

Baystate Health

Department of Radiology

MRI Ordering Guidelines

Exam	Reason for Exam	Contrast?	ACPOE Name	CPT Code
BRAIN	Headache, syncope, TIA, mental status change, seizure (under 25 years old) stroke, shunt, infarction, trauma, hydrocephalus, ischemia	W/O	MRI Brain W/O Contrast	70551
BRAIN	MS, primary tumor, metastasis, seizures over the age of 25, follow up white matter lesions, brain lab and SRS studies, unexplained hematoma, cranial nerve palsy, pituitary, IAC	W & W/O	MRI Brain W+W/O Contrast	70553
BRAIN MRA/MRV	MRA ONLY - aneurysm, vascular stenosis, TIA	W/O	MRA Head W/O Contrast	70544
	MRV ONLY - venous sinus thrombosis	With	MRA Head W/ Contrast	70545
TMJ'S	MRA AND MRV - venous sinus thrombosis, aneurysm, vascular stenosis, TIA	W & W/O	MRA Head W+W/O Contrast	70546
	Clicking of joint, facial pain, decreased range of motion, Dislocation, avascular necrosis, meniscus injury	W/O	MRI TMJ	70336
ORBITS	Visual deficit, mass, infection, Grave's disease, optic neuritis	W & W/O	MRI Orbit, Face, Neck W+W/O Contrast	70543
SOFT TISSE NECK	All indications	W & W/O	MRI Orbit, Face, Neck W+W/O Contrast	70543
ABDOMEN ONLY (Liver Mass Protocol)	Characterize masses previously seen on CT or US-hepatoma screening-metastasis follow-up/ post cryo or Rf ablation-assessment of spleen-pancreatic masses with question of liver mets *This scan MAY include MRCP: if so the patient needs to fast 4 hours before scan.	W & W/O	MRI Abdomen W+W/O Contrast	74183
ABDOMEN ONLY (Pancreatic Protocol)	<ul style="list-style-type: none"> Assess for presence of or characterize a suspected pancreatic mass seen on another study- This scan ALWAYS includes MRCP so patient needs to fast 4 hours before scan Patient must fast 4 hours prior to scan; suspected choledocholithiasis usually in a patient with elevated "LFT's" biliary tree obstruction; dilated common bile ducts seen on US	W & W/O	MRI Abdomen W+W/O Contrast	74183
ABDOMEN ONLY (MRCP)	* ANY OTHER HISTORY WILL REQUIRE A PANCREATIC MASS PROTOCOL AND WILL THEN REQUIRE CONTRAST	W/O	MRI Abdomen W/O Contrast	74181

