

## RBA Drs. Russell, Berkebile and Associates, Inc.

### Head & Extracranial

Echo Head (Echoencephalography)	76506
Head & Neck soft tissue (thyroid)	76536
Extracranial complete bilateral duplex study	93880
Extracranial limited or unilateral duplex study	93882

### Chest & Abdomen

Chest	76604
Abdomen complete	76700
Abdomen limited	76705

### Renal

Renal complete (Retroperitoneal)	76770
Renal limited (Retroperitoneal)	76775

### Pelvic

Pelvic complete	76856
Pelvic limited / follow-up	76857

### Scrotum & Extremity Soft Tissue

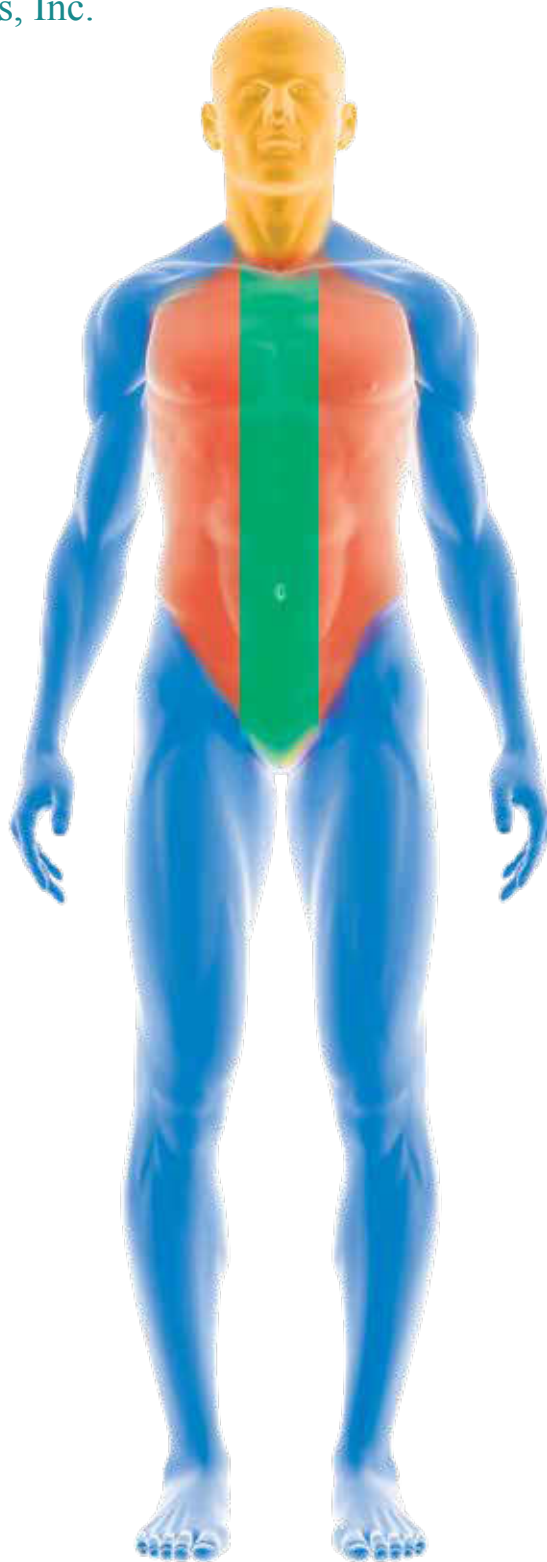
Scrotum	76870
Extremity soft tissue complete	76881

### Duplex Vascular

Duplex Vascular Abdominal/Pelvic/Scrotal/Retroperitoneal complete	93975
Duplex Vascular Abdominal/Pelvic/Scrotal/Retroperitoneal limited	93976
Duplex Vascular Aorta/IVC/Iliac Vascular/Bypass grafts complete	93978

### Paracentesis & Thoracentesis

Paracentesis with imaging guidance	49083
Thoracentesis with imaging guidance	32555



### Arterial & Venous

Extremity Arterial doppler limited	93922
Extremity Arterial doppler complete	93923
Arterial Lower Extremity duplex study complete bilateral	93925
Arterial Lower Extremity duplex study limited or unilateral	93926
Arterial Upper Extremity duplex complete bilateral	93930
Arterial Upper Extremity duplex limited or unilateral	93931
Venous Duplex Extremity lmt. or unilateral	93971
Venous Duplex Extremity comp. bilateral	93970

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\*These CPT codes represent the most commonly ordered US exams. For any coding inquiry not listed please call us at 800-841-4236 ext. 59109.



