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44520	Arteriography of internal and external iliac vessels alone	04.00		56.720	3440.70 (3018.20)
44525	Venography of internal and external iliac veins alone	04.00		62.110	3767.70 (3305.00)
44530	Corpora cavernosography	04.00		25.060	1520.20 (1333.50)
44535	Vasography, vesciculography	04.00		29.190	1770.70 (1553.20)
44540	Venography of inferior vena cava	04.00		26.120	1584.50 (1389.90)
44543	Venography of hepatic veins alone	04.00		53.770	3261.80 (2861.20)
44545	Venography of inferior vena cava and hepatic veins	04.00		68.910	4180.20 (3666.80)
44550	Venography of lumbar azygos system alone	04.00		43.890	2662.50 (2335.50)
44555	Venography of inferior vena cava and lumbar azygos veins	04.00		65.460	3970.90 (3483.20)
44560	Venography of renal, adrenal veins alone	04.00		43.990	2668.50 (2340.80)
44565	Venography of inferior vena cava and renal/adrenal veins	04.00		68.390	4148.70 (3639.20)
44570	Venography of spermatic, ovarian veins alone	04.00		40.390	2450.10 (2149.20)
44573	Venography of inferior vena cava, renal, spermatic, ovarian veins	04.00		73.990	4488.40 (3937.20)
44580	Venography indirect splenoportogram	04.00		48.670	2952.40 (2589.80)
44583	Venography direct splenoportogram	04.00		31.590	1916.30 (1681.00)
44587	Venography transhepatic portogram	04.00		66.750	4049.20 (3551.90)
Soft Tissue					
49900	Nuclear Medicine study – Tumour localisation planar, static	04.00		20.740	1258.10 (1103.60)
49905	Nuclear Medicine study – Tumour localisation planar, static, multiple studies	04.00		35.170	2133.50 (1871.50)
49910	Nuclear Medicine study – Tumour localisation planar, static and SPECT	04.00		34.150	2071.60 (1817.20)
49915	Nuclear medicine study – Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	2885.10 (2530.80)
49920	Nuclear medicine study – Infection localisation planar, static	04.00		18.040	1094.30 (959.90)
49930	Nuclear medicine study – Infection localisation planar, static, multiple studies	04.00		31.450	1907.80 (1673.50)
49940	Nuclear medicine study – Infection localisation planar, static and SPECT	04.00		31.450	1907.80 (1673.50)
49950	Nuclear medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	2721.30 (2387.10)
49960	Nuclear medicine study – Regional lymph node mapping dynamic	04.00		5.010	303.90 (266.60)
49965	Nuclear medicine study – Regional lymph node mapping, static, planar	04.00		24.100	1462.00 (1282.50)
49970	Nuclear medicine study – Regional lymph node mapping, static, planar, multiple	04.00		37.510	2275.40 (1996.00)
49975	Nuclear medicine study – Regional lymph node mapping SPECT	04.00		13.410	813.50 (713.60)
49980	Nuclear medicine study – Lymph node localisation with gamma probe	04.00		13.410	813.50 (713.60)
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				04.00
General					
	Code 50130 (Lumbar puncture) and 50140 (cisternal puncture) include fluoroscopy and introduction of contrast (00140 may not be added).				04.00
50100	X-ray of the spine scoliosis view AP only	04.00		7.000	424.60 (372.50)
50105	X-ray of the spine scoliosis view AP and lateral	04.00		12.000	727.90 (638.50)
50110	X-ray of the spine scoliosis view AP and lateral including stress views	04.00		18.540	1124.70 (986.60)

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50120	X-ray bone densitometry	04.00		11.520	698.80 (613.00)
50130	X-ray guided lumbar puncture	04.00		4.800	291.20 (255.40)
50140	X-ray guided cisternal puncture cisternogram	04.00		22.980	1394.00 (1222.80)
50300	CT quantitative bone mineral density	04.00		11.830	717.60 (629.50)
50500	Arteriogram of the spinal column and cord, all vessels	04.00		127.230	7718.00 (6770.20)
50510	Venography of the spinal, paraspinal veins	04.00		58.450	3545.70 (3110.30)
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).				04.00
51100	X-ray of the cervical spine, stress views only	04.00		4.140	251.10 (220.30)
51110	X-ray of the cervical spine, one or two views	04.00		3.010	182.60 (160.20)
51120	X-ray of the cervical spine, more than two views	04.00		4.280	259.60 (227.70)
51130	X-ray of the cervical spine, more than two views including stress views	04.00		7.580	459.80 (403.30)
51140	X-ray Tomography cervical spine	04.00		4.300	260.80 (228.80)
51160	X-ray myelography of the cervical spine	04.00		27.460	1665.80 (1461.20)
51170	X-ray discography cervical spine per level	04.00		25.170	1526.90 (1339.40)
51300	CT of the cervical spine limited study	04.00		9.500	576.30 (505.50)
51310	CT of the cervical spine - regional study	04.00		13.910	843.80 (740.20)
51320	CT of the cervical spine - complete study	04.00		37.130	2252.40 (1975.80)
51330	CT of the cervical spine pre and post contrast	04.00		58.850	3570.00 (3131.60)
51340	CT myelography of the cervical spine	04.00		47.190	2862.60 (2511.10)
51350	CT myelography of the cervical spine following myelogram	04.00		21.690	1315.80 (1154.20)
51400	MR of the cervical spine, limited study	04.00		44.400	2693.40 (2362.60)
51410	MR of the cervical spine and cranio-cervical junction	04.00		64.820	3932.10 (3449.20)
51420	MR of the cervical spine and cranio-cervical junction pre and post contrast	04.00		102.140	6196.00 (5435.10)
51900	Nuclear Medicine study - Bone regional cervical	04.00		21.500	1304.20 (1144.00)
51910	Nuclear Medicine study - Bone tomography regional cervical	04.00		13.410	813.50 (713.60)
51920	Nuclear Medicine study - with flow	04.00		6.020	365.20 (320.40)
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).				04.00
52100	X-ray of the thoracic spine, one or two views	04.00		3.210	194.70 (170.80)
52110	X-ray of the thoracic spine, more than two views	04.00		4.000	242.60 (212.80)

