

Reference Guide

FOR REFERRING PROVIDERS



North Star Radiology

THE PATIENT'S CHOICE

Contact Us

Have questions? We are here to help!

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08/18

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Quick Reference Guide

CT

| Exam | Common Reason(s) for Ordering | Contrast Option(s) | CPT Code |
|--|--|--------------------|----------|
| Head | Trauma, headache, mental status change, stroke / TIA | W/O | 70450 |
| | Mass or oncologic evaluation, chronic headache, infection | W & W/O | 70470 |
| Sinus | Sinusitis | W/O | 70486 |
| Neck (Soft Tissue) | Mass, difficulty swallowing, pain, lymphoma, head / neck cancers, abscess | W | 70491 |
| Facial Bones | Fracture / trauma, evaluate bony anatomy | W/O | 70486 |
| | Cellulitis | W | 70487 |
| Temporal Bones | Tinnitus, otosclerosis | W/O | 70480 |
| | Mass | W | 70481 |
| Spine – Cervical | Fracture / trauma, neck pain, upper extremity paresthesias | W/O | 72125 |
| Spine – Thoracic | Fracture / trauma, upper back pain | W/O | 72128 |
| Spine – Lumbar | Fracture / trauma, lower back pain, lower extremity paresthesias / sciatica | W/O | 72131 |
| Chest | Nodule follow-up, interstitial lung disease (HRCT), contraindication to contrast | W/O | 72150 |
| | Mass or nodule evaluation, hemoptysis, empyema, oncologic imaging | W | 72160 |
| Abdomen / Pelvis | Routine: Abdominal pain, appendicitis, diverticulitis, bowel obstruction, abscess, oncologic imaging | W & Oral Contrast | 74177 |
| | Kidney stone / flank pain | W/O | 74176 |
| | IVP: Hematuria, evaluate urinary tract | W & W/O | 74178 |
| | Enterography: Crohn's disease, angiodysplasia, iron deficiency anemia | W & Oral Contrast | 74177 |
| Abdomen Only (Diaphragm to Iliac Crest) | Routine: Upper abdominal pain | W & Oral Contrast | 74160 |
| | Adrenal: Evaluate adrenal nodule or mass | W & W/O | 74170 |
| | Hepatic: Evaluate liver lesions, hepatoma screening, cirrhosis | W & W/O | 74170 |
| | Pancreatic: Evaluate pancreatic mass lesions, jaundice, biliary dilatation | W & W/O | 74170 |
| | Renal: Evaluate renal mass lesion or complex cyst | W & W/O | 74170 |
| Pelvis Only | Pelvis mass, evaluate nodes, abscess | W & Oral Contrast | 72193 |
| | Fracture, trauma, evaluate bony anatomy | W/O | 72192 |

****IV CONTRAST EXAMS** Patients 60 years or older and those with risk factors for renal disease will include a protocol order for creatinine if one has not been done within previous 14 days.**

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CT - PG. 2

| Exam | Common Reason(s) for Ordering | Contrast Option(s) | CPT Code |
|--|--|----------------------------|--|
| CTA | Head: Evaluate Circle of Willis vessels, stroke, aneurysm | W | 70496 |
| | Neck: Evaluate carotid and vertebral arteries, dissection | W | 70498 |
| | Thoracic and Abdominal Aorta: Aortic arch to bifurcation, dissection evaluation | W | 71275 CTA CHEST 74175 ANGIO ABD |
| | Thoracic Aorta: Aortic arch to kidneys, evaluate thoracic aortic aneurysm, stent graft | W | 71275 |
| | Abdominal Aorta: Diaphragm to bifurcation, evaluate abdominal aortic aneurysm, stent graft, mesenteric ischemia, renal artery stenosis | W | 74175 |
| | Pulmonary Embolism: CTA chest, evaluate pulmonary embolism, dyspnea | W | 71275 |
| | Extremity: Trauma, vascular injury, aneurysms, impingement syndromes | W | 73206 |
| | Run-off Diaphragm to Feet: Claudication, peripheral vascular disease, evaluate lower extremity arteries | W | 75635 |
| Extremity – Upper | Fracture / trauma, evaluate bony anatomy | W/O | 73200 |
| Extremity – Lower | Fracture / trauma, evaluate bony anatomy | W/O | 73700 |
| Extremity – Arthrogram | Contraindication to MRI, cartilage evaluation, joint bodies | W Intra-Articular Contrast | 73615 ANKLE 73085 ELBOW 73525 HIP 73525 KNEE 73040 SHOULDER 70332 TMJ 73115 WRIST |
| **IV CONTRAST EXAMS** Patients 60 years or older and those with risk factors for renal disease will include a protocol order for creatinine if one has not been done within previous 14 days. | | | |

