



2017 RADIOLOGY CPT CODES

BONE DENSITOMETRY

<input type="checkbox"/> Bone Density/DEXA	77080		
CT			
<input type="checkbox"/> CT Abd & Pelvis W/ Contrast	74177	<input type="checkbox"/> CT Enterography W/ Contrast	74177
<input type="checkbox"/> CT Abd & Pelvis W/O Contrast	74178	<input type="checkbox"/> CT Extremity Lower W/ Contrast	73701
<input type="checkbox"/> CT Abd & Pelvis W/O Contrast	74176	<input type="checkbox"/> CT Extremity Lower W/O Contrast	73700
<input type="checkbox"/> CT Abd W/ Contrast	74160	<input type="checkbox"/> CT Extremity Upper W/ Contrast	73201
<input type="checkbox"/> CT Abd W/O Contrast	74150	<input type="checkbox"/> CT Extremity Upper W/O Contrast	73200
<input type="checkbox"/> CT Abd W/O Contrast	74170	<input type="checkbox"/> CT Head W/ Contrast	70460
<input type="checkbox"/> CT Chest W/ Contrast	71260	<input type="checkbox"/> CT Head W/O Contrast	70450
<input type="checkbox"/> CT Chest W/O Contrast	71250	<input type="checkbox"/> CT Head W/O Contrast	70470
<input type="checkbox"/> CT Chest W/O Contrast	71270	<input type="checkbox"/> CT Max/Facial W/ Contrast	70487
		<input type="checkbox"/> CT Max/Facial W/O Contrast	70486
		<input type="checkbox"/> CT Neck W/ Contrast	70491
		<input type="checkbox"/> CT Neck W/O Contrast	70490
		<input type="checkbox"/> CT Orbit/ IAC W/ Contrast	70481
		<input type="checkbox"/> CT Orbit/ IAC W/O Contrast	70480
		<input type="checkbox"/> CT Orbit/ IAC W/O Contrast	70482
		<input type="checkbox"/> CT Pelvis W/ Contrast	72193
		<input type="checkbox"/> CT Pelvis W/O Contrast	72192
		<input type="checkbox"/> CT Pelvis W/O Contrast	72194
		<input type="checkbox"/> CT Sinus Complete W/O Contrast	70486
		<input type="checkbox"/> CT Sinus Limited W/O Contrast	76380
		<input type="checkbox"/> CT Spine Cervical W/ Contrast	72126
		<input type="checkbox"/> CT Spine Cervical W/O Contrast	72125
		<input type="checkbox"/> CT Spine Lumbar W/ Contrast	72132
		<input type="checkbox"/> CT Spine Lumbar W/O Contrast	72131
		<input type="checkbox"/> CT Spine Thoracic W/ Contrast	72129
		<input type="checkbox"/> CT Spine Thoracic W/O Contrast	72128
		<input type="checkbox"/> CT Stone Protocol W/O Contrast	74176

CTA

<input type="checkbox"/> Cardiac Calcium Score only	75571	<input type="checkbox"/> CTA Angiogram Abdomen & Pelvis W/ C	74174	<input type="checkbox"/> CTA Angiogram Head W/O Contr	70496	<input type="checkbox"/> CTA Angiogram Neck W/O Contrast	70498
<input type="checkbox"/> CTA Angiogram Abdomen W/O Contr	74175	<input type="checkbox"/> CTA Angiogram Chest W/O Contrast	71275	<input type="checkbox"/> CTA/CTA Heart W/O Contrast	75574		

MAMMOGRAPHY

*Tomo code is used in conjunction with Mammo code

<input type="checkbox"/> Mammogram, Screen/Yearly	G0202	<input type="checkbox"/> Mammogram Unilateral	G0206	<input type="checkbox"/> Mammogram Bilateral	G0204	<input type="checkbox"/> Tomosynthesis Screening *	77063
						<input type="checkbox"/> Tomosynthesis Diagnostic Un/BI *	G0279

MRA

<input type="checkbox"/> MRA Abdomen W/O Contrast	74185	<input type="checkbox"/> MRA Extremity Upper W/O Contrast	73225	<input type="checkbox"/> MRA Head W/O Contrast	70546	<input type="checkbox"/> MRA Neck W/O Contrast	70549
<input type="checkbox"/> MRA Chest W/O Contrast	71555	<input type="checkbox"/> MRA Head W/ Contrast	70545	<input type="checkbox"/> MRA Neck W/ Contrast	70548	<input type="checkbox"/> MRA Pelvis W/O Contrast	72198
<input type="checkbox"/> MRA Extremity Lower W/O Contrast	73725	<input type="checkbox"/> MRA Head W/O Contrast	70544	<input type="checkbox"/> MRA Neck W/O Contrast	70547	<input type="checkbox"/> MRA Runoff	74185, 73725

MRI

<input type="checkbox"/> MRI Abdomen W/O Contrast	74181	<input type="checkbox"/> MRI Extremity Lower W/O Contrast	73720	<input type="checkbox"/> MRI Extremity Upper Joint W/O	73221	<input type="checkbox"/> MRI Spine Cervical W/O Contrast	72141
<input type="checkbox"/> MRI Abdomen W/O Contrast	74183	<input type="checkbox"/> Tib/Fib, Mid/Foreft, Femur, Foreft/Toes		<input type="checkbox"/> Contrast - Shoulder, Elbow, Wrist		<input type="checkbox"/> MRI Spine Cervical W/O Contrast	72156
<input type="checkbox"/> MRI Brain W/O Contrast	70551	<input type="checkbox"/> MRI Extremity Lower Joint W/O	73721	<input type="checkbox"/> MRI Extremity Upper Joint W/O	73223	<input type="checkbox"/> MRI Spine Lumbar W/O Contrast	72148
<input type="checkbox"/> MRI Brain W/O Contrast	70553	<input type="checkbox"/> Contrast - Knee, Ankle, Mid/Hindfoot, Hip		<input type="checkbox"/> Contrast - Shoulder, Elbow, Wrist		<input type="checkbox"/> MRI Spine Lumbar W/O Contrast	72158
<input type="checkbox"/> MRI Breast MRI	77059	<input type="checkbox"/> MRI Extremity Lower Joint W/O	73723	<input type="checkbox"/> MR Enterography	74183, 72197	<input type="checkbox"/> MRI Spine Thoracic W/O Contrast	72146
<input type="checkbox"/> W/O Contrast		<input type="checkbox"/> Contrast - Knee, Ankle, Mid/Hindfoot, Hip		<input type="checkbox"/> W/O Contrast		<input type="checkbox"/> MRI Spine Thoracic W/O Contrast	72157
<input type="checkbox"/> MRI Chest W/O Contrast	71550	<input type="checkbox"/> MRI Extremity Upper W/O Contrast	73218	<input type="checkbox"/> MRI Orbit, Face, Neck W/O Contr	70540	<input type="checkbox"/> MRI TMJ W/O Contrast	70336
<input type="checkbox"/> MRI Chest W/O Contrast	71552	<input type="checkbox"/> Brachial Plexus, Scapula, Humerus, Forearm, Hand		<input type="checkbox"/> MRI Orbit, Face, Neck W/O Contrast	70543		
<input type="checkbox"/> MRI Extremity Lower W/O Contrast	73718	<input type="checkbox"/> MRI Extremity Upper W/O Contrast	73220	<input type="checkbox"/> MRI Pelvis W/O Contrast	72195		
<input type="checkbox"/> Tib/Fib, Mid/Foreft, Femur, Foreft/Toes		<input type="checkbox"/> Brachial Plexus, Scapula, Humerus, Forearm, Hand		<input type="checkbox"/> MRI Pelvis W/O Contrast	72197		

NUCLEAR MEDICINE

<input type="checkbox"/> 3 Phase Bone Scan	78315	<input type="checkbox"/> Hepatobiliary/Disida/Hida with CCK	78227	<input type="checkbox"/> MUGA	78472	<input type="checkbox"/> SPECT Bone Scan	78320
<input type="checkbox"/> Cardiac Nuclear Stress Testing	78452, 93015	<input type="checkbox"/> Hepatobiliary/Disida/Hida W/O CCK	78226	<input type="checkbox"/> Parathyroid Planar Imaging	78070	<input type="checkbox"/> SPECT Brain Scan	78607
<input type="checkbox"/> Non-Nuclear Treadmill Only Stress	93015	<input type="checkbox"/> I-131 TX ___mCi	CALL	<input type="checkbox"/> Renal Captopril	78708	<input type="checkbox"/> Thyroid Uptake and Scan	78014
<input type="checkbox"/> DaT Scan (Boca and Delray)	78607	<input type="checkbox"/> Liver Spleen Scan	78215	<input type="checkbox"/> Renal Lasix	78708	<input type="checkbox"/> WB I-131 Scan	78018
<input type="checkbox"/> Gastric Empty	78264	<input type="checkbox"/> Liver Spect	78205	<input type="checkbox"/> Triple Renal Scan	78707	<input type="checkbox"/> Whole Body Bone Scan	78306

PET/CT

<input type="checkbox"/> Brain PET/CT	78814	<input type="checkbox"/> Melanoma/Merkel cell PET/CT	78816	<input type="checkbox"/> NaF PET/CT Bone Scan	78816	<input type="checkbox"/> Eyes - Thighs PET/CT	78815
<input type="checkbox"/> Localization W/O IV		<input type="checkbox"/> Localization W/O IV				<input type="checkbox"/> Localization W/O IV	
<input type="checkbox"/> Brain PET/CT	78814, 70450	<input type="checkbox"/> Melanoma/Merkel PET/CT	78816, 74177, 71260			<input type="checkbox"/> Eyes - Thighs PET/CT	78815, 71260, 74177
<input type="checkbox"/> Diagnostic W/O IV		<input type="checkbox"/> Diagnostic with IV & Oral (Chest/Abd/Pelvis)				<input type="checkbox"/> Diagnostic (Chest/Abd/Pelvis) with IV & Oral	

RADIOLOGY

<input type="checkbox"/> ABD complete (DEC)	74020	<input type="checkbox"/> Finger (s) 2 views	73140	<input type="checkbox"/> Pelvis 2 views	72170	<input type="checkbox"/> Spine Cervical AP, Lat and Obliques	72052
<input type="checkbox"/> Abdomen KUB 1 view	74000	<input type="checkbox"/> Foot 3 views	73630	<input type="checkbox"/> Ribs, (1) Side 3 views	71101	<input type="checkbox"/> with flex ext. 6 or more views	
<input type="checkbox"/> AC Joints	73050	<input type="checkbox"/> Forearm 2 views	73090	<input type="checkbox"/> Ribs, (2) Sides 4 views	71111	<input type="checkbox"/> Spine Lumbar AP & Lat	72100
<input type="checkbox"/> Ankle 3 views	73610	<input type="checkbox"/> Hand 3 views	73130	<input type="checkbox"/> Sacrum / Coccyx 2 views	72220	<input type="checkbox"/> Spine Lumbosacral min. 4 views	72110
<input type="checkbox"/> AP Chest	71010	<input type="checkbox"/> Heel 2 views	73650	<input type="checkbox"/> SC Joints min 3 views with flex ext.	71130	<input type="checkbox"/> Spine Lumbar Complete Bend	72114
<input type="checkbox"/> Bone Age Studies	77072	<input type="checkbox"/> Hip Bilateral	73521	<input type="checkbox"/> Scapula	73010	<input type="checkbox"/> min. 6 views	
<input type="checkbox"/> Chest Decubitus	71035	<input type="checkbox"/> Hip Unilateral 2 views	73502	<input type="checkbox"/> Shoulder 2 views	73030	<input type="checkbox"/> Spine Lumbar Bend only 2 or 3 views	72120
<input type="checkbox"/> Chest Obliques	71022	<input type="checkbox"/> Humerus 2 views	73060	<input type="checkbox"/> SI Joints 3 or more views	72202	<input type="checkbox"/> Spine Scoliosis Study	72090
<input type="checkbox"/> Chest PA & Lat	71020	<input type="checkbox"/> IVP	74400	<input type="checkbox"/> Sinuses 3 views	70220	<input type="checkbox"/> Spine Thoracic 3 views	72072
<input type="checkbox"/> Clavicle	73000	<input type="checkbox"/> Knee 3 views	73562	<input type="checkbox"/> Skull 4 views	70260	<input type="checkbox"/> Sternum	71120
<input type="checkbox"/> Elbow 3 views	73080	<input type="checkbox"/> Mandible 4 views	70110	<input type="checkbox"/> Soft Tissue Neck	70360	<input type="checkbox"/> Tib / Fib 2 views	73590
<input type="checkbox"/> Eyes, Foreign Body	70030	<input type="checkbox"/> Nasal Bones 3 views	70160	<input type="checkbox"/> Spine Cervical 2 or 3 views	72040	<input type="checkbox"/> TMJ Joints-Bilateral	70330
<input type="checkbox"/> Facial Bones Complete	70150	<input type="checkbox"/> Orbits 4 views	70200	<input type="checkbox"/> Spine Cervical AP, Lat and Obliques	72050	<input type="checkbox"/> Toe (s) 2 views	73660
<input type="checkbox"/> Femur 2 views	73552	<input type="checkbox"/> Osseous Survey (Metastatic)	77074	<input type="checkbox"/> 4 or 5 views		<input type="checkbox"/> Wrist 3 views	73110

ULTRASOUND

<input type="checkbox"/> US Abdomen Complete	76700	<input type="checkbox"/> EKG ONLY	93000	<input type="checkbox"/> US OB additional gestation	76802	<input type="checkbox"/> US Retroperitoneal Ltd. (Aorta or Renal)	76775
<input type="checkbox"/> US Abdomen Ltd.	76705	<input type="checkbox"/> US Extremity Arteries Bilateral	93925	<input type="checkbox"/> US OB > 14 weeks	76805	<input type="checkbox"/> US Scrotum & Contents	76870
<input type="checkbox"/> US Bi-Carotid Dop-extracranial Artery	93880	<input type="checkbox"/> US Extremity Arteries Unilateral	93926	<input type="checkbox"/> US OB < 14 weeks Pregnancy 1st Trim.	76801	<input type="checkbox"/> US Stress Echo	93351
<input type="checkbox"/> US Bladder	76857	<input type="checkbox"/> US Extremity Veins Bilateral	93970	<input type="checkbox"/> US OB Transvaginal	76817	<input type="checkbox"/> US Transvaginal	76830
<input type="checkbox"/> US Breast Complete (w/ axilla)	76641	<input type="checkbox"/> US Extremity Veins Unilateral	93971	<input type="checkbox"/> US Pelvic	76856		
<input type="checkbox"/> US Breast Limited	76642	<input type="checkbox"/> US Extremity, non-vascular	76881	<input type="checkbox"/> US Pleural Effusion Chest	76604		
<input type="checkbox"/> Echocardiography	93306	<input type="checkbox"/> US Neck, Thyroid/Parathyroid	76536	<input type="checkbox"/> US Retroperitoneal Compl. (Renal & Bladder)	76770		

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