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52120	X-ray tomography thoracic spine	04.00		4.300	260.80 (228.80)
52140	X-ray of the thoracic spine, more that two views including stress views	04.00		6.640	402.80 (353.30)
52150	X-ray myelography of the thoracic spine	04.00		18.620	1129.50 (990.80)
52300	CT of the thoracic spine limited study	04.00		9.500	576.30 (505.50)
52305	CT of the thoracic spine – regional study	04.00		13.910	843.80 (740.20)
52310	CT of the thoracic spine complete study	04.00		35.780	2170.50 (1903.90)
52320	CT of the thoracic spine pre and post contrast	04.00		58.850	3570.00 (3131.60)
52330	CT myelography of the thoracic spine	04.00		48.090	2917.20 (2558.90)
52340	CT myelography of the thoracic spine following myelogram	04.00		20.370	1235.70 (1083.90)
52400	MR of the thoracic spine, limited study	04.00		46.600	2826.80 (2479.60)
52410	MR of the thoracic spine	04.00		64.340	3903.00 (3423.70)
52420	MR of the thoracic spine pre and post contrast	04.00		101.420	6152.30 (5396.80)
52900	Nuclear Medicine study – Bone regional dorsal	04.00		21.500	1304.20 (1144.00)
52910	Nuclear Medicine study – Bone tomography regional dorsal	04.00		13.410	813.50 (713.60)
52920	Nuclear Medicine study – with flow	04.00		6.020	365.20 (320.40)
Lumbar					
	Code 53100 (stress) is a stand alone study and may not be added to 53110, 53120 (lumbar spine), 53160 (myelography) and 53170 (discography). Code 53140 (tomography) may be combined with 53110 or 53120 (spine). Codes 53160 (myelography) and 53170 (discography) include fluoroscopy and introduction of contrast (00140 may not be added). Code 53300 (CT) limited study – limited to a single lumbar vertebral body. Code 53310 (CT) regional study - 2 vertebral bodies and intervertebral disc spaces. Code 53320 (CT) complete study - an extensive study of the lumbar spine. Code 53340 (CT myelography) - post myelographic study and includes all disc levels, fluoroscopy and introduction of contrast (00140 may not be added).				04.00
53100	X-ray of the lumbar spine – stress study only	04.00		4.140	251.10 (220.30)
53110	X-ray of the lumbar spine, one or two views	04.00		3.560	216.00 (189.50)
53120	X-ray of the lumbar spine, more than two views	04.00		4.460	270.60 (237.40)
53130	X-ray of the lumbar spine, more that two views including stress views	04.00		7.520	456.20 (400.20)
53140	X-ray tomography lumbar spine	04.00		4.300	260.80 (228.80)
53160	X-ray myelography of the lumbar spine	04.00		23.940	1452.20 (1273.90)
53170	X-ray discography lumbar spine per level	04.00		25.170	1526.90 (1339.40)
53300	CT of the lumbar spine limited study	04.00		9.500	576.30 (505.50)
53310	CT of the lumbar spine – regional study	04.00		13.910	843.80 (740.20)
53320	Ct of the lumbar spine complete study	04.00		37.640	2283.30 (2002.90)
53330	CT of the lumbar spine pre and post contrast	04.00		58.850	3570.00 (3131.60)
53340	CT myelography of the lumbar spine	04.00		49.110	2979.10 (2613.20)
53350	CT myelography of the lumbar spine following myelogram	04.00		23.460	1423.10 (1248.30)
53400	MR of the lumbar spine, limited study	04.00		46.200	2802.60 (2458.40)
53410	MR of the lumbar spine	04.00		64.320	3901.80 (3422.60)
53420	MR of the lumbar spine pre and post contrast	04.00		103.290	6265.80 (5496.30)

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53900	Nuclear medicine study – Bone regional lumbar	04.00		21.500	1304.20 (1144.00)
53910	Nuclear medicine study – Bone tomography regional lumbar	04.00		13.410	813.50 (713.60)
53920	Nuclear medicine study – with flow	04.00		6.020	365.20 (320.40)
Sacrum					
	Code 54120 (tomography) may be combined with 54100 (sacrum) or 54110 (SI joints). Code 54300 (CT) limited study - limited to single sacral vertebral body. Code 54310 (CT) complete study - an extensive study of the sacral spine.				04.00
54100	X-ray of the sacrum and coccyx	04.00		3.580	217.20 (190.50)
54110	X-ray of the sacro-iliac joints	04.00		4.100	248.70 (218.20)
54120	X-ray tomography – sacrum and/or coccyx	04.00		4.300	260.80 (228.80)
54300	CT of the sacrum – limited study	04.00		7.600	461.00 (404.40)
54310	CT of the sacrum – complete study – uncontrasted	04.00		25.610	1553.60 (1362.80)
54320	CT of the sacrum with contrast	04.00		46.930	2846.90 (2497.30)
54330	CT of the sacrum pre and post contrast	04.00		52.970	3213.30 (2818.70)
54400	MR of the sacrum	04.00		65.000	3943.00 (3458.80)
54410	MR of the sacrum pre and post contrast	04.00		101.040	6129.30 (5376.60)
Pelvis					
	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.				04.00
55100	X-ray of the pelvis	04.00		3.660	222.00 (194.70)
55110	X-ray tomography – pelvis	04.00		4.300	260.80 (228.80)
55300	CT of the bony pelvis limited	04.00		9.500	576.30 (505.50)
55310	CT of the bony pelvis complete uncontrasted	04.00		25.610	1553.60 (1362.80)
55320	CT of the bony pelvis complete 3D recon	04.00		37.470	2273.00 (1993.90)
55330	CT of the bony pelvis with contrast	04.00		46.930	2846.90 (2497.30)
55340	CT of the bony pelvis – pre and post contrast	04.00		52.970	3213.30 (2818.70)
55400	MR of the bony pelvis	04.00		65.000	3943.00 (3458.80)
55410	MR of the bony pelvis pre and post contrast	04.00		102.240	6202.10 (5440.40)
55900	Nuclear medicine study – Bone regional pelvis	04.00		21.500	1304.20 (1144.00)
55910	Nuclear medicine study – Bone tomography regional pelvis	04.00		13.410	813.50 (713.60)
55920	Nuclear medicine study – with flow	04.00		6.020	365.20 (320.40)
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.				04.00
56100	X-ray of the left hip	04.00		3.180	192.90 (169.20)
56110	X-ray of the right hip	04.00		3.180	192.90 (169.20)
56120	X-ray pelvis and hips	04.00		6.020	365.20 (320.40)
56130	X-ray tomography – hip	04.00		4.300	260.80 (228.80)
56140	X-ray of the hip/s – stress study	04.00		4.380	265.70 (233.10)

