

2010 - 2011 Published Tariffs

RADIOLOGY

Tariff Code	Tariff Description	Tariff Amount
00110	X-ray skeletal survey under five years	372.0
00115	X-ray skeletal survey over five years	618.0
00120	X-ray sinogram any region	647.0
00130	X-ray with mobile unit in other facility	112.9
00135	X-ray control view in theatre any region	312.5
00140	X-ray fluoroscopy any region	134.3
	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.	
00145	X-ray fluoroscopy guidance for biopsy, any region Add to the procedure eg. 80600, 80605, 80610.	314.9
00150	X-ray C-Arm (equipment fee only, not procedure) per half hour Only to be used if equipment is owned by the radiologist.	143.8 0.0
00155	X-ray C-arm fluoroscopy in theatre per half hour (procedure only)	136.7
00160	X-ray fixed theatre installation (equipment fee only) Only to be used if equipment is owned by the radiologist.	134.3
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	
00210	Ultrasound with mobile unit in other facility Add to the relevant ultrasound examination codes eg 10200.	109.3
00220	Ultrasound intra-operative study Covers all regions studied. Single code per operative procedure.	434.9
00230	Ultrasound guidance Comprehensive ultrasound code including regional study and guidance. Guided procedure code to be added eg. 80600, 80605, 80610.	718.9
00240	Ultrasound guidance for tissue ablation 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.	667.8
00250	Ultrasound limited Doppler study any region	386.2
00310	CT planning study for radiotherapy	1269.7
00320	CT guidance (separate procedure) Comprehensive CT code including regional study and guidance. Guided procedure code to be added eg 80600, 80605, and 80610.	1005.3
00330	CT guidance, with diagnostic procedure To be added to the diagnostic procedure code. Guided procedure code to be added eg 80600, 80605, 80610.	502.6
00340	CT guidance and monitoring for tissue ablation 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. Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	1256.6
00410	MR study of the whole body for metastases screening	4182.8
00420	MR Spectroscopy any region	1717.1
00430	MR guidance for needle replacement Comprehensive MRI code including region studied and guidance. Guided procedure code to be added eg 80600, 80605, 80610.	2528.7
00440	MR low field strength imaging of peripheral joint any region	713.0
00450	MR planning study for radiotherapy or surgical procedure	2257.7
00455	MR planning study for radiotherapy or surgical procedure, with contrast Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	2792.5
00510	Analogue monoplane screening table A machine code may be added once per complete procedure / patient visit.	2436.6

00520	Analogue monoplane table with DSA attachment	2822.2
	A machine code may be added once per complete procedure / patient visit.	
00530	Dedicated angiography suite: Analogue monoplane unit. Once off charge per patient by owner of equipment.	2822.2
	A machine code may be added once per complete procedure / patient visit.	
00540	Digital monoplane screening table	4748.4
	A machine code may be added once per complete procedure / patient visit.	
00550	Dedicated angiography suite: Digital monoplane unit. Once off charge per patient by owner of equipment.	5527.4
00560	Dedicated angiography suite: Digital bi-plane unit. Once off charge per patient by owner of equipment.	7426.9
	A machine code may be added once per complete procedure / patient visit.	
00590	Angiography and interventional examination contrast material	5000.0
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	
01010	Emergency call out fee, first case	178.2
01020	Emergency call out fee, subsequent cases same trip	118.8
	Head	
	Skull and Brain	
10100	X-ray of the skull	229.4
10110	X-ray tomography of the skull	255.5
10120	X-ray shuntogram for VP shunt	912.6
10200	Ultrasound of the brain – Neonatal	438.5
10210	Ultrasound of the brain including doppler	785.4
10220	Ultrasound of the intracranial vasculature, including B mode, pulse and colour doppler	893.6
10300	CT Brain uncontrasted	1345.8
10310	CT Brain with contrast only	1977.3
10320	CT Brain pre and post contrast	2405.1
10325	CT brain pre and post contrast for perfusion studies	2917.3
	Stand alone code may not be added to any other CT studies of the brain, except for code 10330	
10330	CT angiography of the brain	4609.4
10335	CT of the brain pre and post contrast with angiography	5817.3
10340	CT brain for cranio-stenosis including 3D	2029.6
10350	CT Brain stereotactic localisation	1150.3
10360	CT base of skull coronal high resolution study for CSF leak	2073.6
10400	MR of the brain, limited study	2588.2
10410	MR of the brain uncontrasted	3790.7
10420	MR of the brain with contrast	4511.9
10430	MR of the brain pre and post contrast	6181.6
10440	MR of the brain pre and post contrast, for perfusion studies	6383.6
10450	MR of the brain plus angiography	5478.1
10460	MR of the brain pre and post contrast plus angiography	7202.9
10470	MR angiography of the brain uncontrasted	3475.8
10480	MR angiography of the brain contrasted	4397.9
10485	MR of the brain, with diffusion studies	4693.8
10490	MR of the brain, pre and post contrast, with diffusion studies,	6573.7
10492	MR study of the brain plus angiography plus diffusion, uncontrasted	5644.5
10495	MR of the brain pre and post contrast plus angiography and diffusion	7453.0
10500	Arteriography of intracranial vessels: 1 - 2 vessels	2887.6
10510	Arteriography of intracranial vessels: 3 - 4 vessels	4891.7
10520	Arteriography of extra-cranial (non-cervical) vessels	2878.1
10530	Arteriography of intracranial and extra-cranial (non-cervical) vessels	7016.3
10540	Arteriography of intracranial vessels (4) plus 3 D rotational angiography	5797.1
10550	Arteriography of intracranial vessels (1) plus 3D rotational angiography	2215.6
10560	Venography of dural sinuses	3103.3
	Facial bones and nasal bones	
	Codes 11100 (facial bones) and 11110 (tomography) may be combined	
11100	X-ray of the facial bones	233.5
11110	X-ray tomography of the facial bones	255.5
11120	X-ray of the nasal bones	142.0
11300	CT of the facial bones	1245.3
11310	CT of the facial bones with 3D reconstructions	1806.2
11320	CT of the facial bones/soft tissue, pre and post contrast	2451.5
11400	MR of the facial soft tissue	3707.5
11410	MR of the facial soft tissue pre and post contrast	5977.1
11420	MR of the facial soft tissue plus angiography, with contrast	6553.5
11430	MR angiography of the facial soft tissue	4397.9
	Orbits, lacrimal glands and tear ducts	
	Code 12130 (tomography) may be added to 12100 or 12110 or 12120 (orbits) or 12140 (dacrocystography).	
12100	X-ray orbits less than three views	211.5
12110	X-ray of the orbits, three or more views, including foramina	314.9
12120	X-ray of the orbits for foreign body	211.5
12130	X-ray tomography of the orbits	255.5
12140	X-ray dacrocystography	665.5
12200	Ultrasound of the orbit/eye	304.8

