



# Ready Reference Guide

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**RADIOLOGY ASSOCIATES**  
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**PLEASE NOTE:** When ordering bilateral studies, the CPT must be for a quantity of two (2)

**CT SCAN**

Abdomen w/o contrast . . . . .	74150
Abdomen w/ contrast . . . . .	74160
Abdomen w & w/o contrast . . . . .	74170
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Colonography, screening . . . . .	74263
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Lower Extremity w/o contrast . . . . .	73700
Lower Extremity w/ contrast . . . . .	73701
Lower Extremity w/o & w/ contrast . . . . .	73702
Lumbar Spine w/o contrast . . . . .	72131
Lumbar Spine w/ contrast . . . . .	72132
LDCT Screening . . . . .	71271
Lumbar Spine w/o & w/ contrast . . . . .	72133

**(CT continued)**

Neck, Soft Tissue w/o contrast . . . . .	70490
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Orbit, Sella, IACS w/o contrast . . . . .	70480
Orbit, Sella, IACS w/ contrast . . . . .	70481
Orbit, Sella, IACS w/o & w/ contrast . . . . .	70482
Pelvis w/o contrast . . . . .	72192
Pelvis w/ contrast . . . . .	72193
Pelvis w/ & w/o contrast . . . . .	72194
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**PET (Town Center, Twin Lakes & Port Orange Only)**

PET Axumin . . . . .	78815 & A9588
PET Dotatate . . . . .	78815 & A9587
PET Brain Complete . . . . .	78608
PET/CT Head/Neck Complete . . . . .	78815
PET/CT Tumor Complete . . . . .	78816
PET/CT Melanoma Complete . . . . .	78816
PET/CT PSMA . . . . .	78815 & A9596

**NUCLEAR MEDICINE**

**(Deltona Exempt)**

Bone Scan Limited . . . . .	78300
Bone Scan Whole Body . . . . .	78306
Cardiac/MUGA . . . . .	78472
Cardiac/Thallium . . . . .	78452
Gastric Emptying Study . . . . .	78264
HIDA Scan . . . . .	78227
Renal Scan/Flow & Function . . . . .	78708
Thyroid Uptake & Scan . . . . .	78014



**PLEASE NOTE:** When ordering bilateral studies, the CPT must be for a quantity of two (2)

**MRI**

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- Brain w/o contrast . . . . . 70551
- Brain w/ contrast . . . . . 70552
- Brain w/ & w/o contrast . . . . . 70553
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- Breast Unilateral . . . . . 77048
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- Lower Extremity Joint w/contrast . . . . . 73722
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**(MRI continued)**

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**PLEASE NOTE:** When ordering bilateral studies, the CPT must be for a quantity of two (2)

**X-RAY**

Cervical Spine Complete . . . . .	72050
Cervical Spine Limited (AP/LAT) . . . . .	72040
Thoracic Spine Complete . . . . .	72072
Thoracic Spine Limited (AP/LAT) . . . . .	72070
Lumbar Spine Complete . . . . .	72110
Lumbar Spine Limited (AP/LAT) . . . . .	72100
Sacrum . . . . .	72220
Sacrum & Coccyx . . . . .	72220
Chest 2 View (AP/LAT) . . . . .	71020
<i>(Please specify left or right)</i>	
Shoulder (Minimum 2 views) . . . . .	73030
Shoulder Limited (One View) . . . . .	73020
Elbow (Minimum 3 views) . . . . .	73080
Elbow Limited (AP/LAT) . . . . .	73070
Forearm . . . . .	73090
Wrist (Minimum 3 views) . . . . .	73110
Wrist Limited (AP/LAT) . . . . .	73100
Hand (Minimum 3 views) . . . . .	73130
Hand Limited (AP/LAT) . . . . .	73120
Finger (Minimum 2 views) . . . . .	73140
<i>(Please specify which finger)</i>	
Hip Unilateral . . . . .	73502
<i>(Please specify left or right)</i>	
Hip w/ AP Pelvis Bilateral . . . . .	73521
Pelvis (One or two views) . . . . .	72170
Pelvis Complete (Minimum 3 views) . . . . .	72190
Femur . . . . .	73552
Knee Complete (4 or more views) . . . . .	73564
Knee (AP/LAT) . . . . .	73560
Knee (Standing View(s) of both knees) . . . . .	73565
Tibia & Fibula (AP/LAT) . . . . .	73590
Ankle Complete . . . . .	73610
Ankle Limited (AP/LAT) . . . . .	73600
Foot Complete . . . . .	73630
Foot Limited (AP/LAT) . . . . .	73620
Toe (Minimum 2 views) . . . . .	73660
<i>(Please specify which toe)</i>	