Quick Reference Guide

MRI

| Exam | Common Reason(s) for Ordering | Contrast Option(s) | CPT Code |
|--|---|----------------------------|----------|
| Brain | Routine brain survey, migraines, CVA / TIA, dizziness, mental status change | W/O | 70551 |
| | History of cancer / metastasis, mass or lesion, multiple sclerosis, seizures, pituitary, IAC | W & W/O | 70553 |
| Orbit / Face | Contraindication for contrast (allergy) | W/O | 70540 |
| | Mass / lesion, optic neuritis (routinely done W & W/O contrast) | W & W/O | 70543 |
| MRA Head | Circle of Willis, brain aneurysm, TIA / CVA (done W/O contrast) | W/O | 70544 |
| MRA Neck | Contraindication for contrast (allergy) | W/O | 70547 |
| | CVA / TIA, carotid or vertebral artery stenosis | W & W/O | 70549 |
| Neck (Soft Tissue) | Contraindication for contrast (allergy) | W/O | 70540 |
| | Soft tissue mass, lymphadenopathy, head and neck cancer (routinely done W & W/O contrast) | W & W/O | 70543 |
| TMJ (Temporomandibular Joint) | TMJ pain, clicking or locking | W/O | 70336 |
| Cervical Spine | Routine spine, pain, radiculopathy, HNP, DDD | W/O | 72141 |
| | History of cancer, metastasis, mass / lesion, history of surgery on area of interest within past 10 years | W & W/O | 72156 |
| Thoracic Spine | Routine spine, pain, radiculopathy, HNP, DDD | W/O | 72146 |
| | History of cancer, metastasis, mass / lesion, history of surgery on area of interest within past 10 years | W & W/O | 72157 |
| Lumbar Spine | Routine spine, pain, radiculopathy, HNP, DDD | W/O | 72148 |
| | History of cancer, metastasis, mass / lesion, history of surgery on area of interest within past 10 years | W & W/O | 72158 |
| Upper Joint (Shoulder, Elbow, Wrist) | Pain, injury, soft tissue tear | W/O | 73221 |
| | Sepsis, osteomyelitis, mass / lesion | W & W/O | 73223 |
| | Arthrogram | W Intra-Articular Contrast | 73222 |
| Upper Extremity (Upper Arm, Forearm, Hand / Finger) | Pain, injury, soft tissue tear | W/O | 73218 |
| | Sepsis, osteomyelitis, mass / lesion | W & W/O | 73220 |
| Brachial Plexus | Trauma, thoracic outlet syndrome | W/O | 71550 |
| | Possible metastatic lesion, mass | W & W/O | 71552 |

****IV CONTRAST EXAMS**** Laboratory testing of eGFR is not required prior to administration of MRI contrast for most studies, including patients with renal disease and those on dialysis. There is an exception for patients who require Eovist contrast for workup of certain liver lesions.

MRI - PG. 2

| Exam | Common Reason(s) for Ordering | Contrast Option(s) | CPT Code |
|---|--|----------------------------|--|
| Lower Joint (Hip, Knee, Ankle) | Pain, injury, soft tissue tear | W/O | 73721 |
| | Sepsis, osteomyelitis, mass / lesion | W & W/O | 73723 |
| | Arthrogram | W Intra-Articular Contrast | 73722 |
| Lower Extremity (Thigh, Lower Leg, Foot / Toe) | Pain, injury, soft tissue tear | W/O | 73718 |
| | Sepsis, osteomyelitis, mass / lesion | W & W/O | 73720 |
| Chest | Contraindication for contrast (allergy) | W/O | 71550 |
| | Chest wall mass, extrapulmonary lesion, pectoralis muscle injury | W & W/O | 71552 |
| MRA Chest | Evaluate thoracic aorta (W & W/O contrast only) | W & W/O | 71555 |
| Abdomen | Biliary obstruction (MRCP), adrenal nodules (adrenal protocol), appendicitis evaluation in pregnancy | W/O | 74181 |
| | Liver: Liver lesions, cirrhosis, hepatoma screening | W | 74183 |
| | Pancreas: Pancreatic lesions, biliary or pancreatic duct dilation | W | 74182 |
| | Renal: Renal mass | W | 74182 |
| | Urography: Hematuria, evaluate renal collecting systems | W | 74182 |
| | Enterography: Crohn's disease, IBD | W & Oral Contrast | 74182 |
| Pelvis | Trauma / fracture, soft tissue injury, sports hernia | W/O | 72195 |
| | Gynecologic: Evaluate uterus, ovaries | W & W/O | 72197 |
| | Prostate: Prostate cancer evaluation (PI-RADS) | W & W/O | 72197 |
| | Rectal cancer staging, other oncologic evaluation, abscess, fistula | W & W/O | 72197 |
| | Musculoskeletal: Sacroiliitis, arthritis | W & W/O | 72197 |
| MRA Abdomen | Contraindication for contrast (allergy) | W/O | 74185 |
| | Evaluation of abdominal aorta, hypertension, arterial stenosis | W & W/O | 74185 |
| MRA Runoff | Claudication, peripheral vascular disease | W & W/O | 73725 LOWER EXTREMITY 74185 MRA ABD |
| <p>**IV CONTRAST EXAMS** Laboratory testing of eGFR is not required prior to administration of MRI contrast for most studies, including patients with renal disease and those on dialysis. There is an exception for patients who require Eovist contrast for workup of certain liver lesions.</p> | | | |