12210	Ultrasound of the orbit/eye including doppler	651.8
12300	CT of the orbits single plane	932.8
12310	CT of the orbits, more than one plane	1223.3
12320	CT of the orbits pre and post contrast single plane	2140.7
12330	CT of the orbits pre and post contrast multiple planes	2358.8
12400	MR of the orbits	3711.1
12410	MR of the orbitae, pre and post contrast	5979.5
	Paranasal sinuses	
	Code 13120 (tomography) may be added to 13100, 13110 (paranasal sinuses), 13130 (nasopharyngeal).	
13100	X-ray of the paranasal sinuses, single view	162.8
13110	X-ray of the paranasal sinuses, two or more views	217.4
13120	X-ray tomography of the paranasal sinuses	255.5
13130	X-ray of the naso-pharyngeal soft tissue	162.8
13300	CT of the paranasal sinuses single plane, limited study	427.8
13310	CT of the paranasal sinuses, two planes, limited study	736.8
13320	CT of the paranasal sinuses, any plane, complete study	916.2
13330	CT of the paranasal sinuses, more than one plane, complete study	1234.1
13340	CT of the paranasal sinuses, any plane, complete study: pre and post contrast	2064.1
13350	CT of the paranasal sinuses, more than one plane, complete study; pre and post contrast	2436.6
13400	MR of the paranasal sinuses	3580.9
13410	MR of the paranasal sinuses, pre and post contrast	5738.9
	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.	
14100	X-ray of the mandible	217.4
14110	X-ray orthopantomogram of the jaws and teeth	241.2
14120	X-ray maxillofacial cephalometry	164.6
14130	X-ray of the teeth single quadrant	118.8
14140	X-ray of the teeth more than one quadrant	150.3
14150	X-ray of the teeth full mouth	215.1
14160	X-ray tomography of the teeth per side	191.9
14300	CT of the mandible	1323.8
14310	CT of the mandible, pre and post contrast	2451.5
14320	CT mandible with 3D reconstructions	1806.2
14330	CT for dental implants in the mandible	1631.0
14340	CT for dental implants in the maxilla	1631.0
14400	MR of the mandible/maxilla	3790.7
14410	MR of the mandible/maxilla, pre and post contrast	5860.7
	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).	
15100	X-ray temporo-mandibular joint, left	211.5
15110	X-ray temporo-mandibular joint, right	211.5
15120	X-ray tomography temporo-mandibular joint, left	255.5
15130	X-ray tomography temporo-mandibular joint, right	255.5
15140	X-ray arthrography of the temporo-mandibular joint, left	915.6
15150	X-ray arthrography of the temporo-mandibular joint, right	915.6
15200	Ultrasound temporo-mandibular joints, one or both sides	389.8
15300	CT of the temporo-mandibular joints	1508.0
15310	CT of the temporo-mandibular joints plus 3D reconstructions	2049.8
15320	CT arthrogram of the temporo-mandibular joints	2136.6
15400	MR of the temporo-mandibular joints	3790.7

15410	MR of the temporo-mandibular joints, pre and post contrast	5991.4
15420	MR arthrogram of the temporo-mandibular joints	4438.9
	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.	
16100	X-ray of the mastoids, unilateral	213.3
16110	X-ray of the mastoids, bilateral	426.6
16120	X-ray tomography of the petro-temporal bone, unilateral	255.5
16130	X-ray tomography of the petro-temporal bone, bilateral	511.0
16140	X-ray internal auditory canal, bilateral	310.7
16150	X-ray tomography of the internal auditory canal, bilateral	255.5
16300	CT of the mastoids	748.6
16310	CT of the internal auditory canal	1275.7
16320	CT of the internal auditory canal, pre and post contrast	2032.0
16330	CT of the ear structures, limited study	796.2
16340	CT of the middle and inner ear structures, high definition including all reconstructions in various planes	2575.7
16400	MR of the internal auditory canals, limited study	2588.2
16410	MR of the internal auditory canals, pre and post contrast, limited study	4095.5
16420	MR of the internal auditory canals, pre and post contrast, complete study	6098.4
16430	MR of the ear structures	3826.3
16440	MR of the ear structures, pre and post contrast	6098.4
	Sella turcica	
	Code 17100 (sella) and 17110 (tomography) may be combined.	
17100	X-ray of the sella turcica	183.0
17110	X-ray tomography of the sella turcica	255.5
17300	CT of the sella turcica/hypophysis	1036.8
17310	CT of the sella turcica/hypophysis, pre and post contrast	2510.9
17400	MR of the hypophysis	2588.2
17410	MR of the hypophysis, pre and post contrast	4398.5
	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).	
18100	X-ray of the salivary glands and ducts for calculus	168.8
18110	X-ray of the salivary ducts, open mouth for calculus	112.9
18120	X-ray sialography, per gland	836.6
18200	Ultrasound of the salivary glands/floor of the mouth	389.8
18300	CT of the salivary glands, uncontrasted	748.6
18310	CT of the salivary glands/floor of the mouth, pre and post contrast	2501.4
18320	CT sialography	1561.4
18400	MR of the salivary glands/floor of the mouth	3755.0
18410	MR of the salivary glands/floor of the mouth, pre and post contrast	5991.4
	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).	
20100	X-ray of soft tissue of the neck	162.8
20110	X-ray of the larynx including tomography	557.9
20120	X-ray laryngography	492.0
20130	X-ray evaluation of pharyngeal movement and speech by screening and / or cine with or without video recording	493.1
20200	Ultrasound of the thyroid	389.8
20210	Ultrasound of soft tissue of the neck	389.8
20220	Ultrasound of the carotid arteries, bilateral including B mode, pulsed and colour doppler	891.2
20230	Ultrasound of the entire extracranial vascular tree including carotids, vertebral and subclavian vessels with B mode, pulse and colour doppler	1297.6
20240	Ultrasound study of the venous system of the neck including pulse and colour Doppler	641.7
20300	CT of the soft tissues of the neck	1084.3
20310	CT of the soft tissues of the neck, with contrast	2266.7
20320	CT of the soft tissues of the neck, pre and post contrast	2603.0
20330	CT angiography of the extracranial vessels in the neck	4715.2
20340	CT angiography of the extracranial vessels in the neck and intracranial vessels of the brain	6387.1
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	7393.0
20400	Mr of the soft tissue of the neck	3778.8
20410	MR of the soft tissue of the neck, pre and post contrast	6062.7