**ULTRASOUND**

Abdomen Complete . . . . .	76700
Abdomen Limited . . . . .	76705
Aorta . . . . .	76770
Breast Bilateral/Unilateral . . . . .	76645
Carotid Doppler . . . . .	93880
<i>(NOT screening used as GRAFT surveillance)</i>	
Echocardiogram . . . . .	93306
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Transvaginal . . . . .	76830
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Venous Doppler Bilateral . . . . .	93970

**BONE DENSITY (DEXA)**

Bone Densitometry (DEXA) . . . . .	77080
DEXA for Vertebral Fracture Assessment . . . . .	77086



TABLE LIMITS	TWIN LAKES	PORT ORANGE	PALM COAST	SAINT AUGUSTINE	TOWN CENTER	DELTONA	NEW SMYRNA BEACH
<b>FL</b>	550	550	-	350	400	-	-
<b>BD</b>	350	350	350	350	350	350	350
<b>X-RAY</b>	450	450	800	660	460	660	450
<b>CT</b>	500	500	400	500	500/430	400	500
<b>NM</b>	500 (Skylight)	500 (Skylight)	-	500 (Vertex)	400 (Forte)	-	-
<b>PET</b>	430	430	-	-	430	-	-
<b>3T</b>	550	550	-	550	550	550	550
<b>1.5T</b>	550	-	550	-	-	-	-
<b>US #1</b>	500	500	500	500	500	500	500
<b>US #2</b>	500	500	350	-	350	500	-
<b>US #3</b>	350	500	-	-	-	-	-
<b>STEREO</b>	300	-	-	300	-	-	-
<b>US ECHO</b>	500	500	500	500	-	n\a	-
<b>US #5</b>	500	-	-	-	-	-	-



We are proudly contracted with a variety of insurances and file all claims with the exception of non-contracted HMO's. Please see below for a detailed list of who we are contracted with.

- AARP MCR COMPLETE
- AETNA AND AETNA MCR
- AMBETTER
- ALLWELL
- BCBS FL, MOST BCBS OUT OF STATE PLANS, FEDERAL BCBS
- CARE PLUS
- CIGNA – INCLUDING SAMBA, NALC, PLUMBERS & PIPEFITTERS
- EMPIRE
- FLORIDA HEALTH CARE
- FREEDOM HEALTH
- GEHA
- GHI
- HUMANA COMMERCIAL, HUMANA GOLD PLUS, HUMANA MCR PPO – **WE DO NOT ACCEPT HUMANA MEDICAID**
- MEDICAID – FLORIDA MEDICAID, MOLINA
- MEDICARE
- MEDISHARE
- MOST PHCS/MULTIPLANS
- OPTIMUM HEALTHCARE
- OXFORD
- SUNSHINE STATE
- TRICARE PRIME
- TRICARE FOR LIFE
- TRICARE REGIONS
- UNITED HEALTH CARE – COMMERCIAL, MEDICAID, GOLDEN RULE
- UMR
- WELLCARE
- MOST MOTOR VEHICLE CLAIMS
- MOST WORKMAN'S COMP

**WE DO NOT ACCEPT MOTORCYCLE INSURANCE, SLIP AND FALLS OR SINGLE CASE AGREEMENTS FROM WORKMAN'S COMP**

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**Don't see your insurance listed here? Give us a call at (386) 274-6000 and we will let you know if or how we can work with you to serve your needs.**



For more information please call  
(386) 274-6000 or visit us online at:  
[www.RadiologyAssociatesImaging.com/patient-preps](http://www.RadiologyAssociatesImaging.com/patient-preps)

**The patient may still take prescribed medicines  
with a small amount of water.**

### **BREAST ASPIRATION**

For your convenience, please wear a two-piece outfit. Do not use deodorant, powder, or perfume under the arm or breast area.

### **BREAST MRI**

If you need sedation for claustrophobia, you must have someone else drive you to and from your exam. We call all patients two to three days before their appointments to confirm your appointment time and to determine the patient's physical eligibility for an MRI. If you are unable to receive our call or if you have any questions, please call us at (386) 274-6000.

- Do not wear jewelry
- Do not wear anything with metal (zippers, snaps, hooks.) Athletic wear with elastic waistband is a good choice.

### **BREAST ULTRASOUND**

For your convenience, please wear a two-piece outfit. Do not use deodorant, powder, or perfume under the arm or breast area.

### **DEXA (BONE DENSITOMETRY)**

- No calcium supplements or osteoporosis medication 24 hours prior to your exam.
- No barium, nuclear medicine or I.V. contrast exams within 7 days prior your exam.
- Please wear comfortable clothes and avoid metal buttons or buckles.