Quick Reference Guide

ULTRASOUND

| Exam | Common Reason(s) for Ordering | Prep Required | CPT Code |
|--|---|---|--|
| Abdomen Complete | Nausea, vomiting, abdominal pain, abnormal blood work, history of cancer, follow-up on abdominal X-Ray, MRI or CT scan. Includes aorta, pancreas, liver, gall bladder, ducts, kidneys and spleen. | NPO for 6 hours | 76700 |
| Abdomen GB, Liver, Pancreas (Routine) | Elevated LFT's, nausea / vomiting, jaundice, abdomen pain, follow-up abnormal X-Ray, MRI or CT scan. Includes gall bladder, pancreas, liver and ducts. | NPO for 6 hours | 76705 |
| Abdomen Liver, Hepatobiliary | Elevated LFT's, nausea / vomiting, jaundice, abdomen pain, follow-up abnormal X-Ray, MRI or CT scan. Includes pancreas, liver, ducts (patient has had cholecystectomy). | NPO for 6 hours | 76705 |
| Abdomen Limited | Rule out appendicitis, check for hernia, evaluate ascites, evaluate a single organ or quadrant. | No prep required | 76705 |
| Aorta | Back pain, family or personal history of AAA, pulsatile abdominal mass, smoking, vascular disease, Medicare screening. Evaluate for AAA. | NPO for 6 hours | 76775 |
| Spleen | Enlarged spleen, possible accessory spleen, splenic injury. | NPO for 6 hours | 76705 |
| Kidneys | Abnormal renal function, hematuria, follow-up mass or cyst, hematuria, back pain, recurrent UTI, renal disease or insufficiency. Bladder images included. Both kidneys are imaged. | NPO for 6 hours Drink 20 ounces of water one hour prior to exam | 76770 |
| Pelvic | Post-menopausal bleeding, pelvic pain, abnormal bleeding, menstrual concerns, fibroids, cysts, ovarian or uterine cancers. Usually trans-abdominal and trans-vaginal, unless otherwise specified by referring provider. Patient will need a full bladder for trans-abdominal portion. Evaluates uterus, ovaries, and adnexae. Male pelvic ultrasound evaluates bladder; use pelvic limited. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76856 TRANS-ABDOMINAL 76830 TRANS-VAGINAL |
| Pelvic (Trans-Vaginal Follicular Study — Infertility) | Evaluate ovaries for follicles and uterus for endometrium size for patients with infertility. Count number of follicles on each ovary, measure follicles over 10 mm, measure endometrium. In addition to above, a routine trans-vaginal pelvic ultrasound will be completed. | No prep required | 76830 |
| Pelvic Limited | Evaluated bladder and adnexae. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76857 |