20420	MR of the soft tissue of the neck and uncontrasted angiography	5501.9
20430	MR angiography of the extracranial vessels in the neck, without contrast	3541.2
20440	MR angiography of the extracranial vessels in the neck, with contrast	4397.9
20450	MR angiography of the extra and intracranial vessels with contrast	6895.1
20460	MR angiography of the intra and extra cranial vessels plus brain, without contrast	8031.1
20470	MR angiography of the intra and extra cranial vessels plus brain, with contrast	9271.7
20500	Arteriography of cervical vessels: carotid 1 - 2 vessels	2639.8
20510	Arteriography of cervical vessels: vertebral 1 - 2 vessels	3014.1
20520	Arteriography of cervical vessels: carotid and vertebral	4612.4
20530	Arteriography of aortic arch and cervical vessels	5464.4
20540	Arteriography of aortic arch, cervical and intracranial vessels	6468.6
20550	Venography of jugular and vertebral veins	2908.3
	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).	
30100	X-ray of the chest, single view	180.6
30110	X-ray of the chest two views, PA and lateral	228.2
30120	X-ray of the chest complete with additional views	251.9
30130	X-ray of the chest complete including fluoroscopy	266.2
30140	X-ray tomography of the chest	255.5
30150	X-ray of the ribs	284.6
30155	X-ray of the chest and ribs	381.5
30160	X-ray of the thoracic inlet	152.1
30170	X-ray of the sterno-clavicular joints	250.2
30175	X-ray tomography of the sterno-clavicular joint	255.5
30180	X-ray of the sternum	250.2
30185	X-ray tomography of the sternum	255.5
30200	Ultrasound of the chest wall, any region	389.8
30210	Ultrasound of the pleural space	389.8
30220	Ultrasound of the mediastinal structures	389.8
30300	CT of the chest, limited study	564.4
30310	CT of the chest uncontrasted	1580.4
30320	CT of the chest contrasted	2521.0
30330	CT of the chest, pre and post contrast	2715.2
30340	CT of the chest, limited high resolution study	665.5
30350	CT of the chest, complete high resolution study	1426.5
30355	CT of the chest, complete high resolution study with additional prone and expiratory studies	1978.5
30360	CT of the chest for pulmonary embolism	3393.8
30370	CT of the chest for pulmonary embolism with CT venography of abdomen, pelvis and lower limbs	4769.9
30400	MR of the chest	3778.8
30410	MR of the chest with uncontrasted angiography	5501.9
30420	MR of the chest, pre and post contrast	6062.7
	Oesophagus	
	Codes 31100, 31110, 31120 (swallow) include fluoroscopy (00140 may not be added).	
31100	X-ray barium swallow	392.1
31105	X-ray 3 phase dynamic contrasted swallow	748.6
31110	X-ray barium swallow, double contrast	470.5
31120	X-ray barium swallow with cinematography	598.3
	Aorta and large vessels	
	Codes 32210 and 32220 (Ivus) may be combined	
32200	Ultrasound intravascular arterial or venous assessment for intervention, once per complete procedure	249.5
32210	Ultrasound intravascular (IVUS) first vessel	501.4
32220	Ultrasound intravascular (IVUS) subsequent vessels	314.9
32300	CT angiography of the aorta and branches	4698.6
32305	CT angiography of the thoracic and abdominal aorta and branches	6268.3
32310	CT angiography of the pulmonary vasculature	4698.6

32400	MR angiography of the aorta and branches	4664.1
32410	MR angiography of the pulmonary vasculature	6254.6
32500	Arteriography of thoracic aorta	1679.1
32510	Arteriography of bronchial intercostal vessels alone	2979.6
32520	Arteriography of thoracic aorta, bronchial and intercostal vessels	4006.4
32530	Arteriography of pulmonary vessels	3759.2
32540	Arteriography of heart chambers, coronary arteries	2630.3
32550	Venography of thoracic vena cava	1686.2
32560	Venography of vena cava, azygos system	3345.7
32570	Venography patency of A-port or other central line	1166.9
	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.	
33205	Ultrasound study of the heart for foetal or paediatric cases including doppler	730.8
	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	
33200	Ultrasound study of the heart, including Doppler	487.2
33210	Ultrasound study of the heart trans-oesophageal	625.1
33220	Ultrasound intravascular imaging to guide placement of intracoronary stent once per vessel	309.0
33300	CT anatomical/functional study of the heart	2056.4
33310	CT angiography of heart vessels	4829.2
33400	MR of the heart, anatomical study	3695.6
33410	MR of the heart, anatomical and functional study	4099.7
33420	MR of the heart, pre and post contrast	6122.1
33430	MR angiography of the heart vessels	4201.2
33440	MR of the heart, anatomical, functional and coronary angiography	6347.9
	Mammogram	
	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).	
34100	X-ray mammography including ultrasound	620.3
34101	X-Ray mammography unilateral, including ultrasound	496.2
	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	
34105	X-ray mammography galactography	558.5
	Once off fee per visit. May be added to 34100	0.0
34110	X-ray mammography study for localisation	430.1
34120	X-ray stereotactic mammography – localisation	618.0
34130	X-ray stereotactic mammography – biopsy	689.3
34140	X-ray of biopsy specimen of the mamma	162.8
34150	X-ray Mammotome hand held biopsy apparatus	582.3
34200	Ultrasound study of the breast	469.3
34205	Ultrasound guided aspiration FNA/localisation of the breast	718.9
34300	Computer assisted diagnosis for mammography	83.1
34400	MR study of the breast	3719.4
34410	MR study of the breast pre and post contrast	5991.4
	Soft Tissue	
	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).	
40100	X-ray of the abdomen	197.3
40105	X-ray of the abdomen supine and erect, or decubitus	318.5
40110	X-ray of the abdomen multiple views including chest	481.3
40120	X-ray tomography of the abdomen	255.5
40140	X-ray barium meal single contrast	527.0
40143	X-ray barium meal double contrast	712.4
40147	X-ray barium meal double contrast with follow through	938.8
40150	X-ray small bowel enteroclysis (meal)	1512.1
	Code 40150 excludes duodenal intubation and 40175 (Duodenal intubation) may be added.	0.0
40153	X-ray small bowel meal follow through single contrast	1161.6
40157	X-ray small bowel meal with pneumocolon	1522.8
40160	X-ray large bowel enema single contrast	770.6

