

GUILFORD RADIOLOGY ORDERING GUIDE FOR MRI PROCEDURES



Guilford Radiology
1591 Boston Post Road
Guilford, CT 06437

GUILFORD RADIOLOGY

MRI

TECHNOLOGIST: Della Strickland (203) 453-5123 ext.
dellas@ramradiology.com

RADIOLOGISTS: Nancy Rini, M.D. Director
Craig Walden, M.D.
Stephen Zivin, M.D.
Michael Crain, M.D.
Diana Hull, M.D.
Todd Everett, M.D.

Erik Pingoud, M.D.
Eric Mannes, M.D.
Stacy Spooner, M.D.
Robert Wolek, M.D.
Ravi Jain, M.D.
Jeffrey Takahashi, M.D.

DIRECTIONS:

FROM NEW HAVEN

95 North

Exit 57

Right off exit onto Boston Post Road

Left into Sound Medical Center

FROM NEW LONDON

95 South

Exit 57

Left off exit onto Boston Post Road

Left into Sound Medical Center

EQUIPMENT DESCRIPTION: Siemens Magnetom Symphony
1.5 Tesla Open Bore

OTHER SERVICES AVAILABLE AT GUILFORD RADIOLOGY

CT SCANNING

GENERAL RADIOGRAPHY

DIGITAL MAMMOGRAPHY

FLUOROSCOPY

ULTRASOUND

BONE DENSITY

VARICOSE VEIN TREATMENT

NOTES

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Precertification from Insurance Carrier is required for all MRI & MRA Procedures.

HEAD/NECK

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>CPT Code</u>
BRAIN	Acute Stroke Alzheimers/Dementia Memory Loss Mental Status Change	MRI Brain without Contrast	70551
BRAIN	Cranial Nerve Abnormalities Dizzy/Vertigo Headache w/Focal Symptoms IAC/Hearing Loss Infection Multiple Sclerosis Pituitary Lesion Seizures Tumor/Mass Cancer/Metastases Vascular Lesions	MRI Brain Without and With Contrast	70553
Orbits	Graves Disease Exophthalmos Pseudotumor Cancer/Mets Vascular Lesion	MRI Orbits/Face/Neck Without and With Contrast	70543
Soft Tissue Neck	Infection Pain Tumor/Mass Cancer/Metastases	MRI Orbits/Face/Neck Without and With Contrast	70543
Brachial Plexus	Brachial Plexus Injury Nerve Avulsion Tumor/Mass Cancer/Metastases	MRI Chest/Mediastinum Without and With Contrast	71552

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SPINE

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>CPT Code</u>
Cervical	Arm/shoulder pain/weakness Degenerative disease Neck pain radiculopathy Chiari Malformation	MRI Cervical Spine Without Contrast	72141
	Discitis Osteomyelitis Multiple Sclerosis Tumor/Mass Cancer/Metastases Vascular Lesion/AVM	MRI Cervical Spine Without and With Contrast	72156
Thoracic	Back pain Compression fracture/trauma Degenerative disc disease Disc Herniation Radiculopathy	MRI Thoracic Spine Without Contrast	72146
	Discitis Osteomyelitis Multiple Sclerosis Post Operative Syrinx Tumor/mass Cancer/Metastases AVM/Vascular Malformation	MRI Thoracic Spine Without and With Contrast	72157
Lumbar	Back Pain Compression Fx/Trauma Degenerative disease Disc Herniation Radiculopathy Sciatic Spondylolisthesis Canal stenosis	MRI Lumbar Spine Without Contrast	72148
Lumbar	Discitis Osteomyelitis Post Operative Tumor/Mass Cancer/Metastases	MRI Lumbar Spine Without and With Contrast	72158

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BODY MRI

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>Code</u>
Abdomen	Adrenal Adenoma MRCP	MRI Abdomen Without Contrast	74181
	Adrenal Mass (not Adenoma) Liver, Kidney, Pancreas Mass Abscess Lymphadenopathy Tumor/Mass Cancer/Metastases	MRI Abdomen Without and With Contrast	74183
Chest/Mediastinum	Tumor/Mass Cancer/Metastases	MRI Chest/Mediastinum Without and With Contrast	71552
Pelvis	Fracture Arthritis Pain/Hip pain Muscle/Tendon Tear AVN	MRI Pelvis Without Contrast	72195
Pelvis	Osteomyelitis/Abscess Infection Tumor/Mass Cancer/Metastases Fibroid/Adenomyosis Ovarian Mass Lymphadenopathy	MRI Pelvis Without and With Contrast	72197
Breast	Implant Rupture	MRI Breast Without Contrast	
	History of Breast Cancer	bilateral unilateral	77059 77058