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56150	X-ray arthrography of the hip joint including introduction contrast	04.00	15.750	955.40 (838.10)
56160	X-ray guidance and introduction of contrast into hip joint only	04.00	7.410	449.50 (394.30)
56200	Ultrasound of the hip joints	04.00	6.500	394.30 (345.90)
56300	CT of hip – limited	04.00	9.500	576.30 (505.50)
56310	CT of hip – complete	05.05	27.370	1660.30 (1456.40)
56320	CT of hip – complete with 3D recon	04.00	39.780	2413.10 (2116.80)
56330	CT of hip with contrast	04.00	43.260	2624.20 (2301.90)
56340	CT of hip pre and post contrast	04.00	47.880	2904.50 (2547.80)
56400	MR of the hip joint/s, limited study	04.00	44.900	2723.70 (2389.20)
56410	MR of the hip joint/s	04.00	64.100	3888.40 (3410.90)
56420	MR of the hip joint/s, pre and post contrast	04.00	101.640	6165.70 (5408.50)
56900	Nuclear medicine study – Bone regional pelvis	04.00	21.500	1304.20 (1144.00)
56910	Nuclear medicine study – Bone limited static plus flow	04.00	27.530	1670.00 (1464.90)
56920	Nuclear medicine study – Bone tomography regional	04.00	13.410	813.50 (713.60)
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.			04.00
60100	X-ray upper limbs - any region - stress studies only	04.00	4.520	274.20 (240.50)
60110	X-ray upper limbs - any region – tomography	04.00	4.300	260.80 (228.80)
60200	Ultrasound upper limb – soft tissue - any region	04.00	7.380	447.70 (392.70)
60210	Ultrasound of the peripheral arterial system of the left arm including B mode, pulse and colour doppler	04.00	13.640	827.40 (725.80)
60220	Ultrasound of the peripheral arterial system of the right arm including B mode, pulse and colour doppler	04.00	13.640	827.40 (725.80)
60230	Ultrasound peripheral venous system upper limbs including pulse and colour doppler for deep vein thrombosis	04.00	12.540	760.70 (667.30)
60240	Ultrasound peripheral venous system upper limbs including pulse and colour doppler	04.00	17.260	1047.00 (918.40)
60300	CT of the upper limbs limited study	04.00	9.500	576.30 (505.50)
60310	CT angiography of the upper limb	04.00	78.280	4748.60 (4165.40)
60400	MR of the upper limbs limited study, any region	04.00	44.800	2717.70 (2383.90)
60410	MR angiography of the upper limb	04.00	74.660	4529.00 (3972.80)
60500	Arteriogram of subclavian, upper limb arteries alone, unilateral	04.00	45.670	2770.40 (2430.20)
60510	Arteriogram of subclavian, upper limb arteries alone, bilateral	04.00	82.670	5014.90 (4399.00)
60520	Arteriogram of aortic arch, subclavian, upper limb, unilateral	04.00	56.750	3442.60 (3019.80)
60530	Arteriogram of aortic arch, subclavian, upper limb, bilateral	04.00	88.110	5344.90 (4688.50)
60540	Venography, antegrade of upper limb veins, unilateral	04.00	26.120	1584.50 (1389.90)
60550	Venography, antegrade of upper limb veins, bilateral	04.00	49.430	2998.50 (2630.30)
60560	Venography, retrograde of upper limb veins, unilateral	04.00	31.010	1881.10 (1650.10)

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60570	Venography, retrograde of upper limb veins, bilateral	04.00		54.810	3324.90 (2916.60)
60580	Venography, shuntogram, dialysis access shunt	04.00		23.790	1443.10 (1265.90)
60900	Nuclear medicine study – Venogram upper limb	04.00		37.120	2251.80 (1975.30)
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.				04.00
61100	X-ray of the left clavicle	04.00		3.040	184.40 (161.80)
61105	X-ray of the right clavicle	04.00		3.040	184.40 (161.80)
61110	X-ray of the left scapula	04.00		3.040	184.40 (161.80)
61115	X-ray of the right scapula	04.00		3.040	184.40 (161.80)
61120	X-ray of the left acromio-clavicular joint	04.00		3.140	190.50 (167.10)
61125	X-ray of the right acromio-clavicular joint	04.00		3.140	190.50 (167.10)
61128	X-ray of acromio-clavicular joints plus stress studies bilateral	04.00		7.680	465.90 (408.70)
61130	X-ray of the left shoulder	04.00		3.480	211.10 (185.20)
61135	X-ray of the right shoulder	04.00		3.480	211.10 (185.20)
61140	X-ray of the left shoulder plus subacromial impingement views	04.00		5.920	359.10 (315.00)
61145	X-ray of the right shoulder plus subacromial impingement views	04.00		5.920	359.10 (315.00)
61150	X-ray of the left subacromial impingement views only	04.00		3.240	196.50 (172.40)
61155	X-ray of the right subacromial impingement views only	04.00		3.240	196.50 (172.40)
61160	X-ray arthrography shoulder joint including introduction of contrast	04.00		15.830	960.30 (842.40)
61170	X-ray guidance and introduction of contrast into shoulder joint only	04.00		7.410	449.50 (394.30)
61200	Ultrasound of the left shoulder joint	04.00		6.500	394.30 (345.90)
61210	Ultrasound of the right shoulder joint	04.00		6.500	394.30 (345.90)
61300	CT of the left shoulder joint – uncontrasted	04.00		24.360	1477.70 (1296.20)
61305	CT of the right shoulder joint – uncontrasted	04.00		24.360	1477.70 (1296.20)
61310	CT of the left shoulder – complete with 3D recon	04.00		37.660	2284.50 (2003.90)
61315	CT of the right shoulder – complete with 3D recon	04.00		37.660	2284.50 (2003.90)
61320	CT of the left shoulder joint - pre and post contrast	04.00		48.630	2950.00 (2587.70)
61325	CT of the right shoulder joint - pre and post contrast	04.00		48.630	2950.00 (2587.70)
61400	MR of the left shoulder	04.00		64.640	3921.20 (3439.60)
61405	MR of the right shoulder	04.00		64.640	3921.20 (3439.60)
61410	MR of the left shoulder pre and post contrast	04.00		101.040	6129.30 (5376.60)
61415	MR of the right shoulder pre and post contrast	04.00		101.040	6129.30 (5376.60)
Humerus					
62100	X-ray of the left humerus	04.00		2.940	178.30 (156.40)
62105	X-ray of the right humerus	04.00		2.940	178.30 (156.40)
62300	CT of the left upper arm	04.00		24.360	1477.70 (1296.20)