40165	X-ray large bowel enema double contrast	1166.3
40170	X-ray guided gastro oesophageal intubation	95.1
40175	X-ray guided duodenal intubation	166.4
40180	X-ray defaecogram	770.6
40190	X-ray guided reduction of intussusception	966.7
40200	Ultrasound study of the abdominal wall	329.1
40210	Ultrasound study of the whole abdomen including the pelvis	489.6
40300	CT study of the abdomen	1569.1
40310	CT study of the abdomen with contrast	2663.0
40313	CT study of the abdomen pre and post contrast	3148.4
40320	CT of the pelvis	1552.5
40323	CT of the pelvis with contrast	2821.0
40327	CT of the pelvis pre and post contrast	3200.7
40330	CT of the abdomen and pelvis	2287.5
40333	CT of the abdomen and pelvis with contrast	3693.9
40337	CT of the abdomen and pelvis pre and post contrast	4006.4
40340	CT triphasic study of the liver, abdomen and pelvis pre and post contrast	4403.3
40345	CT of the chest, abdomen and pelvis without contrast	4166.2
40350	CT of the chest, abdomen and pelvis with contrast	5249.3
40355	CT of the chest triphasic of the liver, abdomen and pelvis with contrast	5528.6
40360	CT of the base of skull to symphysis pubis with contrast	6103.7
40365	CT colonoscopy	2066.5
40400	MR of the abdomen	3837.0
40410	MR of the abdomen pre and post contrast	5991.4
40420	MR of the pelvis, soft tissue	3837.0
40430	MR of the pelvis, soft tissue, pre and post contrast	6062.7
	Code 41110, 41120 and 41130 (cholangiography) include fluoroscopy (00140 may not be added).	
41100	X-ray ERCP including screening	1122.9
41105	X-ray ERCP reporting on images done in theatre	142.6
41110	X-ray cholangiography intra-operative	502.1
41120	X-ray T-tube cholangiography post operative	834.8
41130	X-ray transhepatic percutaneous cholangiography	1921.5
41200	Ultrasound study of the upper abdomen	415.9
	Ultrasound doppler of the hepatic and splenic veins and inferior vena cava in assessment of portal venous hypertension or thrombosis	582.3
	Code 41210 is a stand alone study and may not be added to 40200, 40210, 41200 or 42200	0.0
41300	CT of the abdomen triphasic study – liver	3261.9
41400	MR study of the liver/pancreas	3848.9
41410	MR study of the liver/pancreas pre and post contrast	5991.4
41420	MRCP	2923.2
41430	MR study of the abdomen with MRCP	5524.4
41440	MR study of the abdomen pre and post contrast with MRCP	7937.9
	Renal tract	
42100	X-ray tomography of the renal tract	255.5
	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).	
42110	X-ray excretory urogram including tomography	1477.1
42115	X-ray excretory urogram including tomography with micturating study	1952.4
42120	X-ray cystography	894.2
42130	X-ray urethrography	913.2
42140	X-ray micturating cysto-urethrography	1146.7
42150	X-ray retrograde/prograde pyelography	744.5
42155	X-ray retrograde/prograde pyelography reporting on images done in theatre	143.2
42160	X-ray prograde pyelogram – percutaneous	1941.1
42200	Ultrasound study of the renal tract including bladder	440.9
42205	Ultrasound doppler for resistive index in vessels of transplanted kidney	225.7
	Code 42205 is a stand alone study and may not be added to 42200	0.0
42210	Ultrasound study of the renal arteries including Doppler	629.8
42300	CT of the renal tract for a stone	1494.3
42400	MR of the renal tract for obstruction	2792.5
42410	MR of the kidneys without contrast	3837.0
42420	MR of the kidneys pre and post contrast	6074.6
	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.	
	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)	

43100	X-ray pelvimetry single	237.7
43110	X-ray pelvimetry multiple views	344.6
43120	X-ray hystero-salpingography	595.9
43130	X-ray hystero-salpingography with introduction of contrast	803.8
43200	Ultrasound study of the pelvis transabdominal	338.7
43205	Ultrasound study of the female pelvis transvaginal	428.4
43210	Ultrasound study of the prostate transrectal	438.5
43215	Ultrasound transrectal prostate volume for brachytherapy	618.0
43220	Ultrasound study of the testes	438.5
43225	Ultrasound study for male impotence including doppler and injection of vaso constrictor	891.2
	Code 43225 is a stand alone study and may not be added to 43200, 43210, 43220 or 44200	
43230	Ultrasound guided transvaginal aspiration for ova	802.1
43240	Ultrasound guided amniocentesis	347.0
43250	Ultrasound study of the pregnant uterus, first trimester	249.5
43260	Ultrasound study of the pregnant uterus, second trimester	377.9
43270	Ultrasound study of the pregnant uterus, third trimester, first visit	377.9
43273	Ultrasound study of the pregnant uterus, third trimester, follow-up visit	249.5
43277	Ultrasound study of the pregnant uterus, multiple gestation, second or third trimester, first visit	485.4
43280	Ultrasound doppler of the umbilical cord for resistive index	225.7
	Code 43280 is a stand alone study and may not be added to the following codes: 43250, 43260, 43270, 43273 or 43277	
43300	CT pelvimetry – Topogram	390.9
43400	MR study of pelvic reproductive organs - limited study	2828.2
43405	MR study for pelvimetry	1188.3
43410	MR study of pelvic reproductive organs - complete – uncontrasted	3837.0
43420	MR study of pelvic reproductive organs - complete – pre and post contrast	6074.6
	Aorta and vessels	
	Code 44400 (MR Angiography) may be combined with 40400 (MR abdomen).	
44200	Ultrasound study of abdominal aorta and branches including doppler	1088.5
44205	Ultrasound study of the IVC and pelvic veins including Doppler	831.8
	This is a stand alone code and may not be added to 44200.	
44300	CT angiography of abdominal aorta and branches	4558.4
44305	CT angiography of the abdominal aorta and branches and pre and post contrast study of the upper abdomen	5604.0
44310	CT angiography of the pelvis	4672.4
44320	CT angiography of the abdominal aorta and pelvis	5320.0
	CT angiography of the abdominal aorta and pelvis and pre and post contrast study of the upper abdomen and pelvis	7079.3
44325	CT portogram	4420.5
44330	CT portogram	4420.5
44400	MR angiography of abdominal aorta and branches	4553.6
44500	Arteriography of abdominal aorta alone	1670.8
44503	Arteriography of aorta plus coeliac, mesenteric branches	4493.5
44505	Arteriography of aorta plus renal, adrenal branches	3743.7
44507	Arteriography of aorta plus non-visceral branches	3611.8
44510	Arteriography of coeliac, mesenteric vessels alone	3823.3
44515	Arteriography of renal, adrenal vessels alone	2940.4
44517	Arteriography of non-visceral abdominal vessels alone	3262.4
44520	Arteriography of internal and external iliac vessels alone	3370.0
44525	Venography of internal and external iliac veins alone	3690.3
44530	Corpora cavernosography	1488.9
44535	Vasography, vesciculography	1734.3
44540	Venography of inferior vena cava	1551.9
44543	Venography of hepatic veins alone	3194.7
44545	Venography of inferior vena cava and hepatic veins	4094.3
44550	Venography of lumbar azygos system alone	2607.8
44555	Venography of inferior vena cava and lumbar azygos veins	3889.3
44560	Venography of renal, adrenal veins alone	2613.7
44565	Venography of inferior vena cava and renal/adrenal veins	4063.4
44570	Venography of spermatic, ovarian veins alone	2399.8
44573	Venography of inferior vena cava, renal, spermatic, ovarian veins	4396.2
44580	Venography indirect splenoportogram	2891.8
44583	Venography direct splenoportogram	1876.9
44587	Venography transhepatic portogram	3965.9
	Soft Tissue	
	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	
	General	
	Code 50130 (Lumbar puncture) and 50140 (cisternal puncture) include fluoroscopy and introduction of contrast (00140 may not be added).	
50100	X-ray of the spine scoliosis view AP only	415.9