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MUSCULOSKELETAL

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>CPT Code</u>
<u>Joint</u>			
Upper Extremity			
Shoulder	Avascular Necrosis	MRI Upper Extremity Without Contrast	73221
Elbow	Fracture		
Wrist	Stress Fracture Internal Derangement Pain/Arthritis (specify joint)		
Lower Extremity			
Hip	Mensical Tear	MRI Lower Extremity Without Contrast	73721
Knee	Labral Tear		
Ankle	Muscle Tear Ligament/Tendon Tear Cartilage Injury Osteochondral Injury Contusion/Marrow Edema Pain/Arthritis (specify joint)		
Upper Extremity or Lower Extremity	Cellulitis/Fascitis Osteomyelitis Inflammatory Arthritis Septic Arthritis Tumor/Mass Cancer/Metastases Infection Abscess/Ulcer	MRI Upper Extremity With and Without Contrast or MRI Lower Extremity With and Without Contrast	73223 73723
<u>Non-Joint</u>			
Upper Extremity			
Arm	Infection	MRI Upper Extremity With and Without Contrast	73218
Hand	Osteomyelitis		
Finger	Bone Tumor Fracture Stress Fracture Muscle/Tendon Tear	MRI Upper Extremity Without Contrast	73218
Lower Extremity			
Leg	Infection	MRI Lower Extremity With and Without Contrast	73720
Foot	Abscess/Ulcer		
Toe	Cellulitis/Fascitis Osteomyelitis Bone Tumor Mass/Cancer/Metastases Morton's Neuroma Soft tissue tumor/mass Fracture Stress Fracture Muscle/Tendon Tear	MRI Lower Extremity Without Contrast	73721

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MRI ARTHROGRAPHY

(Arthrogram procedures require 2 CPT codes)

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>CPT Code</u>	<u>CPT Code</u>
Upper Extremity				
shoulder	Labral Tear	MRI Upper Extremity With Contrast	73222	23350
elbow	Loose Bodies			24220
wrist	Osteochondral Injury Stability			25246
	Post Op Meniscus Evaluation			
Lower Extremity				
Hip	Labral Tear	MRI Lower Extremity With Contrast	73722	27093
Knee	Loose Bodies			27370
Ankle	Osteochondral Injury Stability			27648
	Post Op Meniscus Evaluation			

MR ANGIOGRAPHY (MRA)

<u>Region</u>	<u>Indication</u>	<u>Procedure to Order</u>	<u>CPT Code</u>
MRA Abdomen	Abd Aortic Aneurysm Abd Aortic Dissection Mesenteric Ischemia Renal Artery Stenosis	MRA Abdomen With and Without Contrast	74185
MRA Chest	Thoracic Aorta Aneurysm, Dissection Vascular Anomalies Subclavian Arteries	MRA Chest With and Without Contrast	71555
MRA Pelvis	Arteriovenous Malformation (AVM)	MRA Pelvis With and Without Contrast	72198
MRA Peripheral Runoff	Claudication Pain Non Healing Ulcers Cold Foot	(Order all 3 exams listed below for both legs) MRA Abdomen With and Without Contrast MRA Lower Extremity w/wo Contrast Left MRA Lower Extremity w/wo Contrast Right	74185 73725 73725
MRA Brain	Stroke CVA TIA Vascular Malformation Aneurysm	MRA Brain Without Contrast	70544
MRA Neck	Stroke TIA CVA	MRA Neck With Contrast	70547
MRA Arch & Great Vessels	Stroke TIA CVA Stenosis	MRA Neck Without and With Contrast	70549
MRV Brain	Venous Thrombosis	MRV Without Contrast	70544

NOTES

INSURANCE CARRIER PRE-AUTHORIZATION

Prior to ordering a MRI or MRA procedure, please contact the patient's insurance carrier or designated agent to obtain prior authorization for the procedure. Listed below for your convenience, please find the most current contact information for all carriers.

<u>INSURANCE</u>	<u>AGENT</u>	<u>PHONE #/WEB SITE</u>
Anthem CT Blue Cross	(AIM) American Imaging Management	866-714-1107 www.americanimaging.net
Anthem MediBlue	(NIA) National Imaging Asso.	888-864-7237 www.radmd.com
Aetna	MedSolutions	888-693-3211 www.medsolutionsonline.com
CIGNA HMO	(AIM) American Imaging Management	800-252-2021 www.americanimaging.net
CIGNA PPO	CIGNA	800-462-7486 https://.cignaforhcp.cigna.com
Connecticare	(NIA) National Imaging Asso.	877-607-2363 www.radmd.com
Healthnet	CareCore	866-889-8059 www.carecorenational.com
Oxford	CareCore	877-773-2884 www.carecorenational.com
Tufts	Tufts	866-642-9703
GHI	GHI	800-835-7064
Humana	Humana	800-448-6262
Wellcare	Wellcare	813-290-6200
Out of State Blue Cross		Use number on back of insurance card