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62305	CT of the right upper arm	04.00		24.360	1477.70 (1296.20)
62310	CT of the left upper arm contrasted	04.00		39.970	2424.70 (2126.90)
62315	CT of the right upper arm contrasted	04.00		39.970	2424.70 (2126.90)
62320	CT of the left upper arm pre and post contrast	04.00		48.580	2947.00 (2585.10)
62325	CT of the right upper arm pre and post contrast	04.00		48.580	2947.00 (2585.10)
62400	MR of the left upper arm	04.00		64.200	3894.50 (3416.20)
62405	MR of the right upper arm	04.00		64.200	3894.50 (3416.20)
62410	MR of the left upper arm pre and post contrast	04.00		102.040	6190.00 (5429.80)
62415	MR of the right upper arm pre and post contrast	04.00		102.040	6190.00 (5429.80)
62900	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1304.20 (1144.00)
62905	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
62910	Nuclear medicine study – Bone tomography regional	04.00		13.410	813.50 (713.60)
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.				04.00
63100	X-ray of the left elbow	04.00		3.140	190.50 (167.10)
63105	X-ray of the right elbow	04.00		3.140	190.50 (167.10)
63110	X-ray of the left elbow with stress	04.00		4.340	263.30 (231.00)
63115	X-ray of the right elbow with stress	04.00		4.340	263.30 (231.00)
63120	X-ray arthrography elbow joint including introduction of contrast	04.00		15.890	963.90 (845.50)
63130	X-ray guidance and introduction of contrast into elbow joint only	04.00		7.410	449.50 (394.30)
63200	Ultrasound of the left elbow joint	04.00		6.500	394.30 (345.90)
63205	Ultrasound of the right elbow joint	04.00		6.500	394.30 (345.90)
63300	CT of the left elbow	04.00		24.360	1477.70 (1296.20)
63305	CT of the right elbow	04.00		24.360	1477.70 (1296.20)
63310	CT of the left elbow – complete with 3D recon	04.00		37.660	2284.50 (2003.90)
63315	CT of the right elbow – complete with 3D recon	04.00		37.660	2284.50 (2003.90)
63320	CT of the left elbow contrasted	04.00		39.970	2424.70 (2126.90)
63325	CT of the right elbow contrasted	04.00		39.970	2424.70 (2126.90)
63330	CT of the left elbow pre and post contrast	04.00		48.630	2950.00 (2587.70)
63335	CT of the right elbow pre and post contrast	04.00		48.630	2950.00 (2587.70)
63400	MR of the left elbow	04.00		64.640	3921.20 (3439.60)
63405	MR of the right elbow	04.00		64.640	3921.20 (3439.60)
63410	MR of the left elbow pre and post contrast	04.00		101.040	6129.30 (5376.60)
63415	MR of the right elbow pre and post contrast	04.00		101.040	6129.30 (5376.60)
63905	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1304.20 (1144.00)

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63910	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
63915	Nuclear medicine study – Bone tomography regional	04.00		13.410	813.50 (713.60)
Forearm					
64100	X-ray of the left forearm	04.00		2.940	178.30 (156.40)
64105	X-ray of the right forearm	04.00		2.940	178.30 (156.40)
64110	X-ray peripheral bone densitometry	04.00		1.960	118.90 (104.30)
64300	CT of the left forearm	04.00		24.360	1477.70 (1296.20)
64305	CT of the right forearm	04.00		24.360	1477.70 (1296.20)
64310	CT of the left forearm contrasted	04.00		39.970	2424.70 (2126.90)
64315	CT of the right forearm contrasted	04.00		39.970	2424.70 (2126.90)
64320	CT of the left forearm pre and post contrast	04.00		48.580	2947.00 (2585.10)
64325	CT of the right forearm pre and post contrast	04.00		48.580	2947.00 (2585.10)
64400	MR of the left forearm	04.00		64.200	3894.50 (3416.20)
64405	MR of the right forearm	04.00		64.200	3894.50 (3416.20)
64410	MR of the left forearm pre and post contrast	04.00		98.040	5947.30 (5216.90)
64415	MR of the right forearm pre and post contrast	04.00		98.040	5947.30 (5216.90)
64900	Nuclear medicine study – Bone limited/regional static	04.00		21.500	1304.20 (1144.00)
64905	Nuclear medicine study – Bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
64910	Nuclear medicine study – Bone tomography regional	04.00		13.410	813.50 (713.60)
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.				04.00
65100	X-ray of the left hand	04.00		3.080	186.80 (163.90)
65105	X-ray of the right hand	04.00		3.080	186.80 (163.90)
65110	X-ray of the left hand – bone age	04.00		3.080	186.80 (163.90)
65120	X-ray of a finger	04.00		2.670	162.00 (142.10)
65130	X-ray of the left wrist	04.00		3.180	192.90 (169.20)
65135	X-ray of the right wrist	04.00		3.180	192.90 (169.20)
65140	X-ray of the left scaphoid	04.00		3.300	200.20 (175.60)
65145	X-ray of the right scaphoid	04.00		3.300	200.20 (175.60)
65150	X-ray of the left wrist, scaphoid and stress views	04.00		7.560	458.60 (402.30)
65155	X-ray of the right wrist, scaphoid and stress views	04.00		7.560	458.60 (402.30)
65160	X-ray arthrography wrist joint including introduction of contrast	04.00		15.930	966.30 (847.60)
65170	X-ray guidance and introduction of contrast into wrist joint only	04.00		7.410	449.50 (394.30)
65200	Ultrasound of the left wrist	04.00		6.500	394.30 (345.90)
65210	Ultrasound of the right wrist	04.00		6.500	394.30 (345.90)

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65300	CT of the left wrist and hand	04.00		24.360	1477.70 (1296.20)
65305	CT of the right wrist and hand	04.00		24.360	1477.70 (1296.20)
65310	CT of the left wrist and hand - complete with 3D recon	04.00		37.660	2284.50 (2003.90)
65315	CT of the right wrist and hand - complete with 3D recon	04.00		37.660	2284.50 (2003.90)
65320	CT of the left wrist and hand contrasted	04.00		39.970	2424.70 (2126.90)
65325	CT of the right wrist and hand contrasted	04.00		39.970	2424.70 (2126.90)
65330	CT of the left wrist and hand pre and post contrast	04.00		48.630	2950.00 (2587.70)
65335	CT of the right wrist and hand pre and post contrast	04.00		48.630	2950.00 (2587.70)
65400	MR of the left wrist and hand	04.00		64.640	3921.20 (3439.60)
65405	MR of the right wrist and hand	04.00		64.640	3921.20 (3439.60)
65410	MR of the left wrist and hand pre and post contrast	04.00		101.040	6129.30 (5376.60)
65415	MR of the right wrist and hand pre and post contrast	04.00		101.040	6129.30 (5376.60)
65900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1304.20 (1144.00)
65905	Nuclear Medicine study – bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
65910	Nuclear Medicine study – bone tomography regional	04.00		13.410	813.50 (713.60)
Soft Tissue					
69900	Nuclear medicine study – Tumour localisation planar, static	04.00		20.740	1258.10 (1103.60)
69905	Nuclear medicine study – Tumour localisation planar, static, multiple studies	04.00		35.170	2133.50 (1871.50)
69910	Nuclear medicine study – Tumour localisation planar, static and SPECT	04.00		34.150	2071.60 (1817.20)
69915	Nuclear medicine study – Tumour localisation planar, static, multiple studies and SPECT	04.00		47.560	2885.10 (2530.80)
69920	Nuclear medicine study – Infection localisation planar, static	04.00		18.040	1094.30 (959.90)
69925	Nuclear medicine study – Infection localisation planar, static, multiple studies	04.00		31.450	1907.80 (1673.50)
69930	Nuclear medicine study – Infection localisation planar, static and SPECT	04.00		31.450	1907.80 (1673.50)
69935	Nuclear medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00		44.860	2721.30 (2387.10)
69940	Nuclear medicine study – Regional lymph node mapping dynamic	04.00		6.020	365.20 (320.40)
69945	Nuclear medicine study – Regional lymph node mapping, static, planar	04.00		24.100	1462.00 (1282.50)
69950	Nuclear medicine study – Regional lymph node mapping, static, planar, multiple	04.00		37.510	2275.40 (1996.00)
69955	Nuclear medicine study – Regional lymph node mapping SPECT	04.00		13.410	813.50 (713.60)
69960	Nuclear medicine study – Lymph node localisation with gamma probe	04.00		13.410	813.50 (713.60)
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.				04.00
70100	X-ray lower limbs - any region- stress studies only	04.00		4.520	274.20 (240.50)
70110	X-ray lower limbs - any region-tomography	04.00		4.300	260.80 (228.80)

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70120	X-ray of the lower limbs full length study	04.00	6.460	391.90 (343.80)
70200	Ultrasound lower limb – soft tissue - any region	04.00	7.380	447.70 (392.70)
70210	Ultrasound of the peripheral arterial system of the left leg including B mode, pulse and colour Doppler	04.00	13.640	827.40 (725.80)
70220	Ultrasound of the peripheral arterial system of the right leg including B mode, pulse and colour Doppler	04.00	13.640	827.40 (725.80)
70230	Ultrasound peripheral venous system lower limbs including pulse and colour doppler for deep vein thrombosis	04.00	13.640	827.40 (725.80)
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	04.00	19.660	1192.60 (1046.10)
70300	CT of the lower limbs limited study	04.00	9.500	576.30 (505.50)
70310	CT angiography of the lower limb	04.00	79.430	4818.40 (4226.70)
70320	CT angiography abdominal aorta and outflow lower limbs	04.00	98.340	5965.50 (5232.90)
70400	MR of the lower limbs limited study	04.00	46.400	2814.70 (2469.00)
70410	MR angiography of the lower limb	04.00	76.660	4650.30 (4079.20)
70420	MR angiography of the abdominal aorta and lower limbs	04.00	118.860	7210.30 (6324.80)
70500	Angiography of pelvic and lower limb arteries unilateral	04.00	40.590	2462.30 (2159.90)
70505	Angiography of pelvic and lower limb arteries bilateral	04.00	75.920	4605.50 (4039.90)
70510	Angiography of abdominal aorta, pelvic and lower limb vessels unilateral	04.00	61.230	3714.30 (3258.20)
70515	Angiography of abdominal aorta, pelvic and lower limb vessels bilateral	04.00	85.660	5196.30 (4558.20)
70520	Angiography translumbar aorta with full peripheral study	04.00	45.680	2771.00 (2430.70)
70530	Venography, antegrade of lower limb veins, unilateral	04.00	25.460	1544.50 (1354.80)
70535	Venography, antegrade of lower limb veins, bilateral	04.00	49.430	2998.50 (2630.30)
70540	Venography, retrograde of lower limb veins, unilateral	04.00	31.170	1890.80 (1658.60)
70545	Venography, retrograde of lower limb veins, bilateral	04.00	56.790	3445.00 (3021.90)
70560	Lymphangiography, lower limb, unilateral	04.00	51.040	3096.20 (2716.00)
70565	Lymphangiography, lower limb, bilateral	04.00	83.970	5093.80 (4468.20)
70900	Nuclear medicine study – Venogram lower limb	04.00	37.120	2251.80 (1975.30)
Femur				
71100	X-ray of the left femur	04.00	2.940	178.30 (156.40)
71105	X-ray of the right femur	04.00	2.940	178.30 (156.40)
71300	CT of the left femur	04.00	24.520	1487.40 (1304.70)
71305	CT of the right femur	04.00	24.520	1487.40 (1304.70)
71310	CT of the left upper leg contrasted	04.00	41.830	2537.50 (2225.90)
71315	CT of the right upper leg contrasted	04.00	41.830	2537.50 (2225.90)
71320	CT of the left upper leg pre and post contrast	04.00	49.710	3015.50 (2645.20)
71325	CT of the right upper leg pre and post contrast	04.00	49.710	3015.50 (2645.20)
71400	MR of the left upper leg	04.00	64.800	3930.90 (3448.20)
71405	MR of the right upper leg	04.00	64.800	3930.90 (3448.20)
71410	MR of the left upper leg pre and post contrast	04.00	102.040	6190.00 (5429.80)

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71415	MR of the right upper leg pre and post contrast	04.00		102.040	6190.00 (5429.80)
71900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1304.20 (1144.00)
71905	Nuclear Medicine study – Bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
71910	Nuclear Medicine study – Bone tomography regional	04.00		13.410	813.50 (713.60)
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.				04.00
72100	X-ray of the left knee one or two views	04.00		2.770	168.00 (147.40)
72105	X-ray of the right knee one or two views	04.00		2.770	168.00 (147.40)
72110	X-ray of the left knee, more than two views	04.00		3.320	201.40 (176.70)
72115	X-ray of the right knee, more than two views	04.00		3.320	201.40 (176.70)
72120	X-ray of the left knee including patella	04.00		4.620	280.30 (245.90)
72125	X-ray of the right knee including patella	04.00		4.620	280.30 (245.90)
72130	X-ray of the left knee with stress views	04.00		5.820	353.10 (309.70)
72135	X-ray of the right knee with stress views	04.00		5.820	353.10 (309.70)
72140	X-ray of left patella	04.00		2.770	168.00 (147.40)
72145	X-ray of right patella	04.00		2.770	168.00 (147.40)
72150	X-ray both knees standing – single view	04.00		2.800	169.90 (149.00)
72160	X-ray arthrography knee joint including introduction of contrast	04.00		15.810	959.10 (841.30)
72170	X-ray guidance and introduction of contrast into knee joint only	04.00		7.410	449.50 (394.30)
72200	Ultrasound of the left knee joint	04.00		6.500	394.30 (345.90)
72205	Ultrasound of the right knee joint	04.00		6.500	394.30 (345.90)
72300	CT of the left knee	04.00		24.520	1487.40 (1304.70)
72305	CT of the right knee	04.00		24.520	1487.40 (1304.70)
72310	CT of the left knee complete study with 3D reconstructions	04.00		35.930	2179.60 (1911.90)
72315	CT of the right knee complete study with 3D reconstructions	04.00		35.930	2179.60 (1911.90)
72320	CT of the left knee contrasted	04.00		41.830	2537.50 (2225.90)
72325	CT of the right knee contrasted	04.00		41.830	2537.50 (2225.90)
72330	CT of the left knee pre and post contrast	04.00		49.760	3018.50 (2647.80)
72335	CT of the right knee pre and post contrast	04.00		49.760	3018.50 (2647.80)
72400	MR of the left knee	04.00		64.100	3888.40 (3410.90)
72405	MR of the right knee	04.00		64.100	3888.40 (3410.90)
72410	MR of the left knee pre and post contrast	04.00		100.840	6117.20 (5366.00)
72415	MR of the right knee pre and post contrast	04.00		100.840	6117.20 (5366.00)
72900	Nuclear Medicine study – Bone limited/regional static	04.00		21.500	1304.20 (1144.00)
72905	Nuclear Medicine study – Bone limited static plus flow	04.00		27.530	1670.00 (1464.90)

