

Pulamed Radiology Tariffs Effective 2022-2023

	Pulamed Radiology Tariffs Effective	Units Price 2022-23
	General Codes	
00110	X-ray skeletal survey under five years	616.70
00115	X-ray skeletal survey over five years	1024.80
00120	X-ray sinogram any region	1072.80
00130	X-ray with mobile unit in other facility	187.20
00135	X-ray control view in theatre any region	518.20
00140	X-ray fluoroscopy any region	222.70
	May only be added to the examination when fluoroscopy is not included in the standard procedure code. May not be added to: <ul style="list-style-type: none"> • any angiography, venography, lymphangiography or interventional codes. • any contrasted fluoroscopy examination. 	
00145	X-ray fluoroscopy guidance for biopsy, any region	522.10
	Add to the procedure eg. 80600, 80605, 80610.	0.00
00150	X-ray C-Arm (equipment fee only, not procedure) per half hour	238.70
	Only to be used if equipment is owned by the radiologist.	0.00
00155	X-ray C-arm fluoroscopy in theatre per half hour (procedure only)	226.80
00160	X-ray fixed theatre installation (equipment fee only)	222.70
	Only to be used if equipment is owned by the radiologist.	0.00
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	0.00
00210	Ultrasound with mobile unit in other facility	181.20
	Add to the relevant ultrasound examination codes eg 10200.	0.00
00220	Ultrasound intra-operative study	721.20
	Covers all regions studied. Single code per operative procedure.	0.00
00230	Ultrasound guidance	1192.00
	Comprehensive ultrasound code including regional study and guidance. Guided procedure code to be added eg. 80600, 80605, 80610.	0.00

00240	Ultrasound guidance for tissue ablation	1107.10
	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.	0.00
00250	Ultrasound limited Doppler study any region	640.20
00310	CT planning study for radiotherapy	2105.30
00320	CT guidance (separate procedure)	1666.90
	Comprehensive CT code including regional study and guidance. Guided procedure code to be added eg 80600, 80605, and 80610.	0.00
00330	CT guidance, with diagnostic procedure	833.50
	To be added to the diagnostic procedure code. Guided procedure code to be added eg 80600, 80605, 80610.	0.00
00340	CT guidance and monitoring for tissue ablation	2083.80
	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.	0.00
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	0.00
00410	MR study of the whole body for metastases screening	6936.10
00420	MR Spectroscopy any region	2847.20
00430	MR guidance for needle replacement	4193.00
	Comprehensive MRI code including region studied and guidance. Guided procedure code to be added eg 80600, 80605, 80610.	0.00
00440	MR low field strength imaging of peripheral joint any region	1182.30
00450	MR planning study for radiotherapy or surgical procedure	3743.90
00455	MR planning study for radiotherapy or surgical procedure, with contrast	4630.50
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	0.00
00510	Analogue monoplaner screening table	4040.60
	A machine code may be added once per complete procedure / patient visit.	0.00
00520	Analogue monoplaner table with DSA attachment	4679.90
	A machine code may be added once per complete procedure / patient visit.	0.00
00530	Dedicated angiography suite: Analogue monoplaner unit. Once off charge per patient by owner of equipment.	4679.90

	A machine code may be added once per complete procedure / patient visit.	0.00
00540	Digital monoplane screening table	7874.00
	A machine code may be added once per complete procedure / patient visit.	0.00
00550	Dedicated angiography suite: Digital monoplane unit. Once off charge per patient by owner of equipment.	9165.40
00560	Dedicated angiography suite: Digital bi-plane unit. Once off charge per patient by owner of equipment.	12315.30
	A machine code may be added once per complete procedure / patient visit.	0.00
00590	Angiography and interventional examination contrast material	8291.00
	Identification code for the use of contrast with a procedure. Appropriate codes to be supplied.	0.00
01010	Emergency call out fee, first case	295.60
01020	Emergency call out fee, subsequent cases same trip	197.10
01050	Written report on study done elsewhere short	168.60
01055	Written report on study done elsewhere extensive	471.70
	Head	0.00
	Skull and Brain	0.00
10100	X-ray of the skull	380.00
10110	X-ray tomography of the skull	423.80
10120	X-ray shuntogram for VP shunt	1513.30
10200	Ultrasound of the brain – Neonatal	727.20
10210	Ultrasound of the brain including doppler	1302.30
10220	Ultrasound of the intracranial vasculature, including B mode, pulse and colour doppler	1481.80
10300	CT Brain uncontrasted	2231.30
10310	CT Brain with contrast only	3278.90
10320	CT Brain pre and post contrast	3988.10
10325	CT brain pre and post contrast for perfusion studies	4837.20
	Stand alone code may not be added to any other CT studies of the brain, except for code 10330	0.00
10330	CT angiography of the brain	7643.20
10335	CT of the brain pre and post contrast with angiography	9646.30
10340	CT brain for cranio-stenosis including 3D	3365.40
10350	CT Brain stereotactic localisation	1907.50
10360	CT base of skull coronal high resolution study for CSF leak	3438.30
10400	MR of the brain, limited study	4291.70
10410	MR of the brain uncontrasted	6285.80
10420	MR of the brain with contrast	7481.40

10430	MR of the brain pre and post contrast	10250.30
10440	MR of the brain pre and post contrast, for perfusion studies	10585.30
10450	MR of the brain plus angiography	9083.70
10460	MR of the brain pre and post contrast plus angiography	11943.90
10470	MR angiography of the brain uncontrasted	5763.70
10480	MR angiography of the brain contrasted	7292.80
10485	MR of the brain, with diffusion studies	7783.00
10490	MR of the brain, pre and post contrast, with diffusion studies,	10900.60
10492	MR study of the brain plus angiography plus diffusion, uncontrasted	9359.70
10495	MR of the brain pre and post contrast plus angiography and diffusion	12358.50
10500	Arteriography of intracranial vessels: 1 - 2 vessels	4788.30
10510	Arteriography of intracranial vessels: 3 - 4 vessels	8111.50
10520	Arteriography of extra-cranial (non-cervical) vessels	4772.70
10530	Arteriography of intracranial and extra-cranial (non-cervical) vessels	11634.40
10540	Arteriography of intracranial vessels (4) plus 3 D rotational angiography	9613.00
10550	Arteriography of intracranial vessels (1) plus 3D rotational angiography	3673.70
10560	Venography of dural sinuses	5145.80
	Facial bones and nasal bones	0.00
	Codes 11100 (facial bones) and 11110 (tomography) may be combined	0.00
11100	X-ray of the facial bones	387.10
11110	X-ray tomography of the facial bones	423.80
11120	X-ray of the nasal bones	235.20
11300	CT of the facial bones	2064.90
11310	CT of the facial bones with 3D reconstructions	2995.10
11320	CT of the facial bones/soft tissue, pre and post contrast	4065.00
11400	MR of the facial soft tissue	6148.10
11410	MR of the facial soft tissue pre and post contrast	9911.20
11420	MR of the facial soft tissue plus angiography, with contrast	10867.00
11430	MR angiography of the facial soft tissue	7292.80
	Orbits, lacrimal glands and tear ducts	0.00
	Code 12130 (tomography) may be added to 12100 or 12110 or 12120 (orbits) or 12140 (dacrocystography).	0.00
12100	X-ray orbits less than three views	350.80
12110	X-ray of the orbits, three or more views, including foramina	522.10
12120	X-ray of the orbits for foreign body	350.80

12130	X-ray tomography of the orbits	423.80
12140	X-ray dacrocystography	1103.40
12200	Ultrasound of the orbit/eye	505.60
12210	Ultrasound of the orbit/eye including doppler	1081.00
12300	CT of the orbits single plane	1546.80
12310	CT of the orbits, more than one plane	2028.50
12320	CT of the orbits pre and post contrast single plane	3550.00
12330	CT of the orbits pre and post contrast multiple planes	3911.50
12400	MR of the orbits	6153.70
12410	MR of the orbitae, pre and post contrast	9915.40
	Paranasal sinuses	0.00
	Code 13120 (tomography) may be added to 13100, 13110 (paranasal sinuses), 13130 (nasopharyngeal).	0.00
13100	X-ray of the paranasal sinuses, single view	270.10
13110	X-ray of the paranasal sinuses, two or more views	360.60
13120	X-ray tomography of the paranasal sinuses	423.80
13130	X-ray of the naso-pharyngeal soft tissue	270.10
13300	CT of the paranasal sinuses single plane, limited study	709.30
13310	CT of the paranasal sinuses, two planes, limited study	1221.80
13320	CT of the paranasal sinuses, any plane, complete study	1519.20
13330	CT of the paranasal sinuses, more than one plane, complete study	2046.20
13340	CT of the paranasal sinuses, any plane, complete study: pre and post contrast	3422.60
13350	CT of the paranasal sinuses, more than one plane, complete study; pre and post contrast	4040.60
13400	MR of the paranasal sinuses	5938.00
13410	MR of the paranasal sinuses, pre and post contrast	9516.10
	Mandible, teeth and maxilla	0.00
	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	0.00

	combined if mandible and maxilla are examined at the same visit.	
14100	X-ray of the mandible	360.60
14110	X-ray orthopantomogram of the jaws and teeth	400.20
14120	X-ray maxillofacial cephalometry	272.80
14130	X-ray of the teeth single quadrant	197.10
14140	X-ray of the teeth more than one quadrant	249.20
14150	X-ray of the teeth full mouth	356.70
14160	X-ray tomography of the teeth per side	318.30
14300	CT of the mandible	2195.00
14310	CT of the mandible, pre and post contrast	4065.00
14320	CT mandible with 3D reconstructions	2995.10
14330	CT for dental implants in the mandible	2704.40
14340	CT for dental implants in the maxilla	2704.40
14400	MR of the mandible/maxilla	6285.80
14410	MR of the mandible/maxilla, pre and post contrast	9718.30
	TM Joints	0.00
	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).	0.00
15100	X-ray temporo-mandibular joint, left	350.80
15110	X-ray temporo-mandibular joint, right	350.80
15120	X-ray tomography temporo-mandibular joint, left	423.80
15130	X-ray tomography temporo-mandibular joint, right	423.80

15140	X-ray arthrography of the tempero-mandibular joint, left	1518.20
15150	X-ray arthrography of the tempero-mandibular joint, right	1518.20
15200	Ultrasound tempero-mandibular joints, one or both sides	646.60
15300	CT of the tempero-mandibular joints	2500.50
15310	CT of the tempero-mandibular joints plus 3D reconstructions	3398.90
15320	CT arthrogram of the tempero-mandibular joints	3543.00
15400	MR of the tempero-mandibular joints	6285.80
15410	MR of the tempero-mandibular joints, pre and post contrast	9935.10
15420	MR arthrogram of the tempero-mandibular joints	7360.50
	Mastoids and internal auditory canal	0.00
	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.	0.00
16100	X-ray of the mastoids, unilateral	353.60
16110	X-ray of the mastoids, bilateral	707.50
16120	X-ray tomography of the petro-temporal bone, unilateral	423.80
16130	X-ray tomography of the petro-temporal bone, bilateral	847.00
16140	X-ray internal auditory canal, bilateral	515.20
16150	X-ray tomography of the internal auditory canal, bilateral	423.80
16300	CT of the mastoids	1241.70
16310	CT of the internal auditory canal	2115.30
16320	CT of the internal auditory canal, pre and post contrast	3369.50
16330	CT of the ear structures, limited study	1320.30
16340	CT of the middle and inner ear structures, high definition including all reconstructions in various planes	4271.00
16400	MR of the internal auditory canals, limited study	4291.70
16410	MR of the internal auditory canals, pre and post contrast, limited study	6791.20
16420	MR of the internal auditory canals, pre and post contrast, complete study	10112.30
16430	MR of the ear structures	6344.80
16440	MR of the ear structures, pre and post contrast	10112.30
	Sella turcica	0.00
	Code 17100 (sella) and 17110 (tomography) may be combined.	0.00
17100	X-ray of the sella turcica	303.50

17110	X-ray tomography of the sella turcica	423.80
17300	CT of the sella turcica/hypophysis	1719.10
17310	CT of the sella turcica/hypophysis, pre and post contrast	4163.40
17400	MR of the hypophysis	4291.70
17410	MR of the hypophysis, pre and post contrast	7293.60
	Salivary glands and floor of the mouth	0.00
	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).	0.00
18100	X-ray of the salivary glands and ducts for calculus	279.80
18110	X-ray of the salivary ducts, open mouth for calculus	187.20
18120	X-ray sialography, per gland	1387.40
18200	Ultrasound of the salivary glands/floor of the mouth	646.60
18300	CT of the salivary glands, uncontrasted	1241.70
18310	CT of the salivary glands/floor of the mouth, pre and post contrast	4148.00
18320	CT sialography	2589.30
18400	MR of the salivary glands/floor of the mouth	6226.40
18410	MR of the salivary glands/floor of the mouth, pre and post contrast	9935.10
	Neck	0.00
	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).	0.00
20100	X-ray of soft tissue of the neck	270.10
20110	X-ray of the larynx including tomography	925.20
20120	X-ray laryngography	816.10
20130	X-ray evaluation of pharyngeal movement and speech by screening and / or cine with or without video recording	817.80
20200	Ultrasound of the thyroid	646.60
20210	Ultrasound of soft tissue of the neck	646.60
20220	Ultrasound of the carotid arteries, bilateral including B mode, pulsed and colour doppler	1477.90
20230	Ultrasound of the entire extracranial vascular tree including carotids, vertebral and subclavian vessels with B mode, pulse and colour doppler	2151.70

20240	Ultrasound study of the venous system of the neck including pulse and colour Doppler	1064.20
20300	CT of the soft tissues of the neck	1798.20
20310	CT of the soft tissues of the neck, with contrast	3758.60
20320	CT of the soft tissues of the neck, pre and post contrast	4316.30
20330	CT angiography of the extracranial vessels in the neck	7818.80
20340	CT angiography of the extracranial vessels in the neck and intracranial vessels of the brain	10590.90
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	12259.10
20400	Mr of the soft tissue of the neck	6265.90
20410	MR of the soft tissue of the neck, pre and post contrast	10053.10
20420	MR of the soft tissue of the neck and uncontrasted angiography	9123.20
20430	MR angiography of the extracranial vessels in the neck, without contrast	5871.80
20440	MR angiography of the extracranial vessels in the neck, with contrast	7292.80
20450	MR angiography of the extra and intracranial vessels with contrast	11433.30
20460	MR angiography of the intra and extra cranial vessels plus brain, without contrast	13317.30
20470	MR angiography of the intra and extra cranial vessels plus brain, with contrast	15374.40
20500	Arteriography of cervical vessels: carotid 1 - 2 vessels	4377.30
20510	Arteriography of cervical vessels: vertebral 1 - 2 vessels	4998.10
20520	Arteriography of cervical vessels: carotid and vertebral	7648.40
20530	Arteriography of aortic arch and cervical vessels	9061.00
20540	Arteriography of aortic arch, cervical and intracranial vessels	10726.00
20550	Venography of jugular and vertebral veins	4822.60
	Thorax	0.00
	Chest wall, pleura, lungs and mediastinum	0.00

	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).	0.00
30100	X-ray of the chest, single view	299.30
30110	X-ray of the chest two views, PA and lateral	378.50
30120	X-ray of the chest complete with additional views	417.80
30130	X-ray of the chest complete including fluoroscopy	441.30
30140	X-ray tomography of the chest	423.80
30150	X-ray of the ribs	471.70
30155	X-ray of the chest and ribs	632.40
30160	X-ray of the thoracic inlet	252.40
30170	X-ray of the sterno-clavicular joints	414.80
30175	X-ray tomography of the sterno-clavicular joint	423.80
30180	X-ray of the sternum	414.80
30185	X-ray tomography of the sternum	423.80
30200	Ultrasound of the chest wall, any region	646.60
30210	Ultrasound of the pleural space	646.60
30220	Ultrasound of the mediastinal structures	646.60
30300	CT of the chest, limited study	935.90
30310	CT of the chest uncontrasted	2620.70
30320	CT of the chest contrasted	4180.30
30330	CT of the chest, pre and post contrast	4502.50
30340	CT of the chest, limited high resolution study	1103.40
30350	CT of the chest, complete high resolution study	2365.50

30355	CT of the chest, complete high resolution study with additonal prone and expiratory studies	3280.90
30360	CT of the chest for pulmonary embolism	5627.50
30370	CT of the chest for pulmonary embolism with CT venography of abdomen, pelvis and lower limbs	7909.60
30400	MR of the chest	6265.90
30410	MR of the chest with uncontrasted angiography	9123.20
30420	MR of the chest, pre and post contrast	10053.10
	Oesophagus	0.00
	Codes 31100, 31110, 31120 (swallow) include fluoroscopy (00140 may not be added).	0.00
31100	X-ray barium swallow	650.30
31105	Xray 3 phase dynamic contrasted swallow	1241.70
31110	X-ray barium swallow, double contrast	780.30
31120	X-ray barium swallow with cinematography	992.20
	Aorta and large vessels	0.00
	Codes 32210 and 32220 (Ivus) may be combined	0.00
32200	Ultrasound intravascular arterial or venous assessment for intervention, once per complete procedure	413.80
32210	Ultrasound intravascular (IVUS) first vessel	831.40
32220	Ultrasound intravascular (IVUS) subsequent vessels	522.10
32300	CT angiography of the aorta and branches	7791.10
32305	CT angiography of the thoracic and abdominal aorta and branches	10394.10
32310	CT angiography of the pulmonary vasculature	7791.10
32400	MR angiography of the aorta and branches	7734.10
32410	MR angiography of the pulmonary vasculature	10371.60
32500	Arteriography of thoracic aorta	2784.10
32510	Arteriography of bronchial intercostal vessels alone	4940.70
32520	Arteriography of thoracic aorta, bronchial and intercostal vessels	6643.30
32530	Arteriography of pulmonary vessels	6233.20
32540	Arteriography of heart chambers, coronary arteries	4361.40
32550	Venography of thoracic vena cava	2796.10
32560	Venography of vena cava, azygos system	5547.80
32570	Venography patency of A-port or other central line	1934.80
	Heart	0.00
	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.	0.00
33205	Ultrasound study of the heart for foetal or paediatric cases including doppler	1211.70

	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	0.00
33200	Ultrasound study of the heart, including Doppler	807.80
33210	Ultrasound study of the heart trans-oesophageal	1036.60
33220	Ultrasound intravascular imaging to guide placement of intracoronary stent once per vessel	512.10
33300	CT anatomical/functional study of the heart	3409.80
33310	CT angiography of heart vessels	8007.90
33400	MR of the heart, anatomical study	6127.90
33410	MR of the heart, anatomical and functional study	6798.30
33420	MR of the heart, pre and post contrast	10151.90
33430	MR angiography of the heart vessels	6966.20
33440	MR of the heart, anatomical, functional and coronary angiography	10526.20
	Mammogram	0.00
	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).	0.00
34100	X-ray mammography including ultrasound	1028.70
34101	X-Ray mammography unilateral, including ultrasound	822.70
	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	0.00
34105	X-ray mammography galactography	926.00
	Once off fee per visit. May be added to 34100	0.00
34110	X-ray mammography study for localisation	713.20
34120	X-ray stereotactic mammography – localisation	1024.80
34130	X-ray stereotactic mammography – biopsy	1143.00
34140	X-ray of biopsy specimen of the mamma	270.10
34150	X-ray Mammotome hand held biopsy apparatus	965.50
34200	Ultrasound study of the breast	778.10
34205	Ultrasound guided aspiration FNA/localisation of the breast	1192.00
34300	Computer assisted diagnosis for mammography	137.80
34400	MR study of the breast	6167.50
34410	MR study of the breast pre and post contrast	9935.10
	Soft Tissue	0.00

	Abdomen and Pelvis	0.00
	Abdomen/stomach/bowel	0.00
	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).	0.00
40100	X-ray of the abdomen	327.20
40105	X-ray of the abdomen supine and erect, or decubitus	528.20
40110	X-ray of the abdomen multiple views including chest	798.10
40120	X-ray tomography of the abdomen	423.80
40140	X-ray barium meal single contrast	874.10
40143	X-ray barium meal double contrast	1181.30
40147	X-ray barium meal double contrast with follow through	1556.80
40150	X-ray small bowel enteroclysis (meal)	2507.40
	Code 40150 excludes duodenal intubation and 40175 (Duodenal intubation) may be added.	0.00
40153	X-ray small bowel meal follow through single contrast	1926.10
40157	X-ray small bowel meal with pneumocolon	2525.10
40160	X-ray large bowel enema single contrast	1278.30
40165	X-ray large bowel enema double contrast	1934.10
40170	X-ray guided gastro oesophageal intubation	157.70
40175	X-ray guided duodenal intubation	275.90
40180	X-ray defaecogram	1278.30
40190	X-ray guided reduction of intussusception	1603.00
40200	Ultrasound study of the abdominal wall	545.80
40210	Ultrasound study of the whole abdomen including the pelvis	811.70
40300	CT study of the abdomen	2601.90
40310	CT study of the abdomen with contrast	4415.80
40313	CT study of the abdomen pre and post contrast	5220.80
40320	CT of the pelvis	2574.40
40323	CT of the pelvis with contrast	4677.90
40327	CT of the pelvis pre and post contrast	5307.30
40330	CT of the abdomen and pelvis	3793.10
40333	CT of the abdomen and pelvis with contrast	6125.00
40337	CT of the abdomen and pelvis pre and post contrast	6643.30
40340	CT triphasic study of the liver, abdomen and pelvis pre and post contrast	7301.60
40345	CT of the chest, abdomen and pelvis without contrast	6908.20

40350	CT of the chest, abdomen and pelvis with contrast	8704.40
40355	CT of the chest triphasic of the liver, abdomen and pelvis with contrast	9167.40
40360	CT of the base of skull to symphysis pubis with contrast	10121.30
40365	CT colonoscopy	3426.70
40400	MR of the abdomen	6362.50
40410	MR of the abdomen pre and post contrast	9935.10
40420	MR of the pelvis, soft tissue	6362.50
40430	MR of the pelvis, soft tissue, pre and post contrast	10053.10
	Code 41110, 41120 and 41130 (cholangiography) include fluoroscopy (00140 may not be added).	0.00
41100	X-ray ERCP including screening	1862.00
41105	X-ray ERCP reporting on images done in theatre	236.40
41110	X-ray cholangiography intra-operative	832.60
41120	X-ray T-tube cholangiography post operative	1384.30
41130	X-ray transhepatic percutaneous cholangiography	3186.10
41200	Ultrasound study of the upper abdomen	689.70
41210	Ultrasound doppler of the hepatic and splenic veins and inferior vena cava in assessment of portal venous hypertension or thrombosis	965.50
	Code 41210 is a stand alone study and may not be added to 40200, 40210, 41200 or 42200	0.00
41300	CT of the abdomen triphasic study – liver	5408.80
41400	MR study of the liver/pancreas	6382.30
41410	MR study of the liver/pancreas pre and post contrast	9935.10
41420	MRCP	4847.30
41430	MR study of the abdomen with MRCP	9160.80
41440	MR study of the abdomen pre and post contrast with MRCP	13162.40
	Renal tract	0.00
42100	X-ray tomography of the renal tract	423.80
	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).	0.00
42110	X-ray excretory urogram including tomography	2449.30
42115	X-ray excretory urogram including tomography with micturating study	3237.30
42120	X-ray cystography	1482.60
42130	X-ray urethrography	1514.10
42140	X-ray micturating cysto-urethrography	1901.60

42150	X-ray retrograde/prograde pyelography	1234.60
42155	X-ray retrograde/prograde pyelography reporting on images done in theatre	237.30
42160	X-ray prograde pyelogram – percutaneous	3218.70
42200	Ultrasound study of the renal tract including bladder	731.20
42205	Ultrasound doppler for resistive index in vessels of transplanted kidney	374.20
	Code 42205 is a stand alone study and may not be added to 42200	0.00
42210	Ultrasound study of the renal arteries including Doppler	1044.60
42300	CT of the renal tract for a stone	2477.70
42400	MR of the renal tract for obstruction	4630.50
42410	MR of the kidneys without contrast	6362.50
42420	MR of the kidneys pre and post contrast	10072.90
	Reproductive system	0.00
	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.	0.00
	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)	0.00
43100	X-ray pelvimetry single	394.10
43110	X-ray pelvimetry multiple views	571.30
43120	X-ray hystero-salpingography	988.20
43130	X-ray hystero-salpingography with introduction of contrast	1332.90
43200	Ultrasound study of the pelvis transabdominal	561.70
43205	Ultrasound study of the female pelvis transvaginal	710.40
43210	Ultrasound study of the prostate transrectal	727.20
43215	Ultrasound transrectal prostate volume for brachytherapy	1024.80
43220	Ultrasound study of the testes	727.20
43225	Ultrasound study for male impotence including doppler and injection of vaso constrictor	1477.90
	Code 43225 is a stand alone study and may not be added to 43200, 43210, 43220 or 44200	0.00
43230	Ultrasound guided transvaginal aspiration for ova	1329.70
43240	Ultrasound guided amniocentesis	575.30
43250	Ultrasound study of the pregnant uterus, first trimester	413.80

43260	Ultrasound study of the pregnant uterus, second trimester	626.40
43270	Ultrasound study of the pregnant uterus, third trimester, first visit	626.40
43273	Ultrasound study of the pregnant uterus, third trimester, follow-up visit	413.80
43277	Ultrasound study of the pregnant uterus, multiple gestation, second or third trimester, first visit	805.00
43280	Ultrasound doppler of the umbilical cord for resistive index	374.20
	Code 43280 is a stand alone study and may not be added to the following codes: 43250, 43260, 43270, 43273 or 43277	0.00
43300	CT pelvimetry – Topogram	648.20
43400	MR study of pelvic reproductive organs - limited study	4689.70
43405	MR study for pelvimetry	1970.60
43410	MR study of pelvic reproductive organs - complete – uncontrasted	6362.50
43420	MR study of pelvic reproductive organs - complete – pre and post contrast	10072.90
	Aorta and vessels	0.00
	Code 44400 (MR Angiography) may be combined with 40400 (MR abdomen).	0.00
44200	Ultrasound study of abdominal aorta and branches including doppler	1805.00
44205	Ultrasound study of the IVC and pelvic veins including Doppler	1379.40
	This is a stand alone code and may not be added to 44200.	0.00
44300	CT angiography of abdominal aorta and branches	7558.70
44305	CT angiography of the abdominal aorta and branches and pre and post contrast study of the upper abdomen	9292.70
44310	CT angiography of the pelvis	7748.00
44320	CT angiography of the abdominal aorta and pelvis	8821.80
44325	CT angiography of the abdominal aorta and pelvis and pre and post contrast study of the upper abdomen and pelvis	11738.90
44330	CT portogram	7329.90
44400	MR angiography of abdominal aorta and branches	7550.70
44500	Arteriography of abdominal aorta alone	2770.50
44503	Arteriography of aorta plus coeliac, mesenteric branches	7451.20
44505	Arteriography of aorta plus renal, adrenal branches	6207.90
44507	Arteriography of aorta plus non-visceral branches	5989.00
44510	Arteriography of coeliac, mesenteric vessels alone	6339.80
44515	Arteriography of renal, adrenal vessels alone	4875.60

44517	Arteriography of non-visceral abdominal vessels alone	5409.80
44520	Arteriography of internal and external iliac vessels alone	5588.10
44525	Venography of internal and external iliac veins alone	6119.30
44530	Corpora cavernosography	2469.00
44535	Vasography, vesciculography	2875.60
44540	Venography of inferior vena cava	2573.50
44543	Venography of hepatic veins alone	5297.40
44545	Venography of inferior vena cava and hepatic veins	6789.20
44550	Venography of lumbar azygos system alone	4324.30
44555	Venography of inferior vena cava and lumbar azygos veins	6449.20
44560	Venography of renal, adrenal veins alone	4333.80
44565	Venography of inferior vena cava and renal/adrenal veins	6738.10
44570	Venography of spermatic, ovarian veins alone	3979.40
44573	Venography of inferior vena cava, renal, spermatic, ovarian veins	7289.80
44580	Venography indirect splenoportogram	4795.20
44583	Venography direct splenoportogram	3112.20
44587	Venography transhepatic portogram	6576.20
	Soft Tissue	0.00
	Spine, Pelvis and Hips	0.00
	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	0.00
	General	0.00
	Code 50130 (Lumbar puncture) and 50140 (cisternal puncture) include fluoroscopy and introduction of contrast (00140 may not be added).	0.00
50100	X-ray of the spine scoliosis view AP only	689.70
50105	X-ray of the spine scoliosis view AP and lateral	1182.30
50110	X-ray of the spine scoliosis view AP and lateral including stress views	1826.70
50120	X-ray bone densitometry	1135.20
50130	X-ray guided lumbar puncture	473.20
50140	X-ray guided cisternal puncture cisternogram	2264.10
50300	CT quantitative bone mineral density	1165.40
50500	Arteriogram of the spinal column and cord, all vessels	12534.90
50510	Venography of the spinal, paraspinal veins	5758.80
	Cervical	#VALUE!