50105	X-ray of the spine scoliosis view AP and lateral	713.0
50110	X-ray of the spine scoliosis view AP and lateral including stress views	1101.5
50120	X-ray bone densitometry	684.5
50130	X-ray guided lumbar puncture	285.2
50140	X-ray guided cisternal puncture cisternogram	1365.4
50300	CT quantitative bone mineral density	702.9
50500	Arteriogram of the spinal column and cord, all vessels	7559.4
50510	Venography of the spinal, paraspinal veins	3472.8
	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).	
51100	X-ray of the cervical spine, stress views only	246.0
51110	X-ray of the cervical spine, one or two views	178.9
51120	X-ray of the cervical spine, more than two views	254.3
51130	X-ray of the cervical spine, more than two views including stress views	450.4
51140	X-ray Tomography cervical spine	255.5
51160	X-ray myelography of the cervical spine	1631.5
51170	X-ray discography cervical spine per level	1495.5
51300	CT of the cervical spine limited study	564.4
51310	CT of the cervical spine – regional study	826.5
51320	CT of the cervical spine – complete study	2206.1
51330	CT of the cervical spine pre and post contrast	3496.6
51340	CT myelography of the cervical spine	2803.8
51350	CT myelography of the cervical spine following myelogram	1288.7
51400	MR of the cervical spine, limited study	2638.0
51410	MR of the cervical spine and cranio-cervical junction	3851.3
51420	MR of the cervical spine and cranio-cervical junction pre and post contrast	6068.7
	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).	
52100	X-ray of the thoracic spine, one or two views	190.7
52110	X-ray of the thoracic spine, more than two views	237.7
52120	X-ray tomography thoracic spine	255.5
52140	X-ray of the thoracic spine, more than two views including stress views	394.5
52150	X-ray myelography of the thoracic spine	1106.3
52300	CT of the thoracic spine limited study	564.4
52305	CT of the thoracic spine – regional study	826.5
52310	CT of the thoracic spine complete study	2125.9
52320	CT of the thoracic spine pre and post contrast	3496.6
52330	CT myelography of the thoracic spine	2857.3
52340	CT myelography of the thoracic spine following myelogram	1210.3
52400	MR of the thoracic spine, limited study	2768.8
52410	MR of the thoracic spine	3822.8
52420	MR of the thoracic spine pre and post contrast	6025.9
	Lumbar	

	<p>Code 53100 (stress) is a stand alone study and may not be added to 53110, 53120 (lumbar spine), 53160 (myelography) and 53170 (discography).</p> <p>Code 53140 (tomography) may be combined with 53110 or 53120 (spine).</p> <p>Codes 53160 (myelography) and 53170 (discography) include fluoroscopy and introduction of contrast (00140 may not be added).</p> <p>Code 53300 (CT) limited study – limited to a single lumbar vertebral body.</p> <p>Code 53310 (CT) regional study - 2 vertebral bodies and intervertebral disc spaces.</p> <p>Code 53320 (CT) complete study - an extensive study of the lumbar spine.</p> <p>Code 53340 (CT myelography) - post myelographic study and includes all disc levels, fluoroscopy and introduction of contrast (00140 may not be added).</p>	
53100	X-ray of the lumbar spine – stress study only	246.0
53110	X-ray of the lumbar spine, one or two views	211.5
53120	X-ray of the lumbar spine, more than two views	265.0
53130	X-ray of the lumbar spine, more than two views including stress views	446.8
53140	X-ray tomography lumbar spine	255.5
53160	X-ray myelography of the lumbar spine	1422.4
53170	X-ray discography lumbar spine per level	1495.5
53300	CT of the lumbar spine limited study	564.4
53310	CT of the lumbar spine – regional study	826.5
53320	CT of the lumbar spine complete study	2236.4
53330	CT of the lumbar spine pre and post contrast	3496.6
53340	CT myelography of the lumbar spine	2917.9
53350	CT myelography of the lumbar spine following myelogram	1393.9
53400	MR of the lumbar spine, limited study	2745.0
53410	MR of the lumbar spine	3821.6
53420	MR of the lumbar spine pre and post contrast	6137.0
	Sacrum	
	<p>Code 54120 (tomography) may be combined with 54100 (sacrum) or 54110 (SI joints).</p> <p>Code 54300 (CT) limited study - limited to single sacral vertebral body.</p> <p>Code 54310 (CT) complete study - an extensive study of the sacral spine.</p>	
54100	X-ray of the sacrum and coccyx	212.7
54110	X-ray of the sacro-iliac joints	243.6
54120	X-ray tomography – sacrum and/or coccyx	255.5
54300	CT of the sacrum – limited study	451.6
54310	CT of the sacrum – complete study – uncontrasted	1521.6
54320	CT of the sacrum with contrast	2788.4
54330	CT of the sacrum pre and post contrast	3147.2
54400	MR of the sacrum	3862.0
54410	MR of the sacrum pre and post contrast	6003.3
	Pelvis	
	<p>Codes 55110 (tomography) and 55100 (pelvis) may be combined.</p> <p>Code 55300 (CT) limited study – limited to a small region of interest of the pelvis eg. acetabular roof or pubic ramus.</p>	
55100	X-ray of the pelvis	217.4
55110	X-ray tomography – pelvis	255.5
55300	CT of the bony pelvis limited	564.4
55310	CT of the bony pelvis complete uncontrasted	1521.6
55320	CT of the bony pelvis complete 3D recon	2226.3
55330	CT of the bony pelvis with contrast	2788.4
55340	CT of the bony pelvis – pre and post contrast	3147.2
55400	MR of the bony pelvis	3862.0
55410	MR of the bony pelvis pre and post contrast	6074.6
	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.	
56100	X-ray of the left hip	188.9
56110	X-ray of the right hip	188.9
56120	X-ray pelvis and hips	357.7
56130	X-ray tomography – hip	255.5
56140	X-ray of the hip/s – stress study	260.2
56150	X-ray arthrography of the hip joint including introduction contrast	935.8
56160	X-ray guidance and introduction of contrast into hip joint only	440.3
56200	Ultrasound of the hip joints	386.2
56300	CT of hip – limited	564.4
56310	CT of hip – complete	1626.2
56320	CT of hip – complete with 3D recon	2363.5
56330	CT of hip with contrast	2570.3
56340	CT of hip pre and post contrast	2844.8
56400	MR of the hip joint/s, limited study	2667.7
56410	MR of the hip joint/s	3808.5
56420	MR of the hip joint/s, pre and post contrast	6039.0
	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.	
60100	X-ray upper limbs - any region - stress studies only	268.6
60110	X-ray upper limbs - any region – tomography	255.5
60200	Ultrasound upper limb – soft tissue - any region	438.5
60210	Ultrasound of the peripheral arterial system of the left arm including B mode, pulse and colour doppler	810.4
60220	Ultrasound of the peripheral arterial system of the right arm including B mode, pulse and colour doppler	810.4
60230	Ultrasound peripheral venous system upper limbs including pulse and colour doppler for deep vein thrombosis	745.0
60240	Ultrasound peripheral venous system upper limbs including pulse and colour doppler	1025.5
60300	CT of the upper limbs limited study	564.4
60310	CT angiography of the upper limb	4651.0
60400	MR of the upper limbs limited study, any region	2661.8
60410	MR angiography of the upper limb	4435.9
60500	Arteriogram of subclavian, upper limb arteries alone, unilateral	2713.5
60510	Arteriogram of subclavian, upper limb arteries alone, bilateral	4911.8
60520	Arteriogram of aortic arch, subclavian, upper limb, unilateral	3371.8
60530	Arteriogram of aortic arch, subclavian, upper limb, bilateral	5235.1
60540	Venography, antegrade of upper limb veins, unilateral	1551.9
60550	Venography, antegrade of upper limb veins, bilateral	2936.9
60560	Venography, retrograde of upper limb veins, unilateral	1842.5
60570	Venography, retrograde of upper limb veins, bilateral	3256.5
60580	Venography, shuntogram, dialysis access shunt	1413.5
	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.	
61100	X-ray of the left clavicle	180.6
61105	X-ray of the right clavicle	180.6
61110	X-ray of the left scapula	180.6
61115	X-ray of the right scapula	180.6
61120	X-ray of the left acromio-clavicular joint	186.5
61125	X-ray of the right acromio-clavicular joint	186.5