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72910	Nuclear Medicine study – Bone tomography regional	04.00		13.410	813.50 (713.60)
Lower Leg					
73100	X-ray of the left lower leg	04.00		2.940	178.30 (156.40)
73105	X-ray of the right lower leg	04.00		2.940	178.30 (156.40)
73300	CT of the left lower leg	04.00		24.520	1487.40 (1304.70)
73305	CT of the right lower leg	04.00		24.520	1487.40 (1304.70)
73310	CT of the left lower leg contrasted	04.00		41.830	2537.50 (2225.90)
73315	CT of the right lower leg contrasted	04.00		41.830	2537.50 (2225.90)
73320	CT of the left lower leg pre and post contrast	04.00		49.710	3015.50 (2645.20)
73325	CT of the right lower leg pre and post contrast	04.00		49.710	3015.50 (2645.20)
73400	MR of the left lower leg	04.00		64.200	3894.50 (3416.20)
73405	MR of the right lower leg	04.00		64.200	3894.50 (3416.20)
73410	MR of the left lower leg pre and post contrast	04.00		102.040	6190.00 (5429.80)
73415	MR of the right lower leg pre and post contrast	04.00		102.040	6190.00 (5429.80)
73900	Nuclear Medicine study – bone limited/regional static	04.00		21.500	1304.20 (1144.00)
73905	Nuclear Medicine study – bone limited static plus flow	04.00		27.530	1670.00 (1464.90)
73910	Nuclear Medicine study – bone tomography regional	04.00		13.410	813.50 (713.60)
Ankle and Foot					
	Code 74145 (toe) may not be combined with 74120 or 74125 (foot). Code 74150 (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.				04.00
74100	X-ray of the left ankle	04.00		3.320	201.40 (176.70)
74105	X-ray of the right ankle	04.00		3.320	201.40 (176.70)
74110	X-ray of the left ankle with stress views	04.00		4.520	274.20 (240.50)
74115	X-ray of the right ankle with stress views	04.00		4.520	274.20 (240.50)
74120	X-ray of the left foot	04.00		2.800	169.90 (149.00)
74125	X-ray of the right foot	04.00		2.800	169.90 (149.00)
74130	X-ray of the left calcaneus	04.00		2.740	166.20 (145.80)
74135	X-ray of the right calcaneus	04.00		2.740	166.20 (145.80)
74140	X-ray of both feet – standing – single view	04.00		2.800	169.90 (149.00)
74145	X-ray of a toe	04.00		2.670	162.00 (142.10)
74150	X-ray of the sesamoid bones one or both sides	04.00		2.800	169.90 (149.00)
74160	X-ray arthrography ankle joint including introduction of contrast	04.00		15.910	965.10 (846.60)
74170	X-ray guidance and introduction of contrast into ankle joint	04.00		7.410	449.50 (394.30)
74210	Ultrasound of the left ankle	04.00		6.500	394.30 (345.90)
74215	Ultrasound of the right ankle	04.00		6.500	394.30 (345.90)

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74220	Ultrasound of the left foot	04.00	6.500	394.30 (345.90)
74225	Ultrasound of the right foot	04.00	6.500	394.30 (345.90)
74290	Ultrasound bone densitometry	04.00	2.040	123.80 (108.60)
74300	CT of the left ankle/foot	04.00	24.520	1487.40 (1304.70)
74305	CT of the right ankle/foot	04.00	24.520	1487.40 (1304.70)
74310	CT of the left ankle/foot – complete with 3D recon	04.00	37.810	2293.60 (2011.90)
74315	CT of the right ankle/foot – complete with 3D recon	04.00	37.810	2293.60 (2011.90)
74320	CT of the left ankle/foot contrasted	04.00	41.830	2537.50 (2225.90)
74325	CT of the right ankle/foot contrasted	04.00	41.830	2537.50 (2225.90)
74330	CT of the left ankle/foot pre and post contrast	04.00	49.710	3015.50 (2645.20)
74335	CT of the right ankle/foot pre and post contrast	04.00	49.710	3015.50 (2645.20)
74400	MR of the left ankle	04.00	64.100	3888.40 (3410.90)
74405	MR of the right ankle	04.00	64.100	3888.40 (3410.90)
74410	MR of the left ankle pre and post contrast	04.00	100.640	6105.00 (5355.30)
74415	MR of the right ankle pre and post contrast	04.00	100.640	6105.00 (5355.30)
74420	MR of the left foot	04.00	64.200	3894.50 (3416.20)
74425	MR of the right foot	04.00	64.200	3894.50 (3416.20)
74430	MR of the left foot pre and post contrast	04.00	102.040	6190.00 (5429.80)
74435	MR of the right foot pre and post contrast	04.00	102.040	6190.00 (5429.80)
74900	Nuclear Medicine study – Bone limited/regional static	04.00	21.500	1304.20 (1144.00)
74905	Nuclear Medicine study – Bone limited static plus flow	04.00	27.530	1670.00 (1464.90)
74910	Nuclear Medicine study – Bone tomography regional	04.00	13.410	813.50 (713.60)
Soft Tissue				
79900	Nuclear Medicine study – Tumour localisation planar, static	04.00	20.740	1258.10 (1103.60)
79905	Nuclear Medicine study – Tumour localisation planar, static, multiple studies	04.00	35.170	2133.50 (1871.50)
79910	Nuclear Medicine study – Tumour localisation planar, static and SPECT	04.00	34.150	2071.60 (1817.20)
79915	Nuclear Medicine study – Tumour localisation planar, static, multiple studies & SPECT	04.00	47.560	2885.10 (2530.80)
79920	Nuclear Medicine study – Infection localisation planar, static	04.00	18.430	1118.00 (980.70)
79925	Nuclear Medicine study – Infection localisation planar, static, multiple studies	04.00	31.840	1931.50 (1694.30)
79930	Nuclear Medicine study – Infection localisation planar, static and SPECT	04.00	31.840	1931.50 (1694.30)
79935	Nuclear Medicine study – Infection localisation planar, static, multiple studies and SPECT	04.00	45.250	2745.00 (2407.90)
79940	Nuclear Medicine study – Regional lymph node mapping dynamic	04.00	6.020	365.20 (320.40)
79945	Nuclear Medicine study – Regional lymph node mapping, static, planar	04.00	24.100	1462.00 (1282.50)
79950	Nuclear Medicine study – Regional lymph node mapping, static, planar, multiple studies	04.00	37.510	2275.40 (1996.00)
79955	Nuclear Medicine study – Regional lymph node mapping and SPECT	04.00	13.410	813.50 (713.60)
79960	Nuclear Medicine study – Lymph node localisation with gamma probe	04.00	13.410	813.50 (713.60)

