

Study

Examples of Signs/Symptoms/Diagnoses

Carotid Duplex Scan
93880 Bilateral
93882 Unilateral/limited

- Physician heard an abnormal sound (bruit) in the arteries of the neck.
- Pulsatile Neck Mass
- Follow up on previously diagnosed/surgerized Carotid Occlusion or Stenosis
- Patient has had a stroke (Cerebral Infarction) or a “mini-stroke” (TIA)

Upper Extremity Arterial (Arms & Hands)

Digit Pressures
93923

Duplex Imaging
93930 Bilateral
93931 Unilateral/
Limited

- Absent or weak pulses
- Unequal blood pressure in arms
- Cyanotic digits (blue fingers)
- Cold fingers
- Pain in fingers, hands, or arms
- Physician is concerned that patient is not getting enough blood flow to the hands/fingers.
- Follow up on previously diagnosed/surgerized Peripheral Vascular Disease (PVD)

- If diminished blood flow to the hands/fingers has been established, duplex imaging of the arteries of the arm can establish the presence/location/severity of the lesion.
- Follow up on previously diagnosed/surgerized Subclavian, Brachial, Cephalic Arterial Stenosis/Occlusion, Subclavian Steal Syndrome

Upper Extremity Venous
Duplex Scan (Arms)
93970 Bilateral
93971 Unilateral/limited
Pre-Op Vein Survey

- Swelling in arms
- Pain in arms
- Follow up on previously detected/surgerized **deep vein thrombosis (DVT)**
- Vein Surveys for dialysis access must indicate the stage of kidney disease ex: N18.4, N18.5, N18.6. (Medicare does not reimburse surveys for dialysis access for kidney disease stages under stage 4.)
- Vein Surveys for bypass must indicate the problem being addressed by surgery, ex: I73.9-PVD

Study

**Hemodialysis Access
Duplex Scan**
93990

Abdominal Duplex Scans
(Requires patient to be NPO after
midnight.)

Retroperitoneal Duplex Scan

“Renal Artery”

93975 Bilateral

93976 Unilateral/Limited

These CPT codes are used to indicate duplex imaging of renal, mesenteric, or celiac arteries.

* (Also can include abdominal aorta, inferior vena cava, & iliac arteries/iliac veins.)

Abdominal Aorta * Iliac arteries/veins

93978 Bilateral

93979 Unilateral/Limited

These CPT codes are used to indicate duplex imaging of the abdominal aorta, inferior vena cava, & iliac arteries/iliac veins.

Examples of Signs/Symptoms/Diagnoses

- Malfunction of AV Fistula
- Malfunction of AV Graft

- Hypertension (HTN)
- Acute kidney failure
- Follow up on previously diagnosed/surgerized:
 - ◇ Renal Artery Stenosis (RAS)
 - ◇ Mesenteric Artery Stenosis
 - ◇ Celiac Artery Stenosis

- Physician heard an abnormal pulse (bruit) in the abdomen.
- Follow up on previously diagnosed/surgerized:
 - ◇ Abdominal Aortic Aneurysm (AAA)
 - ◇ Atherosclerosis of the abdominal aorta
 - ◇ Iliac Artery Aneurysm/Stenosis/Occlusion
 - ◇ PVD
 - ◇ Iliac Vein thrombosis

* CPT codes 93975/93976 can indicate imaging of an individual vascular system listed in the “Retroperitoneal” box **OR** all of the systems listed (including the abdominal aorta, inferior vena cava, & iliac vasculature.) If multiple systems in the abdomen need to be imaged, choose 93975/93976 and list areas to be imaged in special instructions and all corresponding signs/symptoms/diagnoses.

Ex 1: Special Instructions “Image abdominal aorta & renal arteries.” 93975, S/S/Dx: AAA, RAS

Ex 2: Special instructions “Image mesenteric arteries.” 93975, S/S/Dx: Stomach pain, K55.1

Study

Lower Extremity Arterial (Legs & Feet)

**Doppler ABI
with Toe PPG**
93922

Duplex Imaging *
93925 Bilateral
93926 Unilateral/
Limited

Lower Extremity Venous

Duplex Scan (Legs)

93970 Bilateral

93971 Unilateral/Limited

Pre-Op Vein Survey

Varicose Vein Study (Physiologic)

Examples of Signs/Symptoms/Diagnoses

- Absent or weak pulses
- Cyanotic digits (blue toes)
- Cold toes
- Pain in toes, feet, or legs
- Claudication (Increasing pain with exercise)
- Physician is concerned that patient is not getting enough blood flow to the feet/toes.
- Follow up on previously diagnosed/surgerized Peripheral Vascular Disease (PVD)

If diminished blood flow to the feet/toes has been established, duplex imaging of the arteries of the leg can establish the presence/location/severity of the lesion.

- * Negative findings on Arterial Imaging studies do not rule out Peripheral Vascular Disease (PVD.) This especially applies to patients with small vessel disease and/or hardening of the arteries both of which are common in patients with diabetes.

- Swelling in legs
- Pain in legs
- Follow up on previously detected/surgerized **deep vein thrombosis (DVT)**
- Chronic non-pressure ulcers (which may be due to Venous Stasis/Venous insufficiency)
- Varicose veins with complications
- Vein Surveys for dialysis access must indicate the stage of kidney disease ex: N18.4, N18.5, N18.6. (Medicare does not reimburse surveys for dialysis access for kidney disease stages under stage 4.)
- Vein Surveys for bypass must indicate the problem being addressed by surgery, ex: I73.9-PVD

We accept all Medicare Advantage Plans unless otherwise specified.
Please refer to page 4 of this document for specific insurance information and self pay/out-of-network courtesy prices.



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Physician Order Sheet

Patient Name: _____

Appointment Date/Time: _____

DOB: _____ Insurance: _____

Referral/Authorization #: _____

Signs/Symptoms/Diagnosis: _____ ICD-10: _____

EXAMS

Carotid

- Duplex Imaging **93880** Bilateral
- 93882** Unilateral R L

Upper Extremity Arterial

- Digit/Arm Pressure **93923**
- Duplex Imaging **93930** Bilateral
- 93931** Unilateral R L

Upper Extremity Venous

- Duplex Imaging **93970** Bilateral
- 93971** Unilateral R L
- Pre-Op Vein Survey

Hemodialysis Access

- Duplex Imaging **93990** R L

Abdominal Duplex Imaging

- Renal Artery **93975** Bilateral
- 93976** Unilateral R L
- Aorto-Iliac **93978** Bilateral
- 93979** Unilateral R L

Lower Extremity Arterial

- Doppler ABI, Toe PPG **93922**
- Exercise Study **93923**
- Duplex Imaging **93925** Bilateral
- 93926** Unