

# MRI

## ORDERING GUIDE


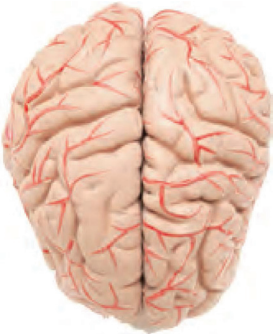



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Central Virginia Imaging


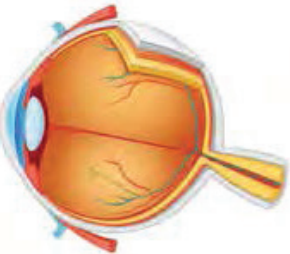

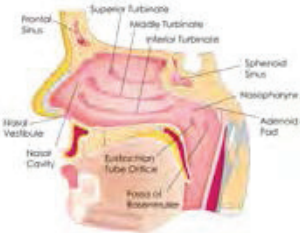
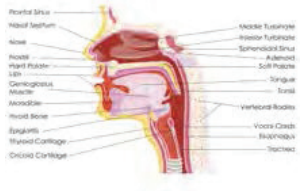
113 Nationwide Drive, Lynchburg, VA 24502 | **434.237.4091**

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<b>MRI Brain W/O</b>	<ul style="list-style-type: none"> <li>• Headache</li> <li>• Trauma/Bleeding</li> <li>• Memory loss</li> <li>• Confusion</li> <li>• CVA</li> <li>• TIA</li> <li>• Huntington's</li> <li>• Parkinson's</li> <li>• Hydrocephaly</li> <li>• Dementia</li> <li>• Tremors</li> <li>• Chiari malformation</li> <li>• Ataxia</li> <li>• Amnesia</li> </ul>	No	70551
	<b>MRI Brain W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• History of any cancer (except basal cell)</li> <li>• Tumor</li> <li>• Seizures</li> <li>• MS</li> <li>• Infection, encephalitis</li> <li>• Meningitis</li> </ul>	Yes	70553
	<b>MRA Brain</b>	<ul style="list-style-type: none"> <li>• Aneurysm</li> <li>• Clots</li> <li>• Stenosis</li> <li>• CVA</li> <li>• Cavernous Angioma</li> </ul>	No	70544
	<b>MRV Brain</b>	<ul style="list-style-type: none"> <li>• Avascular malformation</li> <li>• Sagittal Sinus Thrombosis</li> </ul>	No	70544
	<b>MRI Pituitary W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Low testosterone</li> <li>• Increased Prolactin</li> <li>• Unexplained weight loss or weight gain</li> <li>• Menstrual changes</li> <li>• Decreased ADH</li> <li>• Increased growth hormone</li> <li>• Increased TSH</li> <li>• Galactorrhea</li> <li>• Vision changes</li> <li>• Sellar/Suprasellar Lesion</li> </ul>	Yes	70553

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<b>MRI IAC</b> <b>(Internal Auditory Canal)</b> <b>W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Hearing loss</li> <li>• Vertigo</li> <li>• Dizziness</li> <li>• Tinnitus</li> <li>• Acoustic Neuroma</li> </ul>	Yes	70553
	<b>MRI Orbits</b> <b>W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Optic nerves</li> <li>• Double vision</li> <li>• Blurred vision</li> <li>• Papilledema</li> </ul>	Yes	70543
	<b>MRI Orbits &amp; Limited Brain</b> <b>W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Optic nerves</li> <li>• Double vision</li> <li>• Blurred vision</li> <li>• Papilledema</li> </ul>	Yes	70543 70553 Limited
	<b>Nasopharynx</b>	<ul style="list-style-type: none"> <li>• Nasal mass</li> </ul>	Yes	70543
 <p>THROAT</p>	<b>MRI Soft Tissue Neck</b> <b>W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Salivary Gland Lesion</li> <li>• Soft Tissue Mass</li> </ul>	Yes	70543



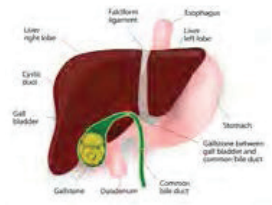

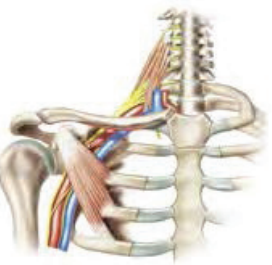

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<p align="center"><b>TMJ (Temporomandibular Joint)</b></p>	<ul style="list-style-type: none"> <li>• Cartilage injury</li> <li>• TMJ disorders</li> <li>• Jaw pain</li> <li>• Osteoarthritis</li> </ul>	<p align="center">No</p>	<p align="center">70336</p>
	<p align="center"><b>MRANeck W &amp; W/O</b></p>	<ul style="list-style-type: none"> <li>• Carotid Stenosis</li> <li>• Vertebral Artery Injury</li> <li>• Atherosclerotic Disease</li> <li>• CVA / TIA</li> </ul>	<p align="center">Yes</p>	<p align="center">70549</p>
	<p align="center"><b>MRI Cervical Spine W/O</b></p>	<ul style="list-style-type: none"> <li>• Neck Pain (cervicalgia)</li> <li>• Herniated disk</li> <li>• Arm tingling / numbness or weakness</li> <li>• Arm pain</li> <li>• Cervical Radiculopathy</li> <li>• Stenosis</li> <li>• Arthropathy</li> <li>• Post surgery</li> </ul>	<p align="center">No</p>	<p align="center">72141</p>


