.60 (5711.10)	
87620	Aorta stent-graft placement	04.00				120.750	8965.20 (7864.20)	
87621	Stent insertion (including PTA): aorta, IVC	04.00				73.870	5484.60 (4811.00)	
87622	Stent insertion (including PTA): iliac	04.00				76.370	5670.20 (4973.80)	
87623	Stent insertion (including PTA): femoropopliteal	04.00				77.970	5789.00 (5078.00)	
87624	Stent insertion (including PTA): subpopliteal	04.00				84.550	6277.50 (5506.60)	
87625	Stent insertion (including PTA): brachiocephalic	04.00				98.470	7311.00 (6413.20)	
87626	Stent insertion (including PTA): subclavian, axillary	04.00				86.690	6436.40 (5646.00)	

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
87627	Stent insertion (including PTA): extracranial carotid	04.00				106.990	7943.60 (6968.10)
87628	Stent insertion (including PTA): extracranial vertebral	04.00				100.550	7465.40 (6548.60)
87629	Stent insertion (including PTA): renal	04.00				98.590	7319.90 (6421.00)
87630	Stent insertion (including PTA): coeliac, mesenteric	04.00				98.590	7319.90 (6421.00)
87631	Stent-graft placement: iliac	04.00				76.370	5670.20 (4973.80)
87632	Stent-graft placement: femoropopliteal	04.00				77.970	5789.00 (5078.00)
87633	Stent-graft placement: brachiocephalic	04.00				98.470	7311.00 (6413.20)
87634	Stent-graft placement: subclavian, axillary	04.00				82.770	6145.30 (5390.70)
87635	Stent-graft placement: extracranial carotid	04.00				120.430	8941.40 (7843.40)
87636	Stent-graft placement: extracranial vertebral	04.00				114.730	8518.20 (7472.10)
87637	Stent-graft placement: renal	04.00				98.590	7319.90 (6421.00)
87638	Stent-graft placement: coeliac, mesenteric	04.00				98.590	7319.90 (6421.00)
87650	Thrombolysis in angiography suite, per 24 hours	04.00				45.820	3402.00 (2984.20)
	Code 87650 may be combined with any of the relevant non neuro interventional angiography and interventional codes 10520, 20500, 20510, 20520, 20530, 20540,32500,32530,44500, 44503, 44505, 44507, 44510, 44515, 44517, 44520, 60500, 60510, 60520, 60530, 70500, 70505, 70510, 70515, 87600 to 87638.	05.03					
87651	Aspiration, rheolytic thrombectomy	04.00				77.670	5766.70 (5058.50)
87652	Atherectomy, per vessel	04.00				91.890	6822.50 (5984.60)
87653	Percutaneous tunnelled / subcutaneous arterial or venous central or other line insertion	05.03				28.150	2090.00 (1833.40)
87654	Thrombolysis follow-up	04.00				23.570	1750.00 (1535.10)
87655	Percutaneous sclerotherapy, vascular malformation	04.00				21.100	1566.60 (1374.20)
87660	Embolisation, mesenteric	04.00				100.430	7456.50 (6540.80)
87661	Embolisation, renal	04.00				99.360	7377.10 (6471.10)
87662	Embolisation, bronchial, intercostal	04.00				108.340	8043.80 (7056.00)
87663	Embolisation, pulmonary arteriovenous shunt	04.00				103.220	7663.70 (6722.50)
87664	Embolisation, abdominal, other vessels	04.00				101.440	7531.50 (6606.60)
87665	Embolisation, thoracic, other vessels	04.00				97.600	7246.40 (6356.50)
87666	Embolisation, upper limb	04.00				90.920	6750.40 (5921.40)
87667	Embolisation, lower limb	04.00				92.140	6841.00 (6000.90)
87668	Embolisation, pelvis, non-uterine	04.00				117.120	8695.70 (7627.80)
87669	Embolisation, uterus	04.00				113.880	8455.10 (7416.80)
87670	Embolisation, spermatic, ovaria veins	04.00				85.820	6371.80 (5589.30)
87680	Inferior vena cava filter placement	04.00				61.840	4591.40 (4027.50)
87681	Intravascular foreign body removal	04.00				85.030	6313.10 (5537.80)
87682	Revision of access port (tunnelled or implantable)	05.03				14.120	1048.40 (919.60)
87683	Removal of access port (tunnelled or implantable)	05.04				11.120	825.60 (724.20)

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
87690	Superior petrosal venous sampling	04.00				73.010	5420.70 (4755.00)
87691	Pancreatic stimulation test	04.00				89.790	6666.50 (5847.80)
87692	Transportal venous sampling	04.00				76.950	5713.20 (5011.60)
87693	Adrenal venous sampling	04.00				55.010	4084.30 (3582.70)
87694	Parathyroid venous sampling	04.00				86.660	6434.20 (5644.00)
87695	Renal venous sampling	04.00				55.010	4084.30 (3582.70)

ANNEXURE A

<p>Radiology tariff Contrast price effective 1 Jan 2004 PER VIAL For use in conjunction with codes:</p> <p>00190 X-ray examination contrast material 00290 Ultrasound examination contrast material 00390 CT examination contrast material 00490 MR examination contrast material 00590 Angiography and interventional examination contrast material</p> <p>Note to Funders: The following contrast items may be grouped into various categories e.g. Ionic, non-ionic, and several items may be appropriate for use within a category. Funders may either reimburse as per identified item or may choose to apply a reference price within a category. For detail of methodology refer to Annexure B.</p>	04.00
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ANNEXURE B