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ULTRASOUND - PG. 2

| Exam | Common Reason(s) for Ordering | Prep Required | CPT Code |
|---|--|---|------------------------------------|
| OB < 14 Weeks (First Trimester) | Dates and viability for a fetus less than 14 weeks. Routine normal pregnancy, bleeding, pain in first trimester. Possible trans-vaginal if indicated. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76801 |
| OB Trans-Vaginal | Check cervical length or if indicated in conjunction with trans-abdominal approach. | No prep required | 76817 |
| OB > 14 Weeks (Second Trimester) | Anatomy scan for a fetus greater than 14 weeks. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76805 |
| OB Biophysical Profile (BPP) W/O NST | Approx. 30 min. exam includes: 30 seconds of breathing, 3 gross body movements (fetal body and/or limb movements), fetal tone (all extremities appear flexed and fetal chin is flexed) or one episode of limb extension, AFI > 5.0 cm. | No prep required | 76819 |
| OB Limited | Includes placental survey, cervical length, fetal heart rate and fluid assessment. Check position, placenta, heart rate, AFI (one or more of these elements), or to re-image anatomy that was sub-optimally seen on a previous scan. Patient must have a complete OB scan done at SAE prior to exam. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76815 |
| OB Follow-Up | Re-check growth, or if diagnosis is to re-check a known or previously seen abnormality. Must also do growth biometry and AFI (HC, BPD, AC, FL, AFI, HR, or first trimester measurements). Patient must have a complete OB scan done at SAE prior to this exam. | Arrive with a full bladder Drink at least 32 ounces of water one hour prior to exam Do <u>not</u> urinate | 76816 |
| Thyroid | Enlarged thyroid, palpable mass, abnormal thyroid enzymes, abnormalities seen on other modalities, dysphasia. Thyroid gland only will be imaged. | No prep required | 76536 |
| Testicular / Scrotum | Pain, swelling, redness, palpable mass, injury. Both testicles will be evaluated. Exam in conjunction with doppler exam. Order must include both CPT codes. | No prep required | 93975 76870 DOPPLER EXAM |
| Soft Tissue Mass | Evaluate palpable mass. | No prep required | 76999 |
| Extremity – Non-Vascular | Palpable mass or pain in the area of concern, popliteal fossa non-vascular, limited, anatomic specific. Specify which extremity and location or area of concern. | No prep required | 76882 |
| Pylorus – Pediatric | Projectile vomiting, poor weight gain, abnormal stools. | NPO for 4 hours | 76705 |
| Spinal Canal / Contents – Pediatric | Sacral dimpling. | No prep required | 76800 |
| Soft Tissue Head / Neck | Palpable lump suspected within the soft tissue of the neck, suspected mass in neck. Specify location. | No prep required | 76536 |
| Cyst Aspiration | Specify location of cyst to be aspirated. | No blood thinners 3 days prior to exam | 76942 AND SPECIFY EXAM LOCATION |

Ordering Guide

WHAT TO ORDER WHEN

| Brain | |
|---|--|
| Headache | CT head without contrast for acute (“worst headache of life”). |
| Trauma | CT head without contrast (acute). |
| Suspected Intra-Cranial Hemorrhage | CT head without contrast. |
| Acute Neurological Changes | CT head without contrast. Subsequent study: MRI with and without contrast. |
| Acute Stroke / TIA | CTA head and neck. CT head without contrast. Subsequent studies: MRI brain with and without contrast, MRA brain and MRA neck with and without contrast as indicated. |
| Hydrocephalus | CT head without contrast. Alternative: MRI with and without contrast (for acute process). |
| Seizure | MRI brain with and without contrast (seizure protocol). |
| Dementia / Memory Loss | MRI brain with and without contrast. |
| Mass | Brain MRI with and without contrast. |
| Aneurysm or AVM “Screening” | MRA head. CTA head with contrast for definition of small aneurysms, patients who cannot have MRA. |
| Infection | MRI with and without contrast. MRI contraindicated: CT with and without contrast. |
| Face | |
| Trauma | CT maxillofacial without contrast. |
| Sinus Disease | CT sinus without contrast. If suspected orbital / intra-cranial involvement: MRI brain and orbits with and without contrast. |
| Infection | CT maxillofacial with contrast. Suspected orbit or brain extension: MRI brain and orbits (IAC protocol). |
| Hearing Loss, Vertigo | Developmental: CT temporal bones without contrast. Sensorineural: MRI IAC with and without contrast. |
| Neck / Soft Tissue | |
| Carotid or Vertebral Artery Stenosis | MRA neck with and without contrast. Alternatives: CTA neck with contrast. Carotid Doppler ultrasound. |
| Mass | CT neck with contrast. Thyroid nodule: Neck ultrasound. Thyroid cancer: MRI neck with and without contrast. |
| Infection | CT neck with contrast. |
| Carotid or Vertebral Artery Dissection | CTA neck with contrast. Alternative: MRA neck with and without contrast (dissection protocol). |
| Salivary Duct Stone | CT neck with and without contrast. |