# 2020 US, MAMMOGRAPHY & BREAST STUDY, AND BONE DENSITY CPT CODES\*

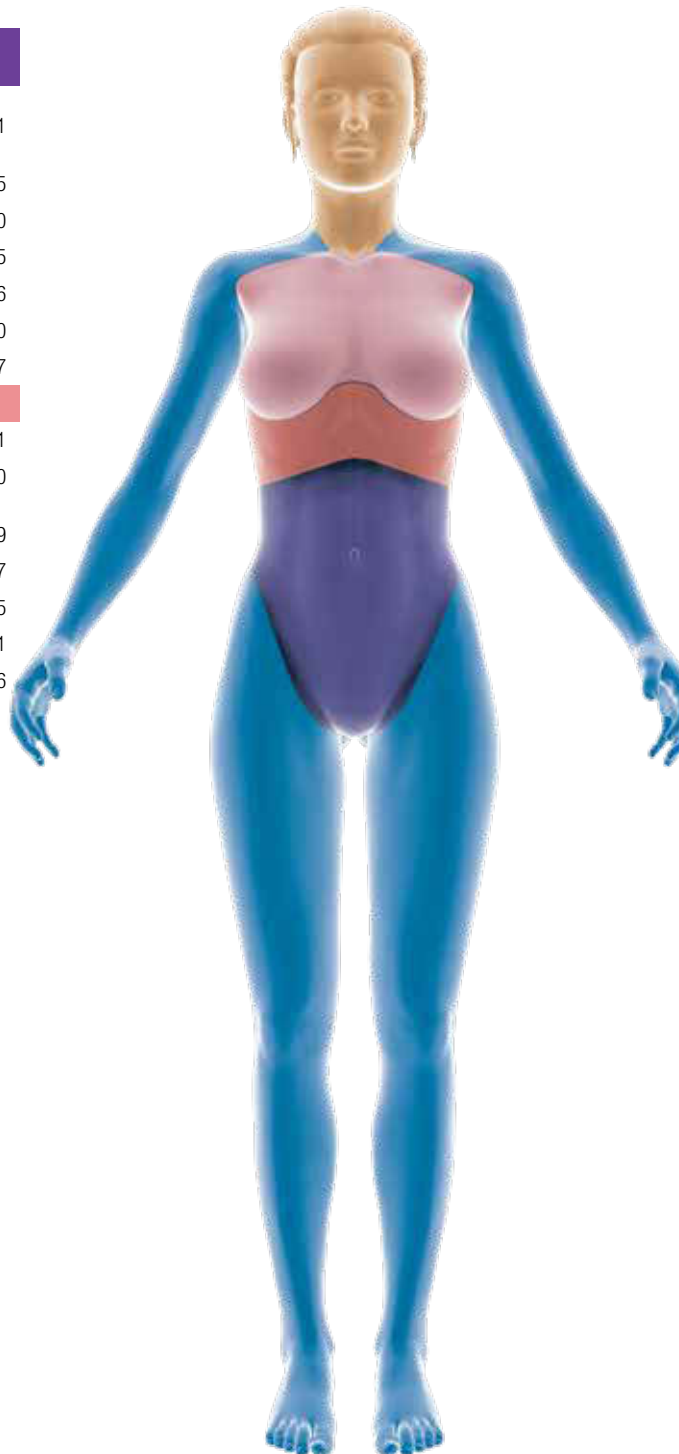
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## OB, Pregnant Uterus, & Transvaginal

OB complete 1st Trimester single gestation	76801
Pregnant Uterus > 14 weeks single gestation	76805
Pregnant Uterus multiple > 14 weeks	76810
Pregnant Uterus limited	76815
Pregnant Uterus repeat / follow-up	76816
Transvaginal non-OB	76830
OB Transvaginal	76817

## Breast

Breast unilateral complete	76641
Guided Breast Cyst Aspiration (puncture)	19000
MRI Breast bilateral with and/or without contrast	77049
Digital Mammogram screening; bilateral	77067
Diagnostic Mammogram; unilateral	77065
Each Additional Cyst	+ 19001
Diagnostic Mammogram; bilateral	77066



## Needle Localization

Placement of breast localization device ONLY, first lesion (includes mammo. guidance)	19281
Each Additional Lesion	+ 19282
Placement of breast localization device ONLY, first lesion (includes US guidance)	19285
Each Additional Lesion	+ 19286
Placement of breast localization device ONLY, first lesion (includes MRI guidance)	19287
Each Additional Lesion	+ 19288

## Stereotactic Guided Biopsy

Biopsy w/ stereotactic guidance, first lesion (incl. local/device placement/specimen imaging)	19081
Each Additional Lesion	+ 19082
x2 Bilateral	19082

## Ultrasound Guided Biopsy

Biopsy w/ ultrasound guidance, first lesion (incl. local/device placement/specimen imaging)	19083
Each Additional Lesion	+ 19084
x2 Bilateral	19084

## MRI Guided Biopsy

Biopsy w/ MRI guidance, first lesion (incl. local/device placement/specimen imaging)	19085
Diagnostic Mammogram; unilateral	+ 19086
x2 Bilateral	19086

## Galactogram

Single Duct (injection)	19030
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## Bone Density

DEXA Scan Hip & Lumbar Spine	77080
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## + Add On Codes

+ = Add on codes to main procedure code

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