



**FULL-SERVICE, ALL DIGITAL IMAGING NETWORK**

**VASCULAR & INTERVENTIONAL PROCEDURES CPT GUIDE 2021  
WEST COVINA & DOWNEY**

**MAIN: (626) 773-7718 | FAX (626) 962-7009**



<b>DIALYSIS ACCESS MANAGEMENT &amp; MAINTENANCE</b>												
AV Fistulogram/Declot	36901	36902	36903	36904	36905	36906	36907	36908	36909	76937	99152	80047
Venogram	75822	77001	36005 (if bilateral x 2)									
Tunneled Peritoneal Dialysis Cath	49418	99152	80047	77012	99203							
<b>PERMACATH (TUNNELED CATHETER)</b>												
Placement	36558	77001	76937	99152	80047	J0690						
Exchange	36581	36589	77001	76937	99152	80047						
Removal	36589	77001	76937	99152	80047							
<b>QUINTON (NON-TUNNELED CATHETER)</b>												
Placement	36556	77001	76937									
Removal	Order from Provider Only											
<b>ULTRASOUND OR CT GUIDED BIOPSIES &amp; DRAINAGE</b>												
Breast Biopsy	19083	19084	19000	76942	76642	10005	10006	(If Axilla : Add 10005 Mod : 59 & 38505 Mod: 59)				
Thyroid Biopsy	60100	10005	10006	76942								
Lung Biopsy	32408	77012	99152 (x3)	80047	71045 (x3)	10009	10010	32557				
Liver Biopsy	47000	77012	76942	99152	80047							
Renal Biopsy	50200	77012	76942	99152	80047							
Soft Tissue or Lymph Node Biopsy	38505	10005	10006	10009	10010	76942	77012					
Bone Marrow Biopsy	38222	77012	99152	80047								
Thoracentesis	32555	76942										
Paracentesis	49083	76942										
<b>VASCULAR PROCEDURES</b>												
Angiogram (Abd Aorta & Runoff)	75630	75716	36200	36245	36246	37220	37221	37222	37224	37225	37226	
	37227	37228	37229	37230	76937	99152	G0269	80047				
Renal Unilateral Angiogram	75625	36200	36251	75966	34571	37205	37236	76937	99152	G0269		
IVC Filter - Insertion	37191	99152	77001									
IVC Filter - Removal	37193	99152	77001									
<b>ALL VENOUS ACCESS</b>												
<b>PICC LINE</b>												
Placement	36573	77001	76937									
Removal	Order from Provider Only											
<b>PORT-A-CATH/MEDIPOINT</b>												
Placement	36561	77001	76937	99152	J0690	80047						
Removal	36590	77001	76937	99152								
Assessment	75827	36598	77001									
<b>OTHER NON-VASCULAR PROCEDURES</b>												
Myelogram Lumbar	62284	77003	77012									
Myelogram Cervical	62302	77003	77012									
Myelogram Thoracic	62303	77003	77012									
Myelogram of 2 or More Regions	62305	77003	77012									
Kyphoplasty	22513	22514	22515	99152	77003							
Lumbar Puncture	62270	62272	72020	77003								
Steroid Injection	20611	99152	20610	76942								
<b>VARICOSE VEIN TREATMENT</b>												
Ablation w/ Consultation	36475	36476	76937	99152	36465	36466	36470	36471	99203 (Separate Auth Req'd for Consultation)			
Phlebectomy/Stab Avulsion	37765	37766	76942	99152								
<b>GENERAL CONSULTATION</b>												
New Patient	99203											
Existing Patient	99213											

**PLEASE NOTE: THESE ARE OUR MOST COMMONLY PERFORMED PROCEDURES. PLEASE CALL OUR STAFF AT (626) 773-7718 FOR ASSISTANCE WITH ANY UNLISTED PROCEDURES.**

Rev 20210301

© Copyright | Centrelake 2021