61128	X-ray of acromio-clavicular joints plus stress studies bilateral	456.3
61130	X-ray of the left shoulder	206.8
61135	X-ray of the right shoulder	206.8
61140	X-ray of the left shoulder plus subacromial impingement views	351.7
61145	X-ray of the right shoulder plus subacromial impingement views	351.7
61150	X-ray of the left subacromial impingement views only	192.5
61155	X-ray of the right subacromial impingement views only	192.5
61160	X-ray arthrography shoulder joint including introduction of contrast	940.5
61170	X-ray guidance and introduction of contrast into shoulder joint only	440.3
61200	Ultrasound of the left shoulder joint	386.2
61210	Ultrasound of the right shoulder joint	386.2
61300	CT of the left shoulder joint – uncontrasted	1447.3
61305	CT of the right shoulder joint – uncontrasted	1447.3
61310	CT of the left shoulder – complete with 3D recon	2237.6
61315	CT of the right shoulder – complete with 3D recon	2237.6
61320	CT of the left shoulder joint - pre and post contrast	2889.4
61325	CT of the right shoulder joint - pre and post contrast	2889.4
61400	MR of the left shoulder	3840.6
61405	MR of the right shoulder	3840.6
61410	MR of the left shoulder pre and post contrast	6003.3
61415	MR of the right shoulder pre and post contrast	6003.3
	Humerus	
62100	X-ray of the left humerus	174.7
62105	X-ray of the right humerus	174.7
62300	CT of the left upper arm	1447.3
62305	CT of the right upper arm	1447.3
62310	CT of the left upper arm contrasted	2374.8
62315	CT of the right upper arm contrasted	2374.8
62320	CT of the left upper arm pre and post contrast	2886.4
62325	CT of the right upper arm pre and post contrast	2886.4
62400	MR of the left upper arm	3814.5
62405	MR of the right upper arm	3814.5
62410	MR of the left upper arm pre and post contrast	6062.7
62415	MR of the right upper arm pre and post contrast	6062.7
	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.	
63100	X-ray of the left elbow	186.5
63105	X-ray of the right elbow	186.5
63110	X-ray of the left elbow with stress	257.8
63115	X-ray of the right elbow with stress	257.8
63120	X-ray arthrography elbow joint including introduction of contrast	944.1
63130	X-ray guidance and introduction of contrast into elbow joint only	440.3
63200	Ultrasound of the left elbow joint	386.2
63205	Ultrasound of the right elbow joint	386.2
63300	CT of the left elbow	1447.3
63305	CT of the right elbow	1447.3
63310	CT of the left elbow – complete with 3D recon	2237.6
63315	CT of the right elbow – complete with 3D recon	2237.6
63320	CT of the left elbow contrasted	2374.8
63325	CT of the right elbow contrasted	2374.8
63330	CT of the left elbow pre and post contrast	2889.4
63335	CT of the right elbow pre and post contrast	2889.4
63400	MR of the left elbow	3840.6
63405	MR of the right elbow	3840.6
63410	MR of the left elbow pre and post contrast	6003.3
63415	MR of the right elbow pre and post contrast	6003.3
	Forearm	
64100	X-ray of the left forearm	174.7
64105	X-ray of the right forearm	174.7
64110	X-ray peripheral bone densitometry	116.4
64300	CT of the left forearm	1447.3
64305	CT of the right forearm	1447.3
64310	CT of the left forearm contrasted	2374.8
64315	CT of the right forearm contrasted	2374.8
64320	CT of the left forearm pre and post contrast	2886.4
64325	CT of the right forearm pre and post contrast	2886.4
64400	MR of the left forearm	3814.5

64405	MR of the right forearm	3814.5
64410	MR of the left forearm pre and post contrast	5825.1
64415	MR of the right forearm pre and post contrast	5825.1
	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.	
65100	X-ray of the left hand	183.0
65105	X-ray of the right hand	183.0
65110	X-ray of the left hand – bone age	183.0
65120	X-ray of a finger	158.6
65130	X-ray of the left wrist	188.9
65135	X-ray of the right wrist	188.9
65140	X-ray of the left scaphoid	196.1
65145	X-ray of the right scaphoid	196.1
65150	X-ray of the left wrist, scaphoid and stress views	449.2
65155	X-ray of the right wrist, scaphoid and stress views	449.2
65160	X-ray arthrography wrist joint including introduction of contrast	946.5
65170	X-ray guidance and introduction of contrast into wrist joint only	440.3
65200	Ultrasound of the left wrist	386.2
65210	Ultrasound of the right wrist	386.2
65300	CT of the left wrist and hand	1447.3
65305	CT of the right wrist and hand	1447.3
65310	CT of the left wrist and hand - complete with 3D recon	2237.6
65315	CT of the right wrist and hand - complete with 3D recon	2237.6
65320	CT of the left wrist and hand contrasted	2374.8
65325	CT of the right wrist and hand contrasted	2374.8
65330	CT of the left wrist and hand pre and post contrast	2889.4
65335	CT of the right wrist and hand pre and post contrast	2889.4
65400	MR of the left wrist and hand	3840.6
65405	MR of the right wrist and hand	3840.6
65410	MR of the left wrist and hand pre and post contrast	6003.3
65415	MR of the right wrist and hand pre and post contrast	6003.3
	Soft Tissue	
	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.	
70100	X-ray lower limbs - any region- stress studies only	268.6
70110	X-ray lower limbs - any region-tomography	255.5
70120	X-ray of the lower limbs full length study	383.8
70200	Ultrasound lower limb – soft tissue - any region	438.5
70210	Ultrasound of the peripheral arterial system of the left leg including B mode, pulse and colour Doppler	810.4
70220	Ultrasound of the peripheral arterial system of the right leg including B mode, pulse and colour Doppler	810.4
70230	Ultrasound peripheral venous system lower limbs including pulse and colour doppler for deep vein thrombosis	810.4
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	1168.1
70300	CT of the lower limbs limited study	564.4
70310	CT angiography of the lower limb	4719.4
70320	CT angiography abdominal aorta and outflow lower limbs	5842.9
70400	MR of the lower limbs limited study	2756.8