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<p>ABDOMEN ONLY (Renal Mass Protocol)</p>	<p>Characterize renal mass previously seen on CT or US. / post cryo or RF ablation, status post partial nephrectomy</p>	<p>W & W/O</p>	<p>MRI Abdomen W+W/O Contrast</p>	<p>74183</p>
<p>ABDOMEN ONLY (Adrenal Glands)</p>	<p>Characterize a previously identified adrenal mass</p>	<p>Usually W/O contrast</p>	<p>MRI Abdomen W/O Contrast</p>	<p>74181</p>
<p>ABDOMEN AND PELVIS</p>	<p>APPENDICITIS in child between the ages of 7 and 18 (younger if calm) and pregnant patients * If pregnant suspicion of appendicitis, suspicion of obstructing nephrolithiasis, post traumatic evaluation, suspicion of bowel obstruction ENTEROGRAPHY: Usually done at Wason. (Not done at Noble) Fast for 6 hours prior to exam. Oral contrast in MRI; arrive 1 hour before scan time to drink Used to detect and characterize Chron's disease, terminal ileitis, small bowel and colonic strictures, rule out abscess, phlegmon or fistula Lymphadenopathy assessment, tumor surveillance or tumor staging</p>	<p>W & W/O and W/ Oral</p>	<p>MRI Abdomen W+W/O Contrast and MRI Pelvis W+W/O Contrast</p>	<p>74183 72197</p>
<p>PELVIS ONLY</p>	<p>Dynamic Pelvis/MR Defecography: assess pelvic floor laxity and disorders of evacuation Uterine anomaly: characterize suspected developmental abnormality</p>	<p>W/O</p>	<p>MRI Pelvis W/O Contrast</p>	<p>72195</p>
<p>PELVIS ONLY</p>	<p>Characterize perianal fistula and or abscess Pelvic tumors (prostate requires 3T) Ureteral diverticulum, pre-fibroid evaluation</p>	<p>W & W/O</p>	<p>MRI Pelvis W+W/O Contrast</p>	<p>72197</p>
<p>CARDIAC</p>	<p>All indications (BMC only)</p>	<p>USUALLY W & W/O</p>	<p>MRI Cardiac W+W/O Contrast (preferred)</p>	<p>75561</p>
<p>MUSCULOSKELETAL</p>	<p>Evaluation of pain, impingement, instability, recurrent dislocation, frozen joint, rotator cuff / labral / cruciate / Achilles/ injury/ baker's cyst/avascular necrosis/ fracture/ unexplained pain/ muscle tears/</p>	<p>W/O</p>	<p>MRI Ext Upper/Lower W/O Contrast Rt or Lt Or MRI Joint Ext Upper/Lower W/O Contrast Rt or Lt</p>	<p>Upper w/o 73218 Lower w/o 73718 Upper Joint w/o 73221 Lower joint w/o 73721</p>

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	Any diagnosis of mass, (soft tissue or bony) tumor Osteomyelitis/infection/abscess/ metastatic disease/arthritis/juvenile arthritis	W & W/O	MRI Ext Upper/Lower W+W/O Contrast Rt or Lt Or MRI Joint Ext Upper/Lower W+W/O Contrast Rt or Lt	Upper w and w/o 73220 Lower w and w/o 73720 Upper joint w and w/o 73223 Lower joint w and w/o 73723
PELVIS / HIP (MSK)	Fracture, dislocation	W/O	MRI Pelvis W/O Contrast	72195
ARTHROGRAM	All indications	Contrast administered in X-Ray: coordinate appt. with x-ray fluoro time. MRI is With Contrast	MRI Joint Ext Upper/Lower W/ Contrast Rt or Lt	Upper joint w/ 73222 Lower joint w/ 73722
SPINE	Pain, Trauma Disc disease, Radiculopathy Cord compression with no history of cancer	W/O	MRI Cervical Spine W/O Contrast or MRI Thoracic Spine W/O Contrast or MRI Lumbar Spine W/O Contrast	Cervical 72141 Thoracic 72146 Lumbar 72148

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	Metastatic disease or spine tumor, Infection, Multiple Sclerosis Cord compression with history of cancer Prior spine surgery (lumbar spine exams only)	W & W/O	MRI Cervical Spine W+W/O Contrast or MRI Thoracic Spine W+W/O Contrast or MRI Lumbar Spine W+W/O Contrast	Cervical 72156 Thoracic 72157 Lumbar 72158
ANGIO CHEST	All indications (Chest not done at Noble)	With	MRA Chest W/ Contrast (preferred)	71555
ANGIO ABDOMEN/PELVIS	All indications	With	MRA Abdomen W/ Contrast (preferred) Or MRA Pelvis W/ Contrast (preferred)	74185 Or 72198
ANGIO HEAD MRA	All indications	W/O	MRA Head W/O Contrast	70544
ANGIO NECK MRA	All indications	With	MRA Neck W/ Contrast (preferred) MRA Neck W/O Contrast	w/ 70548 w/o 70547
BREAST	Implant rupture (Done at Wason Only) Possible cancer (Done at Wason Only)	W/O W & W/O		77046 77048

Revised
3/31/21