



### MRI Indications

CPT	Exam	Common Reasons For the Exam*	Coverage Area	Comments
70551	MRI Brain w/o	Headaches, Dementia, Dizziness, Stroke		
70553	MRI Brain w and w/o	Tumor, MS, Cranial nerve dysfunction	Entire brain, including brainstem	If focal area of interest, specify
70554	MRA Brain w/o	Stroke, Aneurysm	Vertebrobasilar system, circle of Willis	Always w/o Contrast
70554	MRV Brain w/o	Venous thrombosis, Headache	Major cerebral veins and venous sinuses	Always w/o Contrast
70549	MRA Neck w and w/o	Stenosis	Carotid arteries, vertebrobasilar system	
72141	MRI Cervical Spine w/o	Disc herniation, Stenosis, extremity weakness, paresthesia		
72156	MRI Cervical Spine w and w/o	Metastasis, Tumor		
72146	MRI Thoracic Spine w/o	Disc Herniation, Stenosis, Compression Fx		
72157	MRI Thoracic Spine w and w/o	Metastasis, Tumor		
72148	MRI Lumbar Spine w/o	Disc Herniation, Stenosis, Compression Fx		
72158	MRI Lumbar Spine w and w/o	Metastasis, Tumor, Previous Surgery		
72195	MRI Sacrum w/o	Sacral Fx., SI joint arthritis	Sacrum, SI joints	Order as Pelvis w/o attention: Sacrum
74183	MRI Abdomen w and w/o	Various abnormalities of the abdominal organs	Liver, Kidneys, Adrenals, Pancreas	
74185	MRA Abdomen w	AAA, unexplained hypertension, abdominal pain (ischemia)	Abdominal aorta and major branches	Always With Contrast

S8037	MRCP (Abdomen w/o)	Abdominal pain, jaundice, pancreatitis	Biliary tree	Fasting (NPO 6 Hrs.)
	MRA Peripheral Runoff	Cold Foot, PVD, Pre or Post Bypass Surgery	Arteries from abdominal aorta to feet	MRA Abdomen (CPT 74185), MRA Pelvis (CPT 72198), MRA Bilateral Lower Extremity (CPT 73725 needs to be charged twice)
72195	MRI Pelvis w/o	Fracture, bone tumor, unexplained bone pain	Bony Pelvis	
72197	MRI Pelvis w and w/o	Prostate, Rectal, Bladder or Cervical Cancer, Endometriosis, Fibroids, Tumor, Mass, Ovarian Cysts	Female pelvis, prostate, rectum, bladder	
73721	Lower Extremity Joint w/o	Injury, Pain, Swelling	Knee, Hip, Ankle etc.	Please Specify Joint
73723	Lower Extremity Joint w and w/o	Palpable mass, erosive arthritis, osteomyelitis	Knee, Hip, Ankle etc.	Please Specify Joint
73221	Upper Extremity Joint w/o	Injury, Pain, Swelling	Shoulder, Elbow, Wrist etc	Please Specify Joint
73223	Upper Extremity Joint w and w/o	Palpable mass, erosive arthritis, osteomyelitis	Shoulder, Elbow, Wrist etc	Please Specify Joint
73222	Upper Extremity Joint w (Arthrogram)	Labral tear, Rotator cuff tear, Ligament tear	Shoulder, Elbow, Wrist etc	Please Specify Joint
73722	Lower Extremity Joint w (Arthrogram)	Labral tear, Post-op meniscal tear knee	Knee, Hip etc.	Please Specify Joint
73218	Upper Extremity Non joint w/o	Injury, Pain, Swelling	Humerus, Forearm, Hand etc.	Please Specify Joint
73220	Upper Extremity Non joint w and w/o	Palpable Mass	Humerus, Forearm, Hand etc.	Please Specify Joint
73718	Lower Extremity Non Joint w/o	Injury, Pain, Swelling	Femur, Lower Leg, Foot etc.	Please Specify Joint
73720	Lower Extremity Non Joint w and w/o	Palpable Mass	Femur, Lower Leg, Foot etc.	Please Specify Joint
70543	MRI Soft tissue neck w and w/o	Palpable mass, head & neck cancer		Specify location and size of lump
70543	MRI Orbits w and w/o	Tumors, Visual changes, Proptosis	Orbits	Always w and w/o Contrast

\* Whether or not these meet medical necessity depends on the individual patient and insurance carrier.

**Scheduling Phone: 603-598-3323**