70410	MR angiography of the lower limb	4554.8
70420	MR angiography of the abdominal aorta and lower limbs	7062.1
70500	Angiography of pelvic and lower limb arteries unilateral	2411.6
70505	Angiography of pelvic and lower limb arteries bilateral	4510.8
70510	Angiography of abdominal aorta, pelvic and lower limb vessels unilateral	3638.0
70515	Angiography of abdominal aorta, pelvic and lower limb vessels bilateral	5089.5
70520	Angiography translumbar aorta with full peripheral study	2714.1
70530	Venography, antegrade of lower limb veins, unilateral	1512.7
70535	Venography, antegrade of lower limb veins, bilateral	2936.9
70540	Venography, retrograde of lower limb veins, unilateral	1851.9
70545	Venography, retrograde of lower limb veins, bilateral	3374.2
70560	Lymphangiography, lower limb, unilateral	3032.5
70565	Lymphangiography, lower limb, bilateral	4989.1
	Femur	
71100	X-ray of the left femur	174.7
71105	X-ray of the right femur	174.7
71300	CT of the left femur	1456.8
71305	CT of the right femur	1456.8
71310	CT of the left upper leg contrasted	2485.3
71315	CT of the right upper leg contrasted	2485.3
71320	CT of the left upper leg pre and post contrast	2953.5
71325	CT of the right upper leg pre and post contrast	2953.5
71400	MR of the left upper leg	3850.1
71405	MR of the right upper leg	3850.1
71410	MR of the left upper leg pre and post contrast	6062.7
71415	MR of the right upper leg pre and post contrast	6062.7
	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.	
72100	X-ray of the left knee one or two views	164.6
72105	X-ray of the right knee one or two views	164.6
72110	X-ray of the left knee, more than two views	197.3
72115	X-ray of the right knee, more than two views	197.3
72120	X-ray of the left knee including patella	274.5
72125	X-ray of the right knee including patella	274.5
72130	X-ray of the left knee with stress views	345.8
72135	X-ray of the right knee with stress views	345.8
72140	X-ray of left patella	164.6
72145	X-ray of right patella	164.6
72150	X-ray both knees standing – single view	166.4
72160	X-ray arthrography knee joint including introduction of contrast	939.3
72170	X-ray guidance and introduction of contrast into knee joint only	440.3
72200	Ultrasound of the left knee joint	386.2
72205	Ultrasound of the right knee joint	386.2
72300	CT of the left knee	1456.8
72305	CT of the right knee	1456.8
72310	CT of the left knee complete study with 3D reconstructions	2134.8
72315	CT of the right knee complete study with 3D reconstructions	2134.8
72320	CT of the left knee contrasted	2485.3
72325	CT of the right knee contrasted	2485.3
72330	CT of the left knee pre and post contrast	2956.5
72335	CT of the right knee pre and post contrast	2956.5
72400	MR of the left knee	3808.5
72405	MR of the right knee	3808.5
72410	MR of the left knee pre and post contrast	5991.4
72415	MR of the right knee pre and post contrast	5991.4
	Lower Leg	
73100	X-ray of the left lower leg	174.7
73105	X-ray of the right lower leg	174.7
73300	CT of the left lower leg	1456.8
73305	CT of the right lower leg	1456.8
73310	CT of the left lower leg contrasted	2485.3
73315	CT of the right lower leg contrasted	2485.3
73320	CT of the left lower leg pre and post contrast	2953.5
73325	CT of the right lower leg pre and post contrast	2953.5

73400	MR of the left lower leg	3814.5
73405	MR of the right lower leg	3814.5
73410	MR of the left lower leg pre and post contrast	6062.7
73415	MR of the right lower leg pre and post contrast	6062.7
	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.	
74100	X-ray of the left ankle	197.3
74105	X-ray of the right ankle	197.3
74110	X-ray of the left ankle with stress views	268.6
74115	X-ray of the right ankle with stress views	268.6
74120	X-ray of the left foot	166.4
74125	X-ray of the right foot	166.4
74130	X-ray of the left calcaneus	162.8
74135	X-ray of the right calcaneus	162.8
74140	X-ray of both feet – standing – single view	166.4
74145	X-ray of a toe	158.6
74150	X-ray of the sesamoid bones one or both sides	166.4
74160	X-ray arthrography ankle joint including introduction of contrast	945.3
74170	X-ray guidance and introduction of contrast into ankle joint	440.3
74210	Ultrasound of the left ankle	386.2
74215	Ultrasound of the right ankle	386.2
74220	Ultrasound of the left foot	386.2
74225	Ultrasound of the right foot	386.2
74290	Ultrasound bone densitometry	121.2
74300	CT of the left ankle/foot	1456.8
74305	CT of the right ankle/foot	1456.8
74310	CT of the left ankle/foot – complete with 3D recon	2246.5
74315	CT of the right ankle/foot – complete with 3D recon	2246.5
74320	CT of the left ankle/foot contrasted	2485.3
74325	CT of the right ankle/foot contrasted	2485.3
74330	CT of the left ankle/foot pre and post contrast	2953.5
74335	CT of the right ankle/foot pre and post contrast	2953.5
74400	MR of the left ankle	3808.5
74405	MR of the right ankle	3808.5
74410	MR of the left ankle pre and post contrast	5979.5
74415	MR of the right ankle pre and post contrast	5979.5
74420	MR of the left foot	3814.5
74425	MR of the right foot	3814.5
74430	MR of the left foot pre and post contrast	6062.7
74435	MR of the right foot pre and post contrast	6062.7
	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.	
80600	Percutaneous abscess, cyst drainage, any region	556.7
80605	Fine needle aspiration biopsy, any region	250.7
80610	Cutting needle, trochar biopsy, any region	377.9
80620	Tumour/cyst ablation chemical	1507.3
80630	Tumour ablation radio frequency, per lesion	1260.2
80640	Insertion of CVP line in radiology suite	534.2
80645	Peripheral central venous line insertion	720.1