Radiology tariff Contrast price effective 1 Jan 2004 PER VIAL							04.00
Supplier	Product Name	Product Size	NAPPI	Full Product Description	(Exc VAT)	Inc VAT	
Tyco	Conray 280	10 x 50 ml	715808028	Tyco - Conray 280 - 10 x 50 ml	175.53	200.11	
Tyco	Conray 325	10 x 50 ml	715824015	Tyco - Conray 325 - 10 x 50 ml	184.96	210.85	
Tyco	Optiray 300	10 x 30 ml	807087009	Tyco - Optiray 300 - 10 x 30 ml	143.08	163.11	
Tyco	Optiray 300	10 x 50 ml	804975019	Tyco - Optiray 300 - 10 x 50 ml	211.75	241.40	
Tyco	Optiray 300	10 x 100 ml	807117005	Tyco - Optiray 300 - 10 x 100 ml	395.91	451.33	
Tyco	Optiray 300 prefills	10 x 50 ml	857475002	Tyco - Optiray 300 prefills - 10 x 50 ml	231.91	264.38	
Tyco	Optiray 300 H/Pressure	10 x 100 ml	857483005	Tyco - Optiray 300 H/Pressure - 10 x 100 ml	473.24	539.49	
Tyco	Optiray 300 H/Pressure	10 x 125 ml	857491008	Tyco - Optiray 300 H/Pressure - 10 x 125 ml	573.55	653.84	
Tyco	Optiray 320	10 x 50 ml	807133019	Tyco - Optiray 320 - 10 x 50 ml	213.36	243.23	
Tyco	Optiray 320	10 x 100 ml	807141038	Tyco - Optiray 320 - 10 x 100 ml	385.46	439.42	
Tyco	Optiray 350	10 x 50 ml	815721013	Tyco - Optiray 350 - 10 x 50 ml	225.54	257.11	
Tyco	Optiray 350	10 x 100 ml	804967008	Tyco - Optiray 350 - 10 x 100 ml	478.46	545.45	
Tyco	Optiray 350 prefills	10 x 50 ml	857505009	Tyco - Optiray 350 prefills - 10 x 50 ml	235.48	268.45	
Tyco	Optiray 350 H/Pressure	10 x 125 ml	857513001	Tyco - Optiray 350 H/Pressure - 10 x 125 ml	589.62	672.17	
Pharmaplan	Jopamiron 200	10 x 10 ml	734624018	Pharmaplan - Jopamiron 200 - 10 x 10 ml	83.94	95.69	
Pharmaplan	Jopamiron 300	10 x 10 ml	734675003	Pharmaplan - Jopamiron 300 - 10 x 10 ml	97.10	110.70	
Pharmaplan	Jopamiron 300	10 x 20 ml	810126001	Pharmaplan - Jopamiron 300 - 10 x 20 ml	157.05	179.04	
Pharmaplan	Jopamiron 300	10 x 50 ml	734632002	Pharmaplan - Jopamiron 300 - 10 x 50 ml	209.51	238.84	
Pharmaplan	Jopamiron 300	10 x 100 ml	734659008	Pharmaplan - Jopamiron 300 - 10 x 100 ml	386.06	440.10	
Pharmaplan	Jopamiron 370	10 x 50 ml	734640005	Pharmaplan - Jopamiron 370 - 10 x 50 ml	227.30	259.12	
Pharmaplan	Jopamiron 370	10 x 100 ml	734667019	Pharmaplan - Jopamiron 370 - 10 x 100 ml	411.67	469.30	
Pharmaplan	Imeron 250	10 x 50 ml	886425006	Pharmaplan - Imeron 250 - 10 x 50 ml	190.49	217.15	
Pharmaplan	Imeron 300	10 x 50 ml	886441005	Pharmaplan - Imeron 300 - 10 x 50 ml	215.01	245.12	
Pharmaplan	Imeron 300	10 x 100ml	886448005	Pharmaplan - Imeron 300 - 10 x 100ml	397.83	453.52	
Pharmaplan	Imeron 300	10 x 200ml	886456001	Pharmaplan - Imeron 300 - 10 x 200ml	753.28	858.74	
Pharmaplan	Imeron 350	10 x 50 ml	886464004	Pharmaplan - Imeron 350 - 10 x 50 ml	227.16	258.96	
Pharmaplan	Imeron 350	10 x 100ml	886472007	Pharmaplan - Imeron 350 - 10 x 100ml	414.30	472.31	
Pharmaplan	Imeron 350	10 x 200ml	886479007	Pharmaplan - Imeron 350 - 10 x 200ml	800.36	912.41	
Pharmaplan	Imeron 400	10 x 50 ml	886480003	Pharmaplan - Imeron 400 - 10 x 50 ml	237.75	271.04	
Pharmaplan	Imeron 400	10 x 100ml	886487003	Pharmaplan - Imeron 400 - 10 x 100ml	449.24	512.13	
Pharmaplan	Imeron 400	10 x 200ml	886495006	Pharmaplan - Imeron 400 - 10 x 200ml	853.33	972.79	
Axim	Hexabrix 320	10 x 50 ml	730777006	Axim - Hexabrix 320 - 10 x 50 ml	385.20	439.13	
Axim	Hexabrix 320	10 x 100 ml	730785009	Axim - Hexabrix 320 - 10 x 100 ml	749.00	853.86	
Axim	Hexabrix 320	1 x 200 ml	856940003	Axim - Hexabrix 320 - 1 x 200 ml	1 423.10	1 622.33	
Axim	Dotarem	10 x 10 ml	857033026	Axim - Dotarem - 10 x 10 ml	242.03	275.92	
Axim	Dotarem	10 x 15 ml	857041010	Axim - Dotarem - 10 x 15 ml	364.01	414.98	
Axim	Dotarem	10 x 20 ml	857068016	Axim - Dotarem - 10 x 20 ml	484.07	551.84	
Axim	Xenetix 300	10 x 50 ml	856959014	Axim - Xenetix 300 - 10 x 50 ml	207.15	236.15	
Axim	Xenetix 300	10 x 100 ml	856967017	Axim - Xenetix 300 - 10 x 100 ml	391.71	446.54	
Axim	Xenetix 300	1 x 200 ml	856975001	Axim - Xenetix 300 - 1 x 200 ml	758.93	865.18	
Axim	Xenetix 300	1 x 500 ml	856983004	Axim - Xenetix 300 - 1 x 500 ml	1 865.31	2 126.45	
Axim	Xenetix 350	10 x 50 ml	857017012	Axim - Xenetix 350 - 10 x 50 ml	225.98	257.62	
Axim	Xenetix 350	10 x 100 ml	856991015	Axim - Xenetix 350 - 10 x 100 ml	409.60	466.94	
Axim	Xenetix 350	1 x 200 ml	857009001	Axim - Xenetix 350 - 1 x 200 ml	847.44	966.08	