### **3D MAMMOGRAPHY/ TOMOSYNTHESIS**

For your convenience, please wear a two-piece outfit. Do not use deodorant, powder, or perfume under the arm or breast area.

Please bring your most recent mammogram if done at another facility.

### **STEREOTACTIC BREAST BIOPSY**

There are several things you can do to make your procedure easier, more efficient and more comfortable.

- Discuss any medication you are taking with your clinician. You may be asked to stop the use of blood-thinning medications, including aspirin, a number of days prior to your biopsy procedure.
- Wear a two-piece outfit that is comfortable and easy to remove.
- Do not use deodorant, powder, or perfume under the arm or breast area. They may interfere with the quality of the images taken during your procedure.
- Eat a light meal before your procedure.



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### MRI

If you need sedation for claustrophobia, you must have someone else drive you to and from your exam. We call all patients one to three days before their appointment to confirm your appointment time and to determine the patient's physical eligibility for an MRI. If you are unable to receive our call or if you have any questions, please call us at (386) 274-6000.

- Do not wear jewelry
- Do not wear anything with metal (zippers, snaps, hooks.) Athletic wear with elastic waistband is a good choice.
- Patients having an MRI of the head or neck should not wear makeup.

### MRI GUIDED BREAST BIOPSY

We call all patients two to three days before their appointments to confirm your appointment time and to determine the patient's physical eligibility for an MRI. If you are unable to receive our call or if you have any questions, please call us at (386) 274-6000.

There are several things you can do to make your procedure easier, more efficient and more comfortable.

- Do not wear jewelry
- Do not wear anything with metal (zippers, snaps, hooks.) Athletic wear with elastic waistband is a good choice.
- Discuss any medication you are taking with your clinician. You may be asked to stop the use of blood-thinning medications, including aspirin, a number of days prior to your biopsy procedure.
- Do not use deodorant, powder, or perfume under the arm or breast area. They may interfere with the quality of the images taken during your procedure.
- Eat a light meal before your procedure.

### MRCP

DO NOT EAT OR DRINK four (4) hours before exam.

### FLUOROSCOPY/Abdomen Studies

Since the tests use x-rays, the technologist will ask females of childbearing age whether there is any chance they are pregnant.

Be sure to tell your doctor and imaging center staff about any possible allergies to iodine or x-ray contrast prior to scheduling the procedure.

#### **Upper GI, UGI & Small Bowel, Small Bowel Only:**

If your exam is scheduled for the morning, DO NOT EAT or DRINK after midnight of the night before your exam.

If your exam is in the afternoon, you may have a light breakfast, but DO NOT EAT or DRINK at least 4 hours before your exam.

Small Bowel will take up to four (4) hours to complete.

**Barium Enema, IVP:** Begin clear liquid diet at 12:00 noon the day before your exam and drink one bottle of Magnesium Citrate. At 6:00pm that same day, drink another bottle of Magnesium Citrate and take 2 Dulcolax tablets. At 10:00pm the evening before your test, take 2 more Dulcolax tablets. Try to drink one 8oz. glass of water each hour from noon to bedtime. These items can be purchased over the counter at any pharmacy.

### ULTRASOUND STUDIES

**Abdomen, Gallbladder:** DO NOT EAT OR DRINK anything six (6) hours before exam. CHILDREN: 4 hours fasting.

**Pelvic Ultrasound:** Two (2) hours before your exam time, EMPTY your bladder. One (1) hour prior to your exam time (before arriving), drink at least 32 ounces of fluid. Bladder must be FULL for this exam. Do NOT urinate until after your exam. No fasting is necessary.





## Test Preparations

For more information please call  
(386) 274-6000 or visit us online at:  
[www.RadiologyAssociatesImaging.com/patient-preps](http://www.RadiologyAssociatesImaging.com/patient-preps)

### PET/CT

- Must be able to lie still for up to 90 minutes.
- Do not wear anything with metal (zippers, snaps, hooks). Athletic wear with elastic waistband is a good choice.
- Take necessary pain medications before leaving home and bring additional pain medication with you at time of visit.
- Claustrophobic patients should take Valium prior to leaving home and arrive with a driver.
- May take any other prescribed medications, as long as they can be tolerated on an empty stomach.
- No food for 6 hours prior to study. May drink water, but no other type of liquid is allowed.
- Glucose levels will be checked prior to exam.
- Insulin dependent patients may bring insulin with them to be administered after their scan.
- No physical activity for 48 hours prior to exam.
- ABSOLUTELY NO SUGAR OR ARTIFICIAL SWEETENER for 24 HRS before exam.