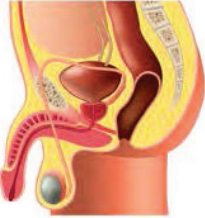

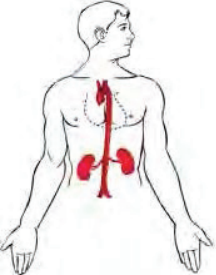
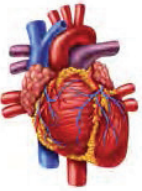
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	<b>MRI Cervical W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Infection / Abscess MS</li> <li>• Hemiplegia / Parathesia</li> <li>• Myelopathy</li> <li>• Syrinx</li> <li>• Tumor</li> <li>• Cancer or Metastasis</li> </ul>	Yes	72156
	<b>MRI Thoracic Spine W/O</b>	<ul style="list-style-type: none"> <li>• Upper / Mid back pain</li> <li>• Compression fracture</li> <li>• Osteoporosis</li> <li>• Herniated disk</li> <li>• Stenosis</li> <li>• Radiculitis or Radiculopathy</li> <li>• Post surgery</li> </ul>	No	72146
	<b>MRI Thoracic Spine W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Infection / Abscess</li> <li>• MS</li> <li>• Transverse Myelitis Syrinx</li> <li>• Cancer or Metastasis</li> </ul>	Yes	72157
	<b>MRI Lumbar Spine W/O</b>	<ul style="list-style-type: none"> <li>• Low back pain (lumbago)</li> <li>• Herniated disk</li> <li>• Lumbar Radiculopathy</li> <li>• Lumbar Radiculitis</li> <li>• Lower Extremity</li> <li>• Numbness</li> <li>• Tingling</li> <li>• Weakness</li> <li>• Myelopathy</li> <li>• Loss of bowel or bladder control</li> <li>• Spinal Stenosis</li> <li>• Cancer or Metastasis</li> <li>• Cauda Equina Syndrome</li> </ul>	No	72148
	<b>MRI Thoracic Spine W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Infection / Abscess</li> <li>• Mass</li> <li>• Previous Lumbar Surgery within past 15 years</li> <li>• Discitis</li> </ul>	Yes	72158

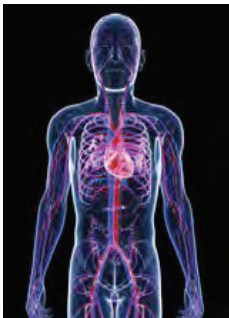


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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<p><b>MRI Abdomen W/O (MRCP)</b></p>	<ul style="list-style-type: none"> <li>• Biliary tract</li> <li>• Common bile duct</li> <li>• Gallbladder stones</li> </ul>	<p>No</p>	<p>74181</p>
	<p><b>MRI Abdomen W &amp; W/O</b></p>	<ul style="list-style-type: none"> <li>• Liver Pathology</li> <li>• Kidney Pathology</li> <li>• Adrenal Pathology</li> <li>• Splenic Pathology</li> <li>• Pancreatic Pathology</li> <li>• Abdominal pain</li> </ul>	<p>No</p>	<p>74183</p>
	<p><b>MRI Brachial Plexus W &amp; W/O</b></p>	<ul style="list-style-type: none"> <li>• Neurogenic Tumor of Brachial Plexus</li> <li>• Injury to brachial plexus</li> <li>• Brachial Plexopathy</li> <li>• Peripheral Neuropathy</li> </ul>	<p>Yes</p>	<p>70543</p>
	<p><b>MRI Chest W &amp; W/O</b></p>	<ul style="list-style-type: none"> <li>• CT suggested for most evaluations of chest</li> <li>• MRI done for soft tissue masses in chest and mediastinum area</li> </ul>	<p>Yes</p>	<p>71552</p>