Code	Description				Ver	Add	Nuclear Medicine		Radiology	
							RVU	Fee	RVU	Fee
Axim	Xenetix 350	1 x 500 ml	857025007	Axim - Xenetix 350 - 1 x 500 ml				2 118.60	2 415.20	
Schering	Ultravist 300	10 x 20 ml	820482005	Schering - Ultravist 300 - 10 x 20 ml				166.92	190.29	
Schering	Ultravist 300	10 x 50 ml	810584018	Schering - Ultravist 300 - 10 x 50 ml				209.04	238.30	
Schering	Ultravist 300	10 x 75 ml	818151013	Schering - Ultravist 300 - 10 x 75 ml				291.90	332.76	
Schering	Ultravist 300	10 x 100 ml	810592029	Schering - Ultravist 300 - 10 x 100 ml				386.06	440.10	
Schering	Ultravist 370	10 x 50 ml	810606038	Schering - Ultravist 370 - 10 x 50 ml				225.98	257.62	
Schering	Ultravist 370	10 x 100 ml	810614049	Schering - Ultravist 370 - 10 x 100 ml				407.24	464.26	
Schering	Ultravist 370	10 x 200 ml	894656007	Schering - Ultravist 370 - 10 x 200 ml				733.04	835.66	
Schering	Isovist 240	10 x 10 ml	854131019	Schering - Isovist 240 - 10 x 10 ml				104.00	118.56	
Schering	Magnevist PF 10 ml	5 x 10 ml	839159005	Schering - Magnevist PF 10 ml - 5 x 10 ml				227.91	259.82	
Schering	Magnevist PF 15 ml	5 x 15 ml	839167008	Schering - Magnevist PF 15 ml - 5 x 15 ml				340.26	387.90	
Schering	Magnevist PF, 20 ml	5 x 20 ml	839175019	Schering - Magnevist PF, 20 ml - 5 x 20 ml				449.40	512.32	
Schering	Magnevist 20 ml	10 x 20 ml	839140002	Schering - Magnevist 20 ml - 10 x 20 ml				390.02	444.62	
Schering	Gadovist 7.5ml	1 7.5ml	700229001	Schering - Gadovist 7.5ml - 1 7.5ml				436.56	497.68	
Schering	Urografin 30%	1 x 250 ml	774170018	Schering - Urografin 30% - 1 x 250 ml				333.84	380.58	
Schering	Urografin 60%	10 x 20 ml	774154004	Schering - Urografin 60% - 10 x 20 ml				66.88	76.24	
Schering	Urografin 60%	10 x 100 ml	774189002	Schering - Urografin 60% - 10 x 100 ml				282.48	322.03	
Schering	Urografin 76%	10 x 20 ml	774162007	Schering - Urografin 76% - 10 x 20 ml				87.10	99.29	
Schering	Gastrografin	1 x 100 ml	728314002	Schering - Gastrografin - 1 x 100 ml				296.39	337.88	
Amersham	Omnipaque 240 mg	15ml	862630002	Amersham - Omnipaque 240 mg - 15ml				128.40	146.38	
Amersham	Omnipaque 300 mg	20 ml	807001007	Amersham - Omnipaque 300 mg - 20 ml				156.49	178.40	
Amersham	Omnipaque 300 mg	50 ml	807028002	Amersham - Omnipaque 300 mg - 50 ml				207.15	236.15	
Amersham	Omnipaque 300 mg	100 ml	804568006	Amersham - Omnipaque 300 mg - 100 ml				376.64	429.37	
Amersham	Omnipaque 300mg Plastic	200ml	700701001	Amersham - Omnipaque 300mg Plastic - 200ml				828.61	944.61	
Amersham	Omnipaque 300mg Plastic	500ml	700702001	Amersham - Omnipaque 300mg Plastic - 500ml				2 047.98	2 334.70	
Amersham	Omnipaque 350 mg	50 ml	807036005	Amersham - Omnipaque 350 mg - 50 ml				216.57	246.89	
Amersham	Omnipaque 350 mg	100 ml	807044008	Amersham - Omnipaque 350 mg - 100 ml				395.47	450.84	
Amersham	Omnipaque 350mg Plastic	200ml	700704001	Amersham - Omnipaque 350mg Plastic - 200ml				880.40	1 003.65	
Amersham	Omnipaque 350mg Plastic	500ml	700705001	Amersham - Omnipaque 350mg Plastic - 500ml				2 189.22	2 495.71	
Amersham	Omniscan	10 ml	701301006	Amersham - Omniscan - 10 ml				192.60	219.56	
Amersham	Omniscan	20 ml	701302003	Amersham - Omniscan - 20 ml				385.20	439.13	
Amersham	Omniscan Prefilled 10ml	10 ml	701298003	Amersham - Omniscan Prefilled 10ml - 10 ml				269.64	307.39	
Amersham	Omniscan Prefilled 15ml	15 ml	701305003	Amersham - Omniscan Prefilled 15ml - 15 ml				404.46	461.08	
Amersham	Omniscan Prefilled 20ml	20 ml	701300019	Amersham - Omniscan Prefilled 20ml - 20 ml				539.28	614.78	
Amersham	Visipaque 320 mg	20 ml	862649005	Amersham - Visipaque 320 mg - 20 ml				108.28	123.44	
Amersham	Visipaque 320 mg	50 ml	847534006	Amersham - Visipaque 320 mg - 50 ml				235.40	268.36	
Amersham	Visipaque 320 mg	100 ml	847542009	Amersham - Visipaque 320 mg - 100 ml				433.14	493.78	
Amersham	Visipaque 320 mg	200 ml	862657008	Amersham - Visipaque 320 mg - 200 ml				838.02	955.35	
Pharmaplan	MultiHance 10ml	10 ml	702975011	Pharmaplan - MultiHance 10ml				474.50	540.93	
Pharmaplan	MultiHance 15ml	15 ml	702976011	Pharmaplan - MultiHance 15ml				709.93	809.32	
Pharmaplan	MultiHance 20ml	20 ml	702979011	Pharmaplan - MultiHance 20ml				945.35	1 077.70	