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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.			05.03
80600	Percutaneous abscess, cyst drainage, any region	04.00	9.370	568.40 (498.60)
80605	Fine needle aspiration biopsy, any region	04.00	4.220	256.00 (224.60)
80610	Cutting needle, trochar biopsy, any region	04.00	6.360	385.80 (338.40)
80620	Tumour/cyst ablation chemical	04.00	25.370	1539.00 (1350.00)
80630	Tumour ablation radio frequency, per lesion	05.03	21.210	1286.60 (1128.60)
80640	Insertion of CVP line in radiology suite	04.00	8.990	545.40 (478.40)
80645	Peripheral central venous line insertion	05.03	12.120	735.20 (644.90)
80650	Infiltration of a peripheral joint, any region	05.03	6.400	388.20 (340.50)
	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.	05.03		
Neuro intervention				
81600	Intracranial aneurysm occlusion, direct	04.00	214.520	13013.20 (11415.10)
81605	Intracranial arteriovenous shunt occlusion	04.00	254.820	15457.90 (13559.60)
81610	Dural sinus arteriovenous shunt occlusion	04.00	264.330	16034.80 (14065.60)
81615	Extracranial arteriovenous shunt occlusion	04.00	157.280	9540.90 (8369.20)
81620	Extracranial arterial embolisation (head and neck)	04.00	163.120	9895.20 (8680.00)
81625	Carotico-cavernous fistula occlusion	04.00	192.290	11664.70 (10232.20)
81630	Intracranial angioplasty for stenosis, vasospasm	04.00	126.920	7699.20 (6753.70)
81632	Intracranial stent placement (including PTA)	05.03	133.720	8111.70 (7115.50)
81635	Temporary balloon occlusion test	04.00	83.420	5060.40 (4438.90)
	Code 81635 does not include the relevant preceding diagnostic study and may be combined with codes 10500, 10510, 10530, 10540, 10550.	05.03		
81640	Permanent carotid or vertebral artery occlusion (including occlusion test)	04.00	178.180	10808.80 (9481.40)
81645	Intracranial aneurysm occlusion with balloon remodelling	04.00	216.350	13124.20 (11512.50)
81650	Intracranial aneurysm occlusion with stent assistance	04.00	230.450	13979.60 (12262.80)
81655	Intracranial thrombolysis, catheter directed	04.00	58.940	3575.40 (3136.30)
	Code 81655 may be combined with any of the other neuro interventional codes 81600 to 81650	05.03		
81660	Nerve block, head and neck, per level	05.03	7.660	464.70 (407.60)
81665	Neurolysis, head and neck, per level	05.03	20.140	1221.70 (1071.70)
81670	Nerve block, head and neck, radio frequency, per level	05.03	19.040	1155.00 (1013.20)
81680	Nerve block, coeliac plexus or other regions, per level	05.03	9.280	562.90 (493.80)
Thorax				
82600	Chest drain insertion	04.00	8.820	535.00 (469.30)

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82605	Trachial, bronchial stent insertion	04.00		30.360	1841.70 (1615.50)
Gastrointestinal					
83600	Oesophageal stent insertion	04.00		31.220	1893.90 (1661.30)
83605	GIT balloon dilation	04.00		24.360	1477.70 (1296.20)
83610	GIT stent insertion (non-oesophageal)	04.00		32.020	1942.40 (1703.90)
83615	Percutaneous gastrostomy, jejunostomy	04.00		25.360	1538.40 (1349.50)
Hepatobiliary					
84600	Percutaneous biliary drainage, external	04.00		33.980	2061.30 (1808.20)
84605	Percutaneous external/internal biliary drainage	04.00		37.210	2257.20 (1980.00)
84610	Permanent biliary stent insertion	04.00		51.220	3107.10 (2725.50)
84615	Drainage tube replacement	04.00		20.220	1226.60 (1076.00)
84620	Percutaneous bile duct stone or foreign object removal	04.00		49.980	3031.90 (2659.60)
84625	Percutaneous gall bladder drainage	04.00		29.580	1794.40 (1574.00)
84630	Percutaneous gallstone removal, including drainage	04.00		69.250	4200.80 (3684.90)
84635	Transjugular liver biopsy	04.00		24.930	1512.30 (1326.60)
84640	Transjugular intrahepatic Portosystemic shunt	04.00		119.470	7247.30 (6357.30)
84645	Transhepatic Portogram including venous sampling, pressure studies	04.00		81.890	4967.60 (4357.50)
84650	Transhepatic Portogram with embolisation of varices	04.00		100.810	6115.30 (5364.30)
84655	Percutaneous hepatic tumour ablation	04.00		15.680	951.20 (834.40)
84660	Percutaneous hepatic abscess, cyst drainage	04.00		13.200	800.70 (702.40)
84665	Hepatic chemoembolisation	04.00		59.440	3605.70 (3162.90)
84670	Hepatic arterial infusion catheter placement	04.00		60.300	3657.90 (3208.70)
Urogenital					
85600	Percutaneous nephrostomy, external drainage	04.00		29.970	1818.00 (1594.70)
85605	Percutaneous double J stent insertion including access	04.00		40.820	2476.20 (2172.10)
85610	Percutaneous renal stone, foreign body removal including access	04.00		66.790	4051.60 (3554.00)
85615	Percutaneous nephrostomy tract establishment	04.00		29.270	1775.60 (1557.50)
85620	Change of nephrostomy tube	04.00		15.900	964.50 (846.10)
85625	Percutaneous cystostomy	04.00		16.520	1002.10 (879.00)
85630	Urethral balloon dilatation	04.00		14.240	863.80 (757.70)
85635	Urethral stent insertion	04.00		31.220	1893.90 (1661.30)
85640	Renal cyst ablation	04.00		11.920	723.10 (634.30)
85645	Renal abscess, cyst drainage	04.00		15.160	919.60 (806.70)
85655	Fallopian tube recanalisation	04.00		45.060	2733.40 (2397.70)
Spinal					
86600	Spinal vascular malformation embolisation	04.00		275.160	16691.80 (14641.90)
86605	Vertebroplasty per level	04.00		22.300	1352.80 (1186.70)