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ORDERING - PG. 2

| Thoracic Spine | |
|--|---|
| Trauma | CT thoracic spine without contrast. Acute neurologic deficit and CT negative: MRI without contrast. |
| Pain, Degenerative Changes, Radiculopathy | MRI thoracic spine without contrast. Prior surgery within 5 years: MRI T-spine with and without contrast. MRI contraindicated: CT without contrast or CT myelogram. |
| Lumbar Spine | |
| Trauma | CT lumbar spine without contrast. Acute neurologic deficit and CT negative: MRI without contrast. |
| Pain, Degenerative Changes, Radiculopathy | MRI lumbar spine without contrast. Prior surgery within 5 years: MRI with and without contrast. MRI contraindicated: CT without contrast or CT myelogram. |
| Mass | MRI without and with contrast. |
| Infection | MRI without and with contrast. |
| Chest | |
| Chronic Dyspnea | CT chest. |
| Hemoptysis | CT chest with contrast. |
| Lung Cancer – Non-invasive Staging | CT chest with contrast. |
| Screening for Pulmonary Metastases | CT chest with or without for initial evaluation or surveillance. Chest X-Ray if performed as a baseline. |
| Blunt Chest Trauma, Suspect Aortic Injury | CTA chest with contrast. |
| Acute Chest Pain Suspect Aortic Dissection | CTA chest and abdomen (dissection protocol). |
| Suspected Pulmonary Embolism | CTA chest with contrast. Alternative: When CT contrast contraindicated, consider ventilation / perfusion scan. |
| Gastrointestinal | |
| Acute Abdominal Pain, Fever, Rule Out Abscess | CT abdomen and pelvis with IV and oral contrast. |
| Pregnant Patient With Acute Abdominal Pain | Ultrasound. If indeterminate, then MRI abdomen and pelvis without contrast. |
| Pancreatitis | CT abdomen with contrast. Consider MRCP as well to evaluate for gall stones. |
| Blunt Trauma Stable Patient | CT chest / abdomen / pelvis with IV contrast. |
| Jaundice – Painless | CT with and without contrast (pancreas protocol). |
| Jaundice With Pain / Fever | Ultrasound. Alternative: MRCP with IV contrast. |
| Left Lower Quadrant Pain | CT abdomen / pelvis with IV contrast and with oral contrast. |
| Evaluate Inflammatory Bowel Disease / Crohn's Disease | MRI abdomen with IV contrast and with oral contrast (enterography protocol). Alternative: CT abdomen with IV contrast and with oral contrast (enterography protocol). |

ORDERING - PG. 3

| Gastrointestinal – Cont'd | |
|---|--|
| Right Lower Quadrant Pain – Suspected Appendicitis | CT abdomen and pelvis with IV and oral contrast. |
| Right Lower Quadrant Pain – Pregnant | Ultrasound. Obtain MRI if inconclusive. |
| Right Lower Quadrant Pain – Children | Ultrasound. Obtain MRI if inconclusive. |
| Right Upper Quadrant Pain | Ultrasound abdomen initially for evaluation of gallbladder and biliary system. |
| Evaluate Liver Lesions | CT or MRI with contrast IV (liver protocol). |
| Suspected Small Bowel Obstruction | CT abdomen and pelvis with contrast IV and water-soluble oral contrast, if tolerated. |
| Urologic | |
| Flank Pain – Suspected Stone Disease | CT abdomen and pelvis without contrast (CTKUB). |
| Acute Pyelonephritis | CT abdomen and pelvis with and without contrast. |
| Hematuria | CT abdomen and pelvis with and without contrast. Order as CT-IVP which includes high resolution excretory phase imaging of the renal collecting systems and ureters. |
| Incidental Renal Mass | Either CT or MRI abdomen with and without contrast (renal mass protocol). |
| Recurrent Urinary Tract Infections in Women | CT with and without contrast for bladder and kidneys evaluation. MRI pelvis to exclude urethral diverticulum or pelvic prolapse. |
| Evaluation of Female Pelvis | Ultrasound pelvis. If further evaluation needed, MRI pelvis with contrast IV (gynecologic protocol). |
| Evaluation of Prostate Lesion | MRI pelvis with contrast IV (prostate protocol). |
| Evaluation of Adrenal Nodule | CT with and without contrast or MRI without contrast (adrenal protocol). |
| Extremities | |
| Assess Fractures or Dislocation | CT without contrast. |
| Evaluate Stress Fracture | MRI without contrast. |
| Labral Tear | MRI arthrogram. CT arthrogram if contraindication to MRI. |
| Cartilage Evaluation | MRI arthrogram. CT arthrogram if contraindication to MRI. |
| Joint Bodies | MRI arthrogram. CT arthrogram if contraindication to MRI. |



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