### CT (CAT SCAN) ABDOMEN/PELVIS

DO NOT EAT OR DRINK four (4) hours before exam.  
May drink water up to appointment time.

The prep supplies for CT abdomen and pelvis exams are available for you to pick up at the location where your exam is scheduled. If you have any questions regarding your exam, please call (386) 274-6000.

### CT ANGIOGRAPHY (CTA)

You will be asked not to eat or drink anything for one or more hours before your exam. If you have any questions regarding your exam, please call (386) 274-6000.

### CT ENTEROGRAPHY

You will be asked not to eat or drink anything for four hours before your exam. You will need to arrive 1 hour prior to your appointment time to begin the oral prep. If you have any questions regarding your exam, please call (386) 274-6000.

### CT COLONOGRAPHY

Please call for special instructions.

### NUCLEAR MEDICINE STUDIES

**(HIDA) Hepatobiliary Scan or Gastric Emptying Study:** DO NOT EAT OR DRINK six (6) hours before exam.

**Bone Scan:** NO PREP. 2-part study: 1. Receive an injection, 2. Return to center 2-4 hours later for remainder of exam.

**Thyroid Uptake Scan, Cardiac Study:** Please call for instructions.

**FDG/PET Tumor Localization:** DO NOT EAT OR DRINK anything except water and medication for six (6) hours before exam. ABSOLUTELY NO SUGAR OR ARTIFICIAL SWEETENER for 24 HRS. Please call for additional dietary instructions.

**I-123 MIBG Scan:** Your doctor will prescribe a medication regimen for 1 week prior to the exam. Please consult your physician for more details.

### SPECIAL PROCEDURES

Please call for instructions on how to prepare for special procedures.



# RADIOLOGY ASSOCIATES

## Locations & Contact

**Main Scheduling: 386-274-6000**

### St. Augustine

190 Southpark Blvd, Suite 101 • St. Augustine, FL 32086

**Hours:** Mon-Fri 7am-6pm

**904-827-9191 • 904-827-9171 Fax**

### Palm Coast

3 Pine Cone Drive, Suite 101 • Palm Coast, FL 32137

**Hours:** Mon-Fri 7am-5pm

**386-446-5200 • 386-446-1866 Fax**

### Town Center

21 Hospital Drive, Suite 130 • Palm Coast, FL 32164

**Hours:** Mon-Fri 7am-6pm

**386-446-5200 • 386-446-1866 Fax**

### Twin Lakes

1890 LPGA Blvd, Suite 110 • Daytona Beach, FL 32117

**Hours:** M, T, Th, F 7am-6pm • Wed 7am-8pm • Sat 8am-4pm

**386-274-5454 • 386-274-5440 Fax**

### Port Orange

1195 Dunlawton Ave • Port Orange, FL 32127

**Hours:** Mon 7am-8pm • T, W, Th 7am-7pm • Fri 8am-5pm

**386-322-1616 • 386-322-5330 Fax**

### Deltona

3400 Halifax Crossing Blvd, Suite 170

Deltona, FL 32725

**Hours:** Mon-Fri 8am-5pm

**386-259-5959 • 386-259-5999 Fax**

### Daytona Beach Shores

3048 S Atlantic Ave

Daytona Beach Shores, FL 32118

**Hours:** Mon-Fri 8am-5pm

**386-872-3401**

### Port Orange West

5440 S Williamson Blvd, Suite 102

Port Orange, FL 32128

**Hours:** Mon-Fri 8am-5pm

**386-872-3410 • 386-872-3464 Fax**

### New Smyrna Beach

New Smyrna Beach

1998 State Road 44, Suite 3

New Smyrna Beach, FL 32168 (Next to Big Lots)

**Hours:** Mon-Fri 8am-5pm

**386-410-3830 • 386-402-4575 Fax**



Radiology Associates Imaging offers the use of web-based applications for ordering studies and viewing images. It is our goal to always enhance the workflow of referring physicians and their staff to minimize or eliminate wait time on a phone and maximize image quality of the final product. Both programs are easily installed by your Radiology Associates Marketing Representative.

**Please contact your representative to schedule an installation and training session:**

#### Matt Stephens

Twin Lakes, Deltona and Daytona Beach Shores

MStephens@radassociates.us • (386) 872-1368

#### Yvette Smith

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YSmith@radassociates.us • (386) 679-1684

#### Lisa Stinson - St. Augustine

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#### Christi Rosenke - Port Orange, Daytona Beach Shores,

Belvedere (Port Orange) and New Smyrna Beach

CRosenke@radassociates.us • (386) 295-6916



**A board certified radiologist is always available to ensure the highest quality of care for your patients.**



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