	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).	0.00
51100	X-ray of the cervical spine, stress views only	407.90
51110	X-ray of the cervical spine, one or two views	296.50
51120	X-ray of the cervical spine, more than two views	421.50
51130	X-ray of the cervical spine, more than two views including stress views	746.70
51140	X-ray Tomography cervical spine	423.80
51160	X-ray myelography of the cervical spine	2705.50
51170	X-ray discography cervical spine per level	2480.00
51300	CT of the cervical spine limited study	935.90
51310	CT of the cervical spine – regional study	1370.70
51320	CT of the cervical spine – complete study	3658.30
51330	CT of the cervical spine pre and post contrast	5798.20
51340	CT myelography of the cervical spine	4649.30
51350	CT myelography of the cervical spine following myelogram	2136.80
51400	MR of the cervical spine, limited study	4374.40
51410	MR of the cervical spine and cranio-cervical junction	6386.30
51420	MR of the cervical spine and cranio-cervical junction pre and post contrast	10062.90
	Thoracic	0.00

	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).	0.00
52100	X-ray of the thoracic spine, one or two views	316.10
52110	X-ray of the thoracic spine, more than two views	394.10
52120	X-ray tomography thoracic spine	423.80
52140	X-ray of the thoracic spine, more than two views including stress views	654.30
52150	X-ray myelography of the thoracic spine	1834.60
52300	CT of the thoracic spine limited study	935.90
52305	CT of the thoracic spine – regional study	1370.70
52310	CT of the thoracic spine complete study	3524.90
52320	CT of the thoracic spine pre and post contrast	5798.20
52330	CT myelography of the thoracic spine	4737.80
52340	CT myelography of the thoracic spine following myelogram	2006.90
52400	MR of the thoracic spine, limited study	4591.10
52410	MR of the thoracic spine	6338.90
52420	MR of the thoracic spine pre and post contrast	9992.00
	Lumbar	0.00

	<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>	0.00
53100	X-ray of the lumbar spine – stress study only	407.90
53110	X-ray of the lumbar spine, one or two views	350.80
53120	X-ray of the lumbar spine, more than two views	439.60
53130	X-ray of the lumbar spine, more than two views including stress views	740.80
53140	X-ray tomography lumbar spine	423.80
53160	X-ray myelography of the lumbar spine	2358.70
53170	X-ray discography lumbar spine per level	2480.00
53300	CT of the lumbar spine limited study	935.90
53310	CT of the lumbar spine – regional study	1370.70
53320	Ct of the lumbar spine complete study	3708.40
53330	CT of the lumbar spine pre and post contrast	5798.20
53340	CT myelography of the lumbar spine	4838.60
53350	CT myelography of the lumbar spine following myelogram	2311.50
53400	MR of the lumbar spine, limited study	4551.90
53410	MR of the lumbar spine	6336.90
53420	MR of the lumbar spine pre and post contrast	10176.40
	Sacrum	0.00
	<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>	0.00

	Code 54310 (CT) complete study - an extensive study of the sacral spine.	
54100	X-ray of the sacrum and coccyx	352.90
54110	X-ray of the sacro-iliac joints	404.00
54120	X-ray tomography – sacrum and/or coccyx	423.80
54300	CT of the sacrum – limited study	748.80
54310	CT of the sacrum – complete study – uncontrasted	2523.20
54320	CT of the sacrum with contrast	4623.50
54330	CT of the sacrum pre and post contrast	5218.80
54400	MR of the sacrum	6403.70
54410	MR of the sacrum pre and post contrast	9954.70
	Pelvis	0.00
	Codes 55110 (tomography) and 55100 (pelvis) may be combined. Code 55300 (CT) limited study – limited to a small region of interest of the pelvis eg. acetabular roof or pubic ramus.	0.00
55100	X-ray of the pelvis	360.60
55110	X-ray tomography – pelvis	423.80
55300	CT of the bony pelvis limited	935.90
55310	CT of the bony pelvis complete uncontrasted	2523.20
55320	CT of the bony pelvis complete 3D recon	3691.80
55330	CT of the bony pelvis with contrast	4623.50
55340	CT of the bony pelvis – pre and post contrast	5218.80
55400	MR of the bony pelvis	6403.70
55410	MR of the bony pelvis pre and post contrast	10072.90
	Hips	0.00
	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.	0.00

	Code 56300 (CT) study limited to small region of interest eg part of femur head.	
56100	X-ray of the left hip	313.20
56110	X-ray of the right hip	313.20
56120	X-ray pelvis and hips	593.10
56130	X-ray tomography – hip	423.80
56140	X-ray of the hip/s – stress study	431.60
56150	X-ray arthrography of the hip joint including introduction contrast	1551.90
56160	X-ray guidance and introduction of contrast into hip joint only	729.90
56200	Ultrasound of the hip joints	640.20
56300	CT of hip – limited	935.90
56310	CT of hip – complete	2696.70
56320	CT of hip – complete with 3D recon	3919.30
56330	CT of hip with contrast	4262.00
56340	CT of hip pre and post contrast	4717.20
56400	MR of the hip joint/s, limited study	4423.50
56410	MR of the hip joint/s	6315.30
56420	MR of the hip joint/s, pre and post contrast	10013.80
	Upper limbs	0.00
	General	0.00
	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.	0.00

	Code 60400 (MR limited) may only be used once per visit.	
60100	X-ray upper limbs - any region - stress studies only	445.40
60110	X-ray upper limbs - any region – tomography	423.80
60200	Ultrasound upper limb – soft tissue - any region	727.20
60210	Ultrasound of the peripheral arterial system of the left arm including B mode, pulse and colour doppler	1343.60
60220	Ultrasound of the peripheral arterial system of the right arm including B mode, pulse and colour doppler	1343.60
60230	Ultrasound peripheral venous system upper limbs including pulse and colour doppler for deep vein thrombosis	1235.40
60240	Ultrasound peripheral venous system upper limbs including pulse and colour doppler	1700.30
60300	CT of the upper limbs limited study	935.90
60310	CT angiography of the upper limb	7712.20
60400	MR of the upper limbs limited study, any region	4413.60
60410	MR angiography of the upper limb	7355.60
60500	Arteriogram of subclavian, upper limb arteries alone, unilateral	4499.40
60510	Arteriogram of subclavian, upper limb arteries alone, bilateral	8144.70
60520	Arteriogram of aortic arch, subclavian, upper limb, unilateral	5591.20
60530	Arteriogram of aortic arch, subclavian, upper limb, bilateral	8680.70
60540	Venography, antegrade of upper limb veins, unilateral	2573.50
60550	Venography, antegrade of upper limb veins, bilateral	4870.00
60560	Venography, retrograde of upper limb veins, unilateral	3055.20
60570	Venography, retrograde of upper limb veins, bilateral	5399.80
60580	Venography, shuntogram, dialysis access shunt	2343.70
	Shoulder	0.00

	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.	0.00
61100	X-ray of the left clavicle	299.30
61105	X-ray of the right clavicle	299.30
61110	X-ray of the left scapula	299.30
61115	X-ray of the right scapula	299.30
61120	X-ray of the left acromio-clavicular joint	309.30
61125	X-ray of the right acromio-clavicular joint	309.30
61128	X-ray of acromio-clavicular joints plus stress studies bilateral	756.70
61130	X-ray of the left shoulder	342.90
61135	X-ray of the right shoulder	342.90
61140	X-ray of the left shoulder plus subacromial impingement views	583.30
61145	X-ray of the right shoulder plus subacromial impingement views	583.30
61150	X-ray of the left subacromial impingement views only	319.30
61155	X-ray of the right subacromial impingement views only	319.30
61160	X-ray arthrography shoulder joint including introduction of contrast	1559.60
61170	X-ray guidance and introduction of contrast into shoulder joint only	729.90
61200	Ultrasound of the left shoulder joint	640.20
61210	Ultrasound of the right shoulder joint	640.20
61300	CT of the left shoulder joint – uncontrasted	2399.80
61305	CT of the right shoulder joint – uncontrasted	2399.80
61310	CT of the left shoulder – complete with 3D recon	3710.40
61315	CT of the right shoulder – complete with 3D recon	3710.40
61320	CT of the left shoulder joint - pre and post contrast	4791.50
61325	CT of the right shoulder joint - pre and post contrast	4791.50
61400	MR of the left shoulder	6368.50
61405	MR of the right shoulder	6368.50
61410	MR of the left shoulder pre and post contrast	9954.70
61415	MR of the right shoulder pre and post contrast	9954.70
	Humerus	0.00
62100	X-ray of the left humerus	289.70
62105	X-ray of the right humerus	289.70
62300	CT of the left upper arm	2399.80

62305	CT of the right upper arm	2399.80
62310	CT of the left upper arm contrasted	3938.00
62315	CT of the right upper arm contrasted	3938.00
62320	CT of the left upper arm pre and post contrast	4786.20
62325	CT of the right upper arm pre and post contrast	4786.20
62400	MR of the left upper arm	6325.20
62405	MR of the right upper arm	6325.20
62410	MR of the left upper arm pre and post contrast	10053.10
62415	MR of the right upper arm pre and post contrast	10053.10
	Elbow	0.00
	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.	0.00
63100	X-ray of the left elbow	309.30
63105	X-ray of the right elbow	309.30
63110	X-ray of the left elbow with stress	427.50
63115	X-ray of the right elbow with stress	427.50
63120	X-ray arthrography elbow joint including introduction of contrast	1565.60
63130	X-ray guidance and introduction of contrast into elbow joint only	729.90
63200	Ultrasound of the left elbow joint	640.20
63205	Ultrasound of the right elbow joint	640.20
63300	CT of the left elbow	2399.80
63305	CT of the right elbow	2399.80
63310	CT of the left elbow – complete with 3D recon	3710.40
63315	CT of the right elbow – complete with 3D recon	3710.40
63320	CT of the left elbow contrasted	3938.00
63325	CT of the right elbow contrasted	3938.00
63330	CT of the left elbow pre and post contrast	4791.50
63335	CT of the right elbow pre and post contrast	4791.50
63400	MR of the left elbow	6368.50
63405	MR of the right elbow	6368.50
63410	MR of the left elbow pre and post contrast	9954.70
63415	MR of the right elbow pre and post contrast	9954.70
	Forearm	0.00
64100	X-ray of the left forearm	289.70
64105	X-ray of the right forearm	289.70
64110	X-ray peripheral bone densitometry	193.10

64300	CT of the left forearm	2399.80
64305	CT of the right forearm	2399.80
64310	CT of the left forearm contrasted	3938.00
64315	CT of the right forearm contrasted	3938.00
64320	CT of the left forearm pre and post contrast	4786.20
64325	CT of the right forearm pre and post contrast	4786.20
64400	MR of the left forearm	6325.20
64405	MR of the right forearm	6325.20
64410	MR of the left forearm pre and post contrast	9659.20
64415	MR of the right forearm pre and post contrast	9659.20
	Hand and Wrist	0.00
	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.	0.00
65100	X-ray of the left hand	303.50
65105	X-ray of the right hand	303.50
65110	X-ray of the left hand – bone age	303.50
65120	X-ray of a finger	262.90
65130	X-ray of the left wrist	313.20
65135	X-ray of the right wrist	313.20
65140	X-ray of the left scaphoid	325.10
65145	X-ray of the right scaphoid	325.10
65150	X-ray of the left wrist, scaphoid and stress views	745.00
65155	X-ray of the right wrist, scaphoid and stress views	745.00
65160	X-ray arthrography wrist joint including introduction of contrast	1569.20
65170	X-ray guidance and introduction of contrast into wrist joint only	729.90
65200	Ultrasound of the left wrist	640.20
65210	Ultrasound of the right wrist	640.20
65300	CT of the left wrist and hand	2399.80
65305	CT of the right wrist and hand	2399.80
65310	CT of the left wrist and hand - complete with 3D recon	3710.40

65315	CT of the right wrist and hand - complete with 3D recon	3710.40
65320	CT of the left wrist and hand contrasted	3938.00
65325	CT of the right wrist and hand contrasted	3938.00
65330	CT of the left wrist and hand pre and post contrast	4791.50
65335	CT of the right wrist and hand pre and post contrast	4791.50
65400	MR of the left wrist and hand	6368.50
65405	MR of the right wrist and hand	6368.50
65410	MR of the left wrist and hand pre and post contrast	9954.70
65415	MR of the right wrist and hand pre and post contrast	9954.70
	Soft Tissue	0.00
	Lower Limbs	0.00
	General	0.00
	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.	0.00
70100	X-ray lower limbs - any region- stress studies only	445.40
70110	X-ray lower limbs - any region-tomography	423.80
70120	X-ray of the lower limbs full length study	636.30
70200	Ultrasound lower limb – soft tissue - any region	727.20
70210	Ultrasound of the peripheral arterial system of the left leg including B mode, pulse and colour Doppler	1343.60
70220	Ultrasound of the peripheral arterial system of the right leg including B mode, pulse and colour Doppler	1343.60
70230	Ultrasound peripheral venous system lower limbs including pulse and colour doppler for deep vein thrombosis	1343.60

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	1937.00
70300	CT of the lower limbs limited study	935.90
70310	CT angiography of the lower limb	7825.80
70320	CT angiography abdominal aorta and outflow lower limbs	9688.60
70400	MR of the lower limbs limited study	4571.60
70410	MR angiography of the lower limb	7552.80
70420	MR angiography of the abdominal aorta and lower limbs	11710.50
70500	Angiography of pelvic and lower limb arteries unilateral	3998.90
70505	Angiography of pelvic and lower limb arteries bilateral	7480.00
70510	Angiography of abdominal aorta, pelvic and lower limb vessels unilateral	6032.50
70515	Angiography of abdominal aorta, pelvic and lower limb vessels bilateral	8439.50
70520	Angiography translumbar aorta with full peripheral study	4500.50
70530	Venography, antegrade of lower limb veins, unilateral	2508.30
70535	Venography, antegrade of lower limb veins, bilateral	4870.00
70540	Venography, retrograde of lower limb veins, unilateral	3070.80
70545	Venography, retrograde of lower limb veins, bilateral	5595.10
70560	Lymphangiography, lower limb, unilateral	5028.60
70565	Lymphangiography, lower limb, bilateral	8272.90
	Femur	0.00
71100	X-ray of the left femur	289.70
71105	X-ray of the right femur	289.70
71300	CT of the left femur	2415.60
71305	CT of the right femur	2415.60
71310	CT of the left upper leg contrasted	4121.20
71315	CT of the right upper leg contrasted	4121.20
71320	CT of the left upper leg pre and post contrast	4897.80
71325	CT of the right upper leg pre and post contrast	4897.80
71400	MR of the left upper leg	6384.20
71405	MR of the right upper leg	6384.20
71410	MR of the left upper leg pre and post contrast	10053.10
71415	MR of the right upper leg pre and post contrast	10053.10
	Knee	0.00

	<p>Codes 72140 and 72145 (patella) may not be added to 72100, 72105, 72110, 72115, 72130, 72135 (knee views)</p> <p>Code 72160 (arthrography) includes fluoroscopy and introduction of contrast (00140 may not be added).</p> <p>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.</p>	0.00
72100	X-ray of the left knee one or two views	272.80
72105	X-ray of the right knee one or two views	272.80
72110	X-ray of the left knee, more than two views	327.20
72115	X-ray of the right knee, more than two views	327.20
72120	X-ray of the left knee including patella	455.10
72125	X-ray of the right knee including patella	455.10
72130	X-ray of the left knee with stress views	573.60
72135	X-ray of the right knee with stress views	573.60
72140	X-ray of left patella	272.80
72145	X-ray of right patella	272.80
72150	X-ray both knees standing – single view	275.90
72160	X-ray arthrography knee joint including introduction of contrast	1557.60
72170	X-ray guidance and introduction of contrast into knee joint only	729.90
72200	Ultrasound of the left knee joint	640.20
72205	Ultrasound of the right knee joint	640.20
72300	CT of the left knee	2415.60
72305	CT of the right knee	2415.60
72310	CT of the left knee complete study with 3D reconstructions	3540.10
72315	CT of the right knee complete study with 3D reconstructions	3540.10
72320	CT of the left knee contrasted	4121.20
72325	CT of the right knee contrasted	4121.20
72330	CT of the left knee pre and post contrast	4902.80
72335	CT of the right knee pre and post contrast	4902.80
72400	MR of the left knee	6315.30
72405	MR of the right knee	6315.30
72410	MR of the left knee pre and post contrast	9935.10
72415	MR of the right knee pre and post contrast	9935.10
	Lower Leg	0.00

73100	X-ray of the left lower leg	289.70
73105	X-ray of the right lower leg	289.70
73300	CT of the left lower leg	2415.60
73305	CT of the right lower leg	2415.60
73310	CT of the left lower leg contrasted	4121.20
73315	CT of the right lower leg contrasted	4121.20
73320	CT of the left lower leg pre and post contrast	4897.80
73325	CT of the right lower leg pre and post contrast	4897.80
73400	MR of the left lower leg	6325.20
73405	MR of the right lower leg	6325.20
73410	MR of the left lower leg pre and post contrast	10053.10
73415	MR of the right lower leg pre and post contrast	10053.10
	Ankle and Foot	0.00
	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.	0.00
74100	X-ray of the left ankle	327.20
74105	X-ray of the right ankle	327.20
74110	X-ray of the left ankle with stress views	445.40
74115	X-ray of the right ankle with stress views	445.40
74120	X-ray of the left foot	275.90
74125	X-ray of the right foot	275.90
74130	X-ray of the left calcaneus	270.10
74135	X-ray of the right calcaneus	270.10
74140	X-ray of both feet – standing – single view	275.90
74145	X-ray of a toe	262.90
74150	X-ray of the sesamoid bones one or both sides	275.90
74160	X-ray arthrography ankle joint including introduction of contrast	1567.70

74170	X-ray guidance and introduction of contrast into ankle joint	729.90
74210	Ultrasound of the left ankle	640.20
74215	Ultrasound of the right ankle	640.20
74220	Ultrasound of the left foot	640.20
74225	Ultrasound of the right foot	640.20
74290	Ultrasound bone densitometry	201.10
74300	CT of the left ankle/foot	2415.60
74305	CT of the right ankle/foot	2415.60
74310	CT of the left ankle/foot – complete with 3D recon	3725.10
74315	CT of the right ankle/foot – complete with 3D recon	3725.10
74320	CT of the left ankle/foot contrasted	4121.20
74325	CT of the right ankle/foot contrasted	4121.20
74330	CT of the left ankle/foot pre and post contrast	4897.80
74335	CT of the right ankle/foot pre and post contrast	4897.80
74400	MR of the left ankle	6315.30
74405	MR of the right ankle	6315.30
74410	MR of the left ankle pre and post contrast	9915.40
74415	MR of the right ankle pre and post contrast	9915.40
74420	MR of the left foot	6325.20
74425	MR of the right foot	6325.20
74430	MR of the left foot pre and post contrast	10053.10
74435	MR of the right foot pre and post contrast	10053.10
	Intervention	0.00
	General	0.00
	<p>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.</p> <p>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.</p> <p>Codes 80640, 80645, 87682, 87683 include fluoroscopy. Machine fees may not be added.</p> <p>All other interventional procedures are complete unique procedures describing a whole comprehensive procedure</p>	0.00

	and combinations of different codes will only be supported when motivated.	
80600	Percutaneous abscess, cyst drainage, any region	923.10
80605	Fine needle aspiration biopsy, any region	415.80
80610	Cutting needle, trochar biopsy, any region	626.40
80620	Tumour/cyst ablation chemical	2499.50
80630	Tumour ablation radio frequency, per lesion	2089.70
80640	Insertion of CVP line in radiology suite	885.80
80645	Peripheral central venous line insertion	1194.10
80650	Infiltration of a peripheral joint, any region	630.60
	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.	0.00
	Neuro intervention	0.00
81600	Intracranial aneurysm occlusion, direct	21135.00
81605	Intracranial arteriovenous shunt occlusion	25105.40
81610	Dural sinus arteriovenous shunt occlusion	26042.20
81615	Extracranial arteriovenous shunt occlusion	15495.40
81620	Extracranial arterial embolisation (head and neck)	16070.80
81625	Caroticocavernous fistula occlusion	18944.70
81630	Intracranial angioplasty for stenosis, vasospasm	12504.30
81632	Intracranial stent placement (including PTA)	13174.30
81635	Temporary balloon occlusion test	8218.80
	Code 81635 does not include the relevant preceding diagnostic study and may be combined with codes 10500, 10510, 10530, 10540, 10550.	0.00
81640	Permanent carotid or vertebral artery occlusion (including occlusion test)	17554.50
81645	Intracranial aneurysm occlusion with balloon remodelling	21315.30

81650	Intracranial aneurysm occlusion with stent assistance	22704.30
81655	Intracranial thrombolysis, catheter directed	5806.90
	Code 81655 may be combined with any of the other neuro interventional codes 81600 to 81650	0.00
81660	Nerve block, head and neck, per level	754.50
81665	Neurolysis, head and neck, per level	1984.30
81670	Nerve block, head and neck, radio frequency, per level	1875.70
81680	Nerve block, coeliac plexus or other regions, per level	914.40
	Thorax	0.00
82600	Chest drain insertion	868.80
82605	Trachial, bronchial stent insertion	2991.40
	Gastrointestinal	0.00
83600	Oesophageal stent insertion	3075.70
83605	GIT balloon dilation	2399.80
83610	GIT stent insertion (non-oesophageal)	3154.80
83615	Percutaneous gastrostomy, jejunostomy	2498.50
	Hepatobiliary	0.00
84600	Percutaneous biliary drainage, external	3348.00
84605	Percutaneous external/internal biliary drainage	3666.10
84610	Permanent biliary stent insertion	5046.20
84615	Drainage tube replacement	1992.30
84620	Percutaneous bile duct stone or foreign object removal	4924.10
84625	Percutaneous gall bladder drainage	2914.30
84630	Percutaneous gallstone removal, including drainage	6822.80
84635	Transjugular liver biopsy	2456.50
84640	Transjugular intrahepatic Portosystemic shunt	11770.20
84645	Transhepatic Portogram including venous sampling, pressure studies	8068.10
84650	Transhepatic Portogram with embolisation of varices	9932.10
84655	Percutaneous hepatic tumour ablation	1544.80
84660	Percutaneous hepatic abscess, cyst drainage	1300.40
84665	Hepatic chemoembolisation	5856.10
84670	Hepatic arterial infusion catheter placement	5940.90
	Urogenital	0.00
85600	Percutaneous nephrostomy, external drainage	2952.90
85605	Percutaneous double J stent insertion including access	4021.70
85610	Percutaneous renal stone, foreign body removal including access	6580.40
85615	Percutaneous nephrostomy tract establishment	2883.80
85620	Change of nephrostomy tube	1566.40
85625	Percutaneous cystostomy	1627.50
85630	Urethral balloon dilatation	1403.20

85635	Urethral stent insertion	3075.70
85640	Renal cyst ablation	1174.60
85645	Renal abscess, cyst drainage	1493.60
85655	Fallopian tube recanalisation	4439.10
	Spinal	0.00
86600	Spinal vascular malformation embolisation	27109.30
86605	Vertebroplasty per level	2196.90
86610	Facet joint block per level, uni- or bilateral	940.00
	Code 86610 may only be billed once per level, and not per left and right side per level	0.00
86615	Spinal nerve block per level, uni- or bilateral	803.80
86620	Epidural block	928.20
86625	Chemoneucleolysis, including discogram	1805.00
86630	Spinal nerve ablation per level	1143.00
	Vascular	0.00
	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 than 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.	0.00
87600	Percutaneous transluminal angioplasty: aorta, IVC	5572.50
87601	Percutaneous transluminal angioplasty: iliac	5493.70
87602	Percutaneous transluminal angioplasty: femoropopliteal	5927.00
87603	Percutaneous transluminal angioplasty: subpopliteal	7225.60
87604	Percutaneous transluminal angioplasty: brachiocephalic	6612.70
87605	Percutaneous transluminal angioplasty: subclavian, axillary	5927.00
87606	Percutaneous transluminal angioplasty: extracranial carotid	7056.30
87607	Percutaneous transluminal angioplasty: extracranial vertebral	7221.90
87608	Percutaneous transluminal angioplasty: renal	8639.50
87609	Percutaneous transluminal angioplasty: coeliac, mesenteric	8639.50
87620	Aorta stent-graft placement	11896.70
87621	Stent insertion (including PTA): aorta, IVC	7277.90
87622	Stent insertion (including PTA): iliac	7524.50
87623	Stent insertion (including PTA): femoropopliteal	7681.90
87624	Stent insertion (including PTA): subpopliteal	8330.20
87625	Stent insertion (including PTA): brachiocephalic	9701.30

87626	Stent insertion (including PTA): subclavian, axillary	8540.90
87627	Stent insertion (including PTA): extracranial carotid	10540.80
87628	Stent insertion (including PTA): extracranial vertebral	9906.20
87629	Stent insertion (including PTA): renal	9713.20
87630	Stent insertion (including PTA): coeliac, mesenteric	9713.20
87631	Stent-graft placement: iliac	7524.50
87632	Stent-graft placement: femoropopliteal	7681.90
87633	Stent-graft placement: brachiocephalic	9701.30
87634	Stent-graft placement: subclavian, axillary	8154.60
87635	Stent-graft placement: extracranial carotid	11864.90
87636	Stent-graft placement: extracranial vertebral	11303.60
87637	Stent-graft placement: renal	9713.20
87638	Stent-graft placement: coeliac, mesenteric	9713.20
87650	Thrombolysis in angiography suite, per 24 hours	4514.20
	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.	0.00
87651	Aspiration, rheolytic thrombectomy	7652.10
87652	Atherectomy, per vessel	9053.20
87653	Percutaneous tunnelled / subcutaneous arterial or venous central or other line insertion	2773.40
87654	Thrombolysis follow-up	2322.00
87655	Percutaneous sclerotherapy, vascular malformation	2078.80
87660	Embolisation, mesenteric	9894.40
87661	Embolisation, renal	9789.20
87662	Embolisation, bronchial, intercostal	10673.70
87663	Embolisation, pulmonary arteriovenous shunt	10169.30
87664	Embolisation, abdominal, other vessels	9994.20
87665	Embolisation, thoracic, other vessels	9615.80
87666	Embolisation, upper limb	8957.70
87667	Embolisation, lower limb	9077.70
87668	Embolisation, pelvis, non-uterine	11538.90
87669	Embolisation, uterus	11219.60
87670	Embolisation, spermatic, ovaria veins	8455.20
87680	Inferior vena cava filter placement	6092.80
87681	Intravascular foreign body removal	8377.40
87682	Revision of access port (tunnelled or implantable)	1391.10
87683	Removal of access port (tunnelled or implantable)	1095.40
87690	Superior petrosal venous sampling	7193.30
87691	Pancreatic stimulation test	8846.10

87692	Transportal venous sampling	7581.10
87693	Adrenal venous sampling	5419.80
87694	Parathyroid venous sampling	8537.90
87695	Renal venous sampling	5419.80