

MRI CONTRAST ORDERING GUIDELINES

BODY PART	REASON FOR EXAM	PROCEDURE NAME	CPT CODE
BRAIN	Headaches/Injury	MRI Brain w/o Contrast	70551
	Headache/Migraine/Stroke/TIA/Seizures/Epilepsy/ Multiple Sclerosis/Neurological Change/Trauma	MRI Brain w/o & with Contrast	70553
HEAD Vascular	Aneurysms/Stroke/Dizziness	MRA (Angiography) Head w/o & with Contrast	70546
NECK Vascular	Stroke/Aneurysm/Dissection	MRA Neck w/o & with Contrast	70549
NECK Soft Tissue	Mass/Infection/Tumor Evaluation	MRI Soft Tissue Neck w/o & with Contrast	70543
ABDOMEN *Coverage is diaphragm to iliac crest only. Not to be ordered to evaluate colon.	Known Liver Lesion, Renal/Adrenal Mass	MRI Abdomen w/o & with Contrast	74183
SOFT TISSUE PELVIS *Coverage is from top of iliac crest through lesser trochanters	Pelvis Mass/Female Anatomy	MRI Pelvis w/o and with Contrast	72197
PROSTATE *Coverage prostate and bladder.	Elevated PSA/Prostate Cancer	MRI Prostate w/o and with Contrast	72197
SPINE	Pain/Trauma/Radiculopathy	Cervical MRI w/o Contrast	72141
		Thoracic MRI w/o Contrast	72146
		Lumbar MRI w/o Contrast	72148
		Sacrum/SI Joints MRI w/o Contrast	72195
	Pain (prior surgery)/Mass/Infection/F/U Post Surgery	Cervical MRI w/o and Contrast	72156
		Thoracic MRI w/o and Contrast	72157
		Lumbar MRI w/o and Contrast	72158
		Sacrum/SI Joints MRI w/o and with Contrast	72197
BONY PELVIS *Coverage is from top of iliac crest through lesser trochanters	Bony Pelvic Pain/Hernia	MRI Pelvis w/o Contrast	72195
	Bony Metastasis/Mass/infection	MRI Pelvis w/o & with Contrast	72197
BREAST	Implant Integrity	MRI Breast w/o Contrast	77047
	Breast Cancer/High Risk/Dense Breast Tissue	MRI Breast w/o & with Contrast	77049
EXTREMITIES	Pain/Injury/Arthritis (Shoulder/Elbow/Wrist)	MRI Upper Extr. Joint w/o Contrast	73221
	Pain/Injury/Arthritis (Humerus/Forearm/Hand)	MRI Upper Extr. Non Joint w/o Contrast	73218
	Pain/Injury/Arthritis (Hip/Knee/Ankle)	MRI Lower Extr. Joint w/o Contrast	73721
	Pain/Injury/Arthritis (Femur/Tib/Fib/Foot)	MRI Lower Extr. Non Joint w/o Contrast	73718



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BODY PART	REASON FOR EXAM	PROCEDURE NAME	CPT CODE
EXTREMITIES	Mass/Infection	MRI Upper Extr. Joint w/o & with Contrast	73223
		MRI Upper Extr. Non Joint w/o & with Contrast	73220
		MRI Lower Extr. Joint w/o & with Contrast	73723
		MRI Lower Extr. Non Joint w/o & with Contrast	73720
	Joint or Labrum Injury/Cartilage Evaluation/Prior Surgery *(Add Fluoro Guided Needle Placement)	MRA (Arthrogram) Upper Extr. Joint with Contrast	73222
		MRA (Arthrogram) Lower Extr. Joint with Contrast	73722