Contrast Index Price Range - 2004 contrast prices

Product Type	Iodine Concentration	Vial Size ml	Avg	Range	NAPPI CODES OF PRODUCTS IN THE CATEGORY					
Ionic										
	280 - 325 mg	50	205.48	200.11 - 210.85	715808028	715824015				
	30%	250	380.58		774170018					
	60%	20	76.24		774154004					
	60%	100	322.03		774189002					
	70%	20	99.29		774162007					
	Gastrografin	100	337.88		728314002					
Ionic Low Osmolality										
	320mg	50	439.13		730777006					
	320mg	100	853.86		730785009					
	320mg	200	1622.33		856940003					
Non Ionic										
	250mg	50	217.15		886425006					
	300mg	75	332.76		818151013					
	300 - 320mg	20	182.57	178.4 - 190.29	810126001	820482005	807001007			
	300 - 320mg	30	163.11		807087009					

04.00

Code	Description								Ver	Add	Nuclear Medicine		Radiology	
											RVU	Fee	RVU	Fee
	300 - 320mg	50	242.95	236.15 - 264.38	804975019	807133019	734632002	886441005	856959014	810584018	807028002	857475002		
	300 - 320mg	100	442.91	429.37 - 453.52	807117005	807141038	734659008	886448005	856967017	810592029	804568006			
	300 - 320mg	200	889.51	858.74 - 944.61	886456001	856975001	700701001							
	300 - 320mg	500	2230.58	2126.45 - 2334.7	856983004	700702001								
	350 - 370mg	50	257.97	246.89 - 268.45	815721013	857505009	734640005	886464004	857017012	810606038	807036005			
	350 - 370mg	100	478.18	450.84 - 545.45	804967008	734667019	886472007	856991015	810614004	807044008				
	350 - 370mg	200	929.45	835.66 - 1003.65	886479007	857009001	894656007	700704001						
	350 - 370mg	500	2455.46	2415.2 - 2495.71	857025007	700705001								
	400mg	50	271.04		886480003									
	400mg	100	512.13		886487003									
	400mg	200	972.79		886495006									
	Non Ionic High Pressure syringes													
	300mg	100	539.49		857483005									
	300mg	125	653.84		857491008									
	350mg	125	672.17		857513001									
	Non Ionic Iso osmolality													
	320mg	20	123.44		862649005									
	320mg	50	268.36		847534006									
	320mg	100	493.78		847542009									
	320mg	200	123.44		862657008									
	Myelography													
	200 - 240mg	10	107.13	95.69 - 118.56	734624018	854131019								
	200 - 240mg	15	146.38		862630002									
	300mg	10	110.70		734675003									
	300mg	20	178.72	178.4 - 179.04	810126001	807001007								
	Gadolinium (MRI)													
	standard	10	265.67	219.56 - 307.39	857033026	839159005	701301006	701298003						
	standard	15	421.32	387.9 - 461.08	857041010	839167008	701305003							
	standard	20	512.54	439.13 - 614.78	857068016	839175019	839140002	701302003	701300019					
	high	7.5	497.68		700229001									