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86610	Facet joint block per level, uni- or bilateral	05.03		9.540	578.70 (507.60)
	Code 86610 may only be billed once per level, and not per left and right side per level	04.00			
86615	Spinal nerve block per level, uni- or bilateral	05.03		8.160	495.00 (434.20)
86620	Epidural block	04.00		9.420	571.40 (501.20)
86625	Chemoneurolysis, including discogram	04.00		18.320	1111.30 (974.80)
86630	Spinal nerve ablation per level	04.00		11.600	703.70 (617.30)
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 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.				04.00
87600	Percutaneous transluminal angioplasty: aorta, IVC	04.00		56.560	3431.00 (3009.60)
87601	Percutaneous transluminal angioplasty: iliac	04.00		55.760	3382.50 (2967.10)
87602	Percutaneous transluminal angioplasty: femoropopliteal	04.00		60.160	3649.40 (3201.20)
87603	Percutaneous transluminal angioplasty: subpopliteal	04.00		73.340	4449.00 (3902.60)
87604	Percutaneous transluminal angioplasty: brachiocephalic	04.00		67.120	4071.60 (3571.60)
87605	Percutaneous transluminal angioplasty: subclavian, axillary	04.00		60.160	3649.40 (3201.20)
87606	Percutaneous transluminal angioplasty: extracranial carotid	04.00		71.620	4344.60 (3811.10)
87607	Percutaneous transluminal angioplasty: extracranial vertebral	04.00		73.300	4446.50 (3900.40)
87608	Percutaneous transluminal angioplasty: renal	04.00		87.690	5319.50 (4666.20)
87609	Percutaneous transluminal angioplasty: coeliac, mesenteric	04.00		87.690	5319.50 (4666.20)
87620	Aorta stent-graft placement	04.00		120.750	7324.90 (6425.40)
87621	Stent insertion (including PTA): aorta, IVC	04.00		73.870	4481.10 (3930.80)
87622	Stent insertion (including PTA): iliac	04.00		76.370	4632.80 (4063.90)
87623	Stent insertion (including PTA): femoropopliteal	04.00		77.970	4729.80 (4148.90)
87624	Stent insertion (including PTA): subpopliteal	04.00		84.550	5129.00 (4499.10)
87625	Stent insertion (including PTA): brachiocephalic	04.00		98.470	5973.40 (5239.80)
87626	Stent insertion (including PTA): subclavian, axillary	04.00		86.690	5258.80 (4613.00)
87627	Stent insertion (including PTA): extracranial carotid	04.00		106.990	6490.20 (5693.20)
87628	Stent insertion (including PTA): extracranial vertebral	04.00		100.550	6099.60 (5350.50)
87629	Stent insertion (including PTA): renal	04.00		98.590	5980.70 (5246.20)
87630	Stent insertion (including PTA): coeliac, mesenteric	04.00		98.590	5980.70 (5246.20)
87631	Stent-graft placement: iliac	04.00		76.370	4632.80 (4063.90)
87632	Stent-graft placement: femoropopliteal	04.00		77.970	4729.80 (4148.90)
87633	Stent-graft placement: brachiocephalic	04.00		98.470	5973.40 (5239.80)
87634	Stent-graft placement: subclavian, axillary	04.00		82.770	5021.00 (4404.40)
87635	Stent-graft placement: extracranial carotid	04.00		120.430	7305.50 (6408.30)
87636	Stent-graft placement: extracranial vertebral	04.00		114.730	6959.80 (6105.10)

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87637	Stent-graft placement: renal	04.00		98.590	5980.70 (5246.20)
87638	Stent-graft placement: coeliac, mesenteric	04.00		98.590	5980.70 (5246.20)
87650	Thrombolysis in angiography suite, per 24 hours	04.00		45.820	2779.50 (2438.20)
	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.	05.03			
87651	Aspiration, rheolytic thrombectomy	04.00		77.670	4711.60 (4133.00)
87652	Atherectomy, per vessel	04.00		91.890	5574.20 (4889.60)
87653	Percutaneous tunnelled / subcutaneous arterial or venous central or other line insertion	05.03		28.150	1707.60 (1497.90)
87654	Thrombolysis follow-up	04.00		23.570	1429.80 (1254.20)
87655	Percutaneous sclerotherapy, vascular malformation	04.00		21.100	1280.00 (1122.80)
87660	Embolisation, mesenteric	04.00		100.430	6092.30 (5344.10)
87661	Embolisation, renal	04.00		99.360	6027.40 (5287.20)
87662	Embolisation, bronchial, intercostal	04.00		108.340	6572.10 (5765.00)
87663	Embolisation, pulmonary arteriovenous shunt	04.00		103.220	6261.50 (5492.50)
87664	Embolisation, abdominal, other vessels	04.00		101.440	6153.60 (5397.90)
87665	Embolisation, thoracic, other vessels	04.00		97.600	5920.60 (5193.50)
87666	Embolisation, upper limb	04.00		90.920	5515.40 (4838.10)
87667	Embolisation, lower limb	04.00		92.140	5589.40 (4903.00)
87668	Embolisation, pelvis, non-uterine	04.00		117.120	7104.70 (6232.20)
87669	Embolisation, uterus	04.00		113.880	6908.20 (6059.80)
87670	Embolisation, spermatic, ovaria veins	04.00		85.820	5206.00 (4566.70)
87680	Inferior vena cava filter placement	04.00		61.840	3751.30 (3290.60)
87681	Intravascular foreign body removal	04.00		85.030	5158.10 (4524.60)
87682	Revision of access port (tunnelled or implantable)	05.03		14.120	856.50 (751.30)
87683	Removal of access port (tunnelled or implantable)	05.04		11.120	674.60 (591.80)
87690	Superior petrosal venous sampling	04.00		73.010	4428.90 (3885.00)
87691	Pancreatic stimulation test	04.00		89.790	5446.80 (4777.90)
87692	Transportal venous sampling	04.00		76.950	4667.90 (4094.60)
87693	Adrenal venous sampling	04.00		55.010	3337.00 (2927.20)
87694	Parathyroid venous sampling	04.00		86.660	5257.00 (4611.40)
87695	Renal venous sampling	04.00		55.010	3337.00 (2927.20)

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ANNEXURE A	
<p>Radiology tariff Contrast price effective 1 Jan 2004 PER VIAL For use in conjunction with codes:</p> <p>00190 X-ray examination contrast material 00290 Ultrasound examination contrast material 00390 CT examination contrast material 00490 MR examination contrast material 00590 Angiography and interventional examination contrast material</p> <p>Note to Funders: The following contrast items may be grouped into various categories e.g. Ionic, non-Ionic, and several items may be appropriate for use within a category. Funders may either reimburse as per identified item or may choose to apply a reference price within a category. For detail of methodology refer to Annexure B.</p>	04.00
ANNEXURE B	
Radiology tariff Contrast price effective 1 Jan 2004 PER VIAL	04.00
Contrast Index Price Range - 2004 contrast prices	04.00
ANNEXURE C	
<p>Recommended Isotope and Kit Prices for Nuclear Medicine for 2004 by the Association of Nuclear Medicine Physicians For use in conjunction with codes:</p> <p>00990 Nuclear Medicine Isotope 00991 Nuclear Medicine Substrate</p> <p><<Insert object table here>></p>	04.00