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<b>MRI Pelvis W/O</b>	<ul style="list-style-type: none"> <li>• SI Joint pain</li> <li>• Pelvis fracture</li> <li>• Sacral and or coccyx disorders Metastasis to bone</li> <li>• Avascular necrosis bilateral hips</li> </ul>	No	72195
 	<b>MRI Pelvis W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Ovarian or Uterine Pathology Fibroid tumors</li> <li>• Bladder Pathology</li> <li>• Retal Cancer</li> <li>• Anal Cancer</li> <li>• Anal Fistulas</li> </ul>	Yes	72197
	<b>MRA Abdomen W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Renal artery stenosis</li> <li>• Hypertension</li> <li>• Bowel Ischemia</li> <li>• Atherosclerotic disease</li> </ul>	Yes	74185
	<b>MRA Chest W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Aortic dissection / aneurysm</li> <li>• Anomalies</li> <li>• Subclavian steal</li> </ul>	Yes	71555

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<b>MRA Abdomen / Pelvis / Bilateral Lower Extremities (Run Off) W &amp; W/O</b>	<ul style="list-style-type: none"> <li>• Claudication</li> <li>• Visualization of Aorta, Bifurcation and lower Extremities</li> <li>• Arterial Stenosis</li> <li>• PAD (Peripheral Artery Disease)</li> </ul>	Yes	72198 73725 73725
	<b>MRI Upper Extremity W/O Humerus, Forearm, Hand, Finger</b>	<ul style="list-style-type: none"> <li>• Pain</li> <li>• Decreased range of motion</li> <li>• AVN</li> <li>• Muscle/ligament tear</li> <li>• Injury</li> <li>• Internal derangement</li> <li>• Swelling</li> <li>• Arthritis</li> <li>• Tendonitis</li> </ul>	No	73218
	<b>MRI Upper Extremity W/O Humerus, Forearm, Hand, Finger</b>	<ul style="list-style-type: none"> <li>• Cancer</li> <li>• Tumors</li> <li>• Infection</li> <li>• Abscess</li> <li>• Masses or soft tissue lumps</li> </ul>	Yes	73220
	<b>MRI Upper Extremity Joint W/O Shoulder, Elbow or Wrist</b>	<ul style="list-style-type: none"> <li>• Pain</li> <li>• Decreased range of motion</li> <li>• AVN</li> <li>• Muscle/ligament tear</li> <li>• Injury</li> <li>• Internal derangement</li> <li>• Swelling</li> <li>• Arthritis</li> <li>• Tendonitis</li> </ul>	No	73221
	<b>MRI Upper Extremity Joint W &amp; W/O Shoulder, Elbow or Wrist</b>	<ul style="list-style-type: none"> <li>• Cancer</li> <li>• Tumors</li> <li>• Infection</li> <li>• Abscess</li> <li>• Masses or soft tissue lumps</li> </ul>	Yes	73223



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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<b>MRI Lower Extremity W/O Femur, Tib/Fib or Foot</b>	<ul style="list-style-type: none"> <li>• Pain</li> <li>• Decreased range of motion</li> <li>• AVN</li> <li>• Muscle/ligament tear</li> <li>• Injury</li> <li>• Internal derangement</li> <li>• Swelling</li> <li>• Arthritis</li> <li>• Tendonitis</li> </ul>	No	73718
	<b>MRI Lower Extremity W &amp; W/O Femur, Tib/Fib or Foot</b>	<ul style="list-style-type: none"> <li>• Cancer</li> <li>• Tumors</li> <li>• Infection</li> <li>• Osteomyelitis</li> <li>• Abscess</li> <li>• Masses or soft tissue lumps</li> </ul>	Yes	73720
 	<b>MRI Lower Extremity Joint W/O Knee, Hip or Ankle</b>	<ul style="list-style-type: none"> <li>• Pain</li> <li>• Decreased range of motion</li> <li>• AVN</li> <li>• Muscle/ligament tear</li> <li>• Injury</li> <li>• Internal derangement</li> <li>• Swelling</li> <li>• Arthritis</li> <li>• Tendonitis</li> </ul>	No	73721
		<b>MRI Lower Extremity Joint W &amp; W/O Knee, Hip or Ankle</b>	<ul style="list-style-type: none"> <li>• Cancer</li> <li>• Tumors</li> <li>• Infection</li> <li>• Osteomyelitis</li> <li>• Abscess</li> <li>• Masses or soft tissue lumps</li> </ul>	Yes

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IMAGE	BODY PART(S)	REASON FOR EXAM	IV CONTRAST	CPT CODE
	<p><b>MRI Arthrogram (Special Exam)</b> Shoulder, Hip, Elbow or Wrist</p> <p><b>MRI Upper or Lower Extremity Joint with Contrast</b></p>	<ul style="list-style-type: none"> <li>• This should be ordered as a <b>two part</b> test</li> <li>• X-ray to be done first MRI to follow</li> <li>• Pain</li> <li>• Labral Tears</li> </ul>	<ul style="list-style-type: none"> <li>• No IV contrast</li> <li>• Contrast goes into joint</li> </ul>	<p>73222 or 73722</p>



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This guide is intended as a general tool for the selection of appropriate care. Given the individual needs of patients, careful correlation with clinical information is needed. As always, consultation with your local radiologist can provide valuable guidance.

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