ANNEXURE C

Recommended Isotope and Kit Prices for Nuclear Medicine for 2004 by the Association of Nuclear Medicine Physicians
For use in conjunction with codes:

00990 Nuclear Medicine Isotope
00991 Nuclear Medicine Substrate

04.00

Supplier	Product Name	Nappi code	Product size	PRICE (excl. VAT)	PRICE (incl. VAT)
			(Patient dosage)		
Amersham	Tc-99m GENERATOR(10gBq)	888478/004	0-30mCi	319.00	363.66
Amersham	CHROMIUM-51	889025/002	1mCi	1787.50	2037.75
Amersham	CHROMIUM-51	889033/005	1mCi	1787.50	2037.75
Amersham	CHROMIUM-51	889041/001	5mCi	2161.50	2464.11
Amersham	GALLIUM-67	889064/007	5mCi	2585.00	2946.90
Amersham	GALLIUM-67	889056/004	10mCi	3080.00	3511.20

Code	Description			Ver	Add	Nuclear Medicine		Radiology	
						RVU	Fee	RVU	Fee
Amersham	INDIUM-111	889080/006	2mCi			4636.50		5285.61	
Amersham	INDIUM-111	889087/006	1mCi			2002.00		2282.28	
Amersham	IODINE-131	886665/002	1110kBq			69.85		79.63	
Amersham	IODINE-131	886673/005	1850kBq			88.00		100.32	
Amersham	IODINE-131	886681/001	7400kBq			119.90		136.69	
Amersham	IODINE-131	886688/001	18500kBq			123.20		140.45	
Amersham	IODINE-131	886696/004	1 x 9250kBq			On Request			
Amersham	IODINE-131 BENZYLGUANIDIN	886707/004	18.5Bq37MBq			On Request			
Amersham	IODINE-131 BENZYLGUANIDIN	886715/007	37MBq			2354.00		2683.56	
Amersham	IODINE-131 BENZYLGUANIDIN	886723/003	185MBq			2354.00		2683.56	
Amersham	IODINE-131 BENZYLGUANIDIN	886731/006	3700MBq			On Request			
Amersham	IODINE-131 BENZYLGUANIDIN	886738//006	5550MBq			On Request			
Amersham	IODINE-131 BENZYLGUANIDIN	886746/002	7400MBq1850MBq			9460.00		10784.40	
Amersham	IODINE-131 BENZYLGUANIDIN	886754/005	1850MBq			On Request			
Amersham	IODINE-131	886700/004	37MBq			2904.00		3310.56	
Amersham	SODIUM IODIDE	888633/004	37MBq			605.00		689.70	
Amersham	SODIUM IODIDE	888641/007	74MBq			610.50		695.97	
Amersham	SODIUM IODIDE	888648/007	110MBq			621.50		708.51	
Amersham	SODIUM IODIDE	888656/003	111MBq			621.50		708.51	
Amersham	SODIUM IODIDE	888664/006	129.5MBq			621.50		708.51	
Amersham	SODIUM IODIDE	888672/002	150MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888679/002	185MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888680/005	200MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888687/005	222MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888695/001	225MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888706/001	250MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888714/004	259MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888722/007	260MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888729/007	275MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888730/003	277.5MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888737/003	296MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888745/006	300MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888753/002	330MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888761/005	350MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888768/005	370MBq			704.00		802.56	
Amersham	SODIUM IODIDE	888776/001	400MBq			726.00		827.64	
Amersham	SODIUM IODIDE	888784/004	410MBq			726.00		827.64	
Amersham	SODIUM IODIDE	888792/007	445MBq			737.00		840.18	
Amersham	SODIUM IODIDE	888799/007	450MBq			748.00		852.72	
Amersham	SODIUM IODIDE	888803/007	480MBq			770.00		877.80	
Amersham	SODIUM IODIDE	888811/003	500MBq			786.50		896.61	
Amersham	SODIUM IODIDE	888818/003	520MBq			825.00		940.50	
Amersham	SODIUM IODIDE	888834/002	555MBq			836.00		953.04	
Amersham	SODIUM IODIDE	888842/005	590MBq			858.00		978.12	
Amersham	SODIUM IODIDE	888849/005	630MBq			913.00		1040.82	
Amersham	SODIUM IODIDE	888850/001	665MBq			935.00		1065.90	
Amersham	SODIUM IODIDE	888857/001	700MBq			1001.00		1141.14	
Amersham	SODIUM IODIDE	888865/004	740MBq			1023.00		1166.22	
Amersham	SODIUM IODIDE	888873/007	925MBq			1155.00		1316.70	
Amersham	SODIUM IODIDE	888881/003	1110MBq			1210.00		1379.40	
Amersham	SODIUM IODIDE	888888/003	1480MBq			1265.00		1442.10	
Amersham	SODIUM IODIDE	888896/006	1850MBq			1303.50		1485.99	
Amersham	SODIUM IODIDE	888900/006	2220MBq			1391.50		1586.31	
Amersham	SODIUM IODIDE	888907/006	2405MBq			1430.00		1630.20	
Amersham	SODIUM IODIDE	888915/002	2590MBq			1468.50		1674.09	
Amersham	SODIUM IODIDE	888923/005	2960MBq			1837.00		2094.18	
Amersham	SODIUM IODIDE	888931/001	3000MBq			1870.00		2131.80	
Amersham	SODIUM IODIDE	888938/001	3700MBq			2040.50		2326.17	
Amersham	SODIUM IODIDE	888946/004	4440MBq			2062.50		2351.25	
Amersham	SODIUM IODIDE	888954/007	4625MBq			2299.00		2620.86	
Amersham	SODIUM IODIDE	888962/003	5550MBq			2414.50		2752.53	
Amersham	SODIUM IODIDE	888969/003	5920MBq			2695.00		3072.30	
Amersham	SODIUM IODIDE	888970/006	6000MBq			2783.00		3172.00	
Amersham	SODIUM IODIDE	888977/006	7400MBq			2838.00		3235.32	
Amersham	SODIUM IODIDE	888985/002	9250MBq			3036.00		3461.04	
Amersham	SODIUM IODIDE	888993/005	11100MBq			3503.50		3993.99	
Amersham	IRON-59	889095/002	250uCi (9.25MBq)			1716.00		1956.24	
Amersham	PHOSPHOROUS-32	889130/004	5mCi			2552.00		2909.28	
Amersham	PHOSPHOROUS-32	889129/001	10mCi			2882.00		3285.48	
Amersham	STRONTIUM-89	889137/004	4mCi (4mm)			16170.00		18433.80	
Amersham	HEPATATE	889079/003	1vial			143.00		163.02	
Amersham	NANOCOLL	889114/005	1vial			418.00		476.52	
Amersham	PYROPHOPHATE	888617/005	1vial			108.90		124.15	
Amersham	TIN COLLOID	889002/003	1vial			108.90		124.15	