80650	Infiltration of a peripheral joint, any region	380.3
	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.	
	Neuro intervention	
81600	Intracranial aneurysm occlusion, direct	12745.8
81605	Intracranial arteriovenous shunt occlusion	15140.2
81610	Dural sinus arteriovenous shunt occlusion	15705.2
81615	Extracranial arteriovenous shunt occlusion	9344.8
81620	Extracranial arterial embolisation (head and neck)	9691.8
81625	Carotidocavernous fistula occlusion	11425.0
81630	Intracranial angioplasty for stenosis, vasospasm	7541.0
81632	Intracranial stent placement (including PTA)	7945.0
81635	Temporary balloon occlusion test	4956.4
	Code 81635 does not include the relevant preceding diagnostic study and may be combined with codes 10500, 10510, 10530, 10540, 10550.	
81640	Permanent carotid or vertebral artery occlusion (including occlusion test)	10586.6
81645	Intracranial aneurysm occlusion with balloon remodelling	12854.4
81650	Intracranial aneurysm occlusion with stent assistance	13692.2
81655	Intracranial thrombolysis, catheter directed	3502.0
	Code 81655 may be combined with any of the other neuro interventional codes 81600 to 81650	
81660	Nerve block, head and neck, per level	455.1
81665	Neurolysis, head and neck, per level	1196.6
81670	Nerve block, head and neck, radio frequency, per level	1131.2
81680	Nerve block, coeliac plexus or other regions, per level	551.4
	Thorax	
82600	Chest drain insertion	524.0
82605	Trachial, bronchial stent insertion	1803.8
	Gastrointestinal	
83600	Oesophageal stent insertion	1855.0
83605	GIT balloon dilation	1447.3
83610	GIT stent insertion (non-oesophageal)	1902.5
83615	Percutaneous gastrostomy, jejunostomy	1506.8
	Hepatobiliary	
84600	Percutaneous biliary drainage, external	2018.9
84605	Percutaneous external/internal biliary drainage	2210.8
84610	Permanent biliary stent insertion	3043.3
84615	Drainage tube replacement	1201.4
84620	Percutaneous bile duct stone or foreign object removal	2969.6
84625	Percutaneous gall bladder drainage	1757.5
84630	Percutaneous gallstone removal, including drainage	4114.5
84635	Transjugular liver biopsy	1481.3
84640	Transjugular intrahepatic Portosystemic shunt	7098.3
84645	Transhepatic Portogram including venous sampling, pressure studies	4865.5
84650	Transhepatic Portogram with embolisation of varices	5989.6
84655	Percutaneous hepatic tumour ablation	931.6
84660	Percutaneous hepatic abscess, cyst drainage	784.2
84665	Hepatic chemoembolisation	3531.6
84670	Hepatic arterial infusion catheter placement	3582.7
	Urogenital	
85600	Percutaneous nephrostomy, external drainage	1780.7
85605	Percutaneous double J stent insertion including access	2425.3
85610	Percutaneous renal stone, foreign body removal including access	3968.3
85615	Percutaneous nephrostomy tract establishment	1739.1
85620	Change of nephrostomy tube	944.7
85625	Percutaneous cystostomy	981.5
85630	Urethral balloon dilatation	846.1
85635	Urethral stent insertion	1855.0
85640	Renal cyst ablation	708.2
85645	Renal abscess, cyst drainage	900.8
85655	Fallopian tube recanalisation	2677.2
	Spinal	
86600	Spinal vascular malformation embolisation	16348.6
86605	Vertebroplasty per level	1325.0
86610	Facet joint block per level, uni- or bilateral	566.8
	Code 86610 may only be billed once per level, and not per left and right side per level	
86615	Spinal nerve block per level, uni- or bilateral	484.8
86620	Epidural block	559.7
86625	Chemoneucleolysis, including discogram	1088.5
86630	Spinal nerve ablation per level	689.3

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.	
87600	Percutaneous transluminal angioplasty: aorta, IVC	3360.6
87601	Percutaneous transluminal angioplasty: iliac	3313.0
87602	Percutaneous transluminal angioplasty: femoropopliteal	3574.4
87603	Percutaneous transluminal angioplasty: subpopliteal	4357.5
87604	Percutaneous transluminal angioplasty: brachiocephalic	3987.9
87605	Percutaneous transluminal angioplasty: subclavian, axillary	3574.4
87606	Percutaneous transluminal angioplasty: extracranial carotid	4255.3
87607	Percutaneous transluminal angioplasty: extracranial vertebral	4355.1
87608	Percutaneous transluminal angioplasty: renal	5210.1
87609	Percutaneous transluminal angioplasty: coeliac, mesenteric	5210.1
87620	Aorta stent-graft placement	7174.4
87621	Stent insertion (including PTA): aorta, IVC	4389.0
87622	Stent insertion (including PTA): iliac	4537.6
87623	Stent insertion (including PTA): femoropopliteal	4632.6
87624	Stent insertion (including PTA): subpopliteal	5023.5
87625	Stent insertion (including PTA): brachiocephalic	5850.6
87626	Stent insertion (including PTA): subclavian, axillary	5150.7
87627	Stent insertion (including PTA): extracranial carotid	6356.8
87628	Stent insertion (including PTA): extracranial vertebral	5974.2
87629	Stent insertion (including PTA): renal	5857.7
87630	Stent insertion (including PTA): coeliac, mesenteric	5857.7
87631	Stent-graft placement: iliac	4537.6
87632	Stent-graft placement: femoropopliteal	4632.6
87633	Stent-graft placement: brachiocephalic	5850.6
87634	Stent-graft placement: subclavian, axillary	4917.8
87635	Stent-graft placement: extracranial carotid	7155.3
87636	Stent-graft placement: extracranial vertebral	6816.7
87637	Stent-graft placement: renal	5857.7
87638	Stent-graft placement: coeliac, mesenteric	5857.7
87650	Thrombolysis in angiography suite, per 24 hours	2722.4
	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.	
87651	Aspiration, rheolytic thrombectomy	4614.8
87652	Atherectomy, per vessel	5459.7
87653	Percutaneous tunnelled / subcutaneous arterial or venous central or other line insertion	1672.5
87654	Thrombolysis follow-up	1400.4
87655	Percutaneous sclerotherapy, vascular malformation	1253.7
87660	Embolisation, mesenteric	5967.0
87661	Embolisation, renal	5903.5
87662	Embolisation, bronchial, intercostal	6437.0
87663	Embolisation, pulmonary arteriovenous shunt	6132.8
87664	Embolisation, abdominal, other vessels	6027.1
87665	Embolisation, thoracic, other vessels	5798.9
87666	Embolisation, upper limb	5402.0
87667	Embolisation, lower limb	5474.5
87668	Embolisation, pelvis, non-uterine	6958.7
87669	Embolisation, uterus	6766.2
87670	Embolisation, spermatic, ovaria veins	5099.0
87680	Inferior vena cava filter placement	3674.3
87681	Intravascular foreign body removal	5052.0
87682	Revision of access port (tunnelled or implantable)	839.0
87683	Removal of access port (tunnelled or implantable)	660.7
87690	Superior petrosal venous sampling	4337.9
87691	Pancreatic stimulation test	5334.8
87692	Transportal venous sampling	4572.0
87693	Adrenal venous sampling	3268.4
87694	Parathyroid venous sampling	5148.9
87695	Renal venous sampling	3268.4