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
Amersham	DTPA COMPLEX	886657/006	1vial		108.90		124.15
Amersham	RBC	888625/002	1vial		108.90		124.15
Amersham	DISIDA	886650/006	1vial		108.90		124.15
Amersham	MDP	887100/005	1vial		108.90		124.15
Amersham	PULMOTEK	888610/005	1vial		113.30		129.16
Amersham	CERETEC(brain)	889010/006	1vial		1630.75		1859.06
Amersham	MYOVIEW	702508/001	1vial		1760.00		2006.40
Amersham	THALLIUM	889145/007	2mCi		962.50		1097.25
Amersham	THALLIUM	889153/003	3mCi		1485.00		1692.90
Amersham	THALLIUM	889161/006	5mCi		2530.00		2884.20
Amersham	XENON-133	889176/002	50mCi		3091.00		3523.74
Amersham	XENON-133	889168/006	100mCi		3311.00		3774.54
Amersham	YTTRIUM-90	889184/005	10mCi		2706.00		3084.84
Amersham	YTTRIUM-90	889192/001	25mCi		3520.00		4012.80
Amersham	DMSA (KIDNEY AGENT)	894028/006	1vial		143.00		163.02
Amersham	RADID STRAND	412227/001	1STRAND (10 SEED:)		4141.50		4721.31
Amersham	ONCOSEED	412233/001	EACH		374.00		426.36
Amersham	ONCOSEED	412234/001	EACH		770.00		877.80
Amersham	ONCOSEED	412235/001	EACH		374.00		426.36
SYNCOR	CARDIOLITE	702904/003	1vial		1570.00		1789.80
NECSA	I-123 MIBG	703072/006	1 capsule		1310.43		1493.89
Amersham	MAG3	827649/882	1-10mCi		789.00		899.46

ANNEXURE D. PET GUIDELINES

A. INDICATIONS

	For the purposes of this guideline, only established indications for PET-CT are included and this relates to the more common types of malignancies as seen in practice. While some of the less common forms of cancer may also yield advantages with PET-CT imaging, there is as yet insufficient published data to support the general use and these have been excluded in the list below. This situation may change as new research and information becomes available.	09.00
	<p>1. Non-small cell lung carcinoma (NSCC)</p> <p>a) Primary diagnosis of lesions</p> <p>i. >10mm diameter lesions where conventional imaging and biopsy have been inconclusive.</p> <p>b) Staging especially where curative surgery is planned</p> <p>i. Evaluation of primary tumour (T-stage).</p> <p>ii. Suspected nodal disease or characterization of nodal disease</p> <p>iii. Suspected distal metastases of determining extent of metastases.</p> <p>iv. Solitary distal metastasis where metastatectomy is considered. PET-CT is used to exclude additional lesions which would preclude surgery.</p> <p>c) Investigation of suspected recurrence (restaging)</p> <p>i. Local or regional recurrence</p> <p>ii. Nodal or distal recurrence</p> <p>iii. Determine the extent of proven recurrent disease</p> <p>iv. Differentiate fibrotic mass from active disease</p> <p>d) All patients with proven carcinoma of the lung, who are considered for curative resection, should be imaged with PETCT prior to surgery.</p> <p>e) Current available literature confirms that PET-CT is more accurate than CT or PET alone for staging and restaging of NSCC.</p>	09.00
	<p>2. Hodgkin's and Non-Hodgkin's Lymphoma</p> <p>a) Single most accurate imaging modality for Hodgkins and Non-Hodgkins lymphoma.</p> <p>b) Staging</p> <p>i. All patients prior to commencing treatment as baseline, following diagnosis.</p> <p>ii. Indicated at completion of therapy to confirm complete response.</p> <p>c) Monitoring of response to treatment</p> <p>i. Numerous studies have confirmed that mid-treatment PET scans predict clinical outcome.</p> <p>ii. Prognostic value and role in modification of therapeutic regime.</p> <p>d) Investigation of residual or recurrent disease (restaging)</p> <p>i. Where conventional imaging is equivocal for residual disease.</p> <p>ii. Suspected nodal recurrence.</p> <p>iii. Differentiating recurrent and residual disease from post-therapeutic fibrosis and scarring.</p>	09.00
	<p>3. Thyroid carcinoma</p> <p>a) Not indicated for primary diagnosis.</p> <p>b) Staging</p> <p>i. Primary examination of choice is I-123 whole body scintigraphy.</p> <p>ii. Only indicated for differentiated and medullary carcinoma of the thyroid in patients with negative I-123, but with a high index of suspicion for nodal or distal metastases on cross sectional imaging or where whole body I-123 scan is equivocal.</p> <p>c) Investigation of residual or recurrent disease (restaging)</p> <p>i. Elevated thyroglobulin despite negative whole body scintigraphy for differentiated thyroid carcinoma.</p> <p>ii. Elevated calcitonin levels and equivocal imaging findings for medullary thyroid carcinoma.</p> <p>iii. Solitary distal metastasis where metastatectomy is considered. PET-CT is used to exclude additional lesions which would preclude surgery.</p>	09.00

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
	<p>4. Head and neck carcinoma</p> <p>a) Primary diagnosis</p> <p>i. There is little, if any, role for PET-CT in primary diagnosis of mucosal lesions.</p> <p>ii. Limited to identifying primary tumour in histologically proven metastatic squamous cell carcinoma in cervical nodes.</p> <p>b) Staging of the primary tumour prior to therapy</p> <p>i. Local nodes which are equivocal on CI (conventional imaging).</p> <p>ii. Suspected distal adenopathy</p> <p>iii. Suspected distal metastases</p> <p>iv. All patients where uni- or bilateral surgery is planned (may alter management and approach by up to 50% and is significantly more accurate than CT alone).</p> <p>v. Excellent sensitivity (95%) for local and distal nodal disease (specificity in local disease may be affected by physiological uptake).</p> <p>c) Investigation of residual or recurrent disease (restaging)</p> <p>i. Differentiating fibrosis and recurrence where routine imaging is equivocal and may reduce the number of equivocal findings by up to 50%.</p> <p>ii. Following neo-adjuvant therapy for re-staging.</p> <p>iii. Suspected local or distal recurrence.</p> <p>iv. Differentiating post-therapeutic changes from residual or recurrent tumours poses significant problems for CT and MRI. PET-CT is significantly more accurate than routine cross sectional imaging in this regard.</p>						09.00
	<p>5. Breast cancer</p> <p>a) There is no role for PET-CT in the primary diagnosis, sentinel node mapping or imaging of locally contained node negative tumours.</p> <p>b) No role for carcinoma-in-situ.</p> <p>c) PET-CT imaging is limited to patients with infiltrating ductal carcinoma.</p> <p>d) Staging</p> <p>i. Only indicated if there is a significant chance of distal disease as determined by axillary dissection or where conventional imaging is equivocal.</p> <p>ii. Can result in up to 57% change of stage and management compared to other CI (conventional imaging).</p> <p>iii. High accuracy (86% vs. 77% for CT alone) for nodal and distal metastases in patient with infiltrating ductal carcinoma.</p> <p>e) Investigation of recurrent disease (restaging)</p> <p>i. Suspected local or regional recurrence.</p> <p>ii. Suspected nodal or distal metastatic recurrence.</p> <p>iii. Differentiate post therapeutic fibrosis from recurrent or residual tumour.</p> <p>iv. Significantly more accurate for nodal and distal recurrence than conventional imaging.</p>						09.00
	<p>6. Colorectal cancer</p> <p>a) No role in the diagnosis of the primary tumour.</p> <p>b) Accurate for staging (89%) and restaging (88%)</p> <p>c) Staging</p> <p>i. Suspected distal nodal metastases where conventional imaging is equivocal, particularly distal nodes.</p> <p>ii. Suspected distal metastases.</p> <p>iii. Evaluation of suspected single metastases considered for curative surgical resection to exclude concomitant disease.</p> <p>iv. May result in changes in treatment in up to 27% of patients.</p> <p>d) Investigation of residual or recurrent disease (restaging)</p> <p>i. Suspected local pelvic or distal recurrence.</p> <p>ii. Differentiate local and distal post therapeutic changes from residual and recurrent disease.</p> <p>iii. Evaluate and restage following neo-adjuvant therapy.</p> <p>iv. Evaluate patients with rising tumour markers and normal or equivocal conventional imaging.</p>						09.00
	<p>7. Stomach carcinoma - GIST</p> <p>a) In GIST tumours FDG tracer uptake is established.</p> <p>i. Indicated to determine response to treatment as determined by tumour activity on PET-CT measuring tracer uptake (SUV).</p> <p>ii. Paradigm shift in assessing tumour responses to treatment.</p> <p>iii. Response to Imatinib (Gleevec) can be predicted with 18FFDG as early as 24h after commencing treatment and long before any change in tumour size is demonstrated on conventional imaging.</p> <p>iv. Baseline study before commencing treatment is essential to determine degree of tracer uptake for post-treatment comparison.</p> <p>b) Variable uptake of tracer in other stomach tumours, which is difficult to explain and to predict. Routine imaging is not supported in other types of stomach tumours, at this stage.</p>						09.00
	<p>8. Testicular Carcinoma</p> <p>a) Complex histology and variable uptake of different histological sub-groups.</p> <p>b) Limited to seminoma and teratoma in the following cases:</p> <p>i. Evaluate residual mass to differentiate residual/recurrent tumour from fibrosis.</p> <p>ii. Suspected recurrence but normal or equivocal conventional imaging findings.</p>						09.00
	<p>9. Oesophageal carcinoma</p> <p>a) Not indicated for primary diagnosis.</p> <p>b) Staging for nodal and distal metastases (90% accurate)</p> <p>i. Indicated for N-staging, particularly where there is suspected distal nodal disease or where conventional imaging is equivocal.</p> <p>ii. Indicated for M- staging where distal metastases are suspected.</p> <p>iii. Strongly indicated for patient undergoing curative surgery to exclude distal disease.</p> <p>c) Investigation of residual or recurrent disease (restaging)</p> <p>i. Restaging for patients who have undergone neo-adjuvant chemotherapy.</p> <p>ii. Suspected local or distal recurrent disease.</p> <p>iii. Differentiate post therapeutic fibrosis from recurrent or residual disease.</p>						09.00

Code	Description	Ver	Add	Nuclear Medicine		Radiology	
				RVU	Fee	RVU	Fee
	<p>10. Melanoma</p> <p>a) No role in primary diagnosis which is primarily a surgical/histological diagnosis.</p> <p>b) Staging is determined by depth of penetration of the primary tumour and presence of sentinel node at surgery.</p> <p>i. Indicated for Stage 3 and 4 disease where there is a high incidence of distal nodal and metastatic disease.</p> <p>ii. Solitary distal metastasis on conventional imaging where metastatectomy is considered. PET-CT is used to exclude additional lesions which would preclude surgery.</p> <p>iii. Overall N and M staging is significantly more accurate than conventional imaging (97% vs 80%).</p> <p>c) Investigation of recurrent disease (restaging)</p> <p>i. Modality of choice for recurrent nodal and distal metastatic disease.</p> <p>ii. Differentiate post therapeutic fibrosis from recurrent or residual disease.</p> <p>d) PET-CT may alter management in up to 34% of patients with Stage III and IV disease.</p>						09.00
	<p>11. Ovarian carcinoma</p> <p>a) Most cases present as advanced disease.</p> <p>b) Recurrence is frequent and the overall 5-y survival for advanced disease is only 17%.</p> <p>c) Diagnosis and initial staging require a laparotomy as small peritoneal deposits may be difficult to demonstrate on imaging</p> <p>i. PET-CT is indicated where surgical or conventional imaging findings are equivocal for primary staging.</p> <p>ii. PET-CT is accurate for demonstrating nodal and distal disease.</p> <p>iii. Sensitivity is limited by size of peritoneal deposits. It is more accurate for macroscopic disease.</p> <p>d) Investigation of recurrent disease (restaging)</p> <p>i. Superior to CT and MRI for recurrence (92% sens. and 75% spec.).</p> <p>ii. Alternative to a second look laparotomy (presents significant cost saving potential).</p> <p>iii. Definite role for patients with rising tumour marker where conventional imaging is negative for recurrence.</p>						09.00
	<p>12. Carcinoma of unknown primary</p> <p>a) By definition, unknown primary tumors are those that remain undetected after all diagnostic resources have been used.</p> <p>b) PET-CT may detect up to 57% primary tumours when conventional cross sectional imaging has been negative.</p> <p>c) PET-CT is indicated where conventional imaging has failed to identify a primary malignancy.</p>						09.00
B.	LIMITED VALUE AND RELATIVE CONTRAINDICATIONS						
	<p>These conditions are those where there is variable or poor uptake of the tracer FDG or where imaging is routinely performed with tracers other than FDG which are not locally available. This may result in false negative findings using FDG and the routine use of PET-CT should be discouraged.</p>						09.00
	<p>1. Urological Malignancy</p> <p>a) No role in diagnosis and staging of renal cell carcinoma</p> <p>b) Prostate limited to suspected recurrence in histologically proven high grade tumours. Prostate is ideally imaged with Choline as tracer.</p> <p>c) No role for diagnosis and staging of bladder carcinoma</p> <p>2. Broncho-alveolar cell carcinoma</p> <p>3. Small cell carcinoma of the lung</p> <p>4. Hepatocellular carcinoma</p> <p>5. Sarcomas</p> <p>6. Neuro-endocrine tumours</p> <p>7. Anaplastic thyroid carcinoma which is Grade 4 by definition, at diagnosis.</p> <p>8. Suspected brain tumours where MRI is more sensitive and specific.</p> <p>9. Tumours with large mucinous components.</p> <p>10. Lobular carcinoma of the breast</p>						09.00
	<p>In addition to these tumours, imaging should be used with caution in patients who are diabetic or who have recently used high doses of cortico-steroids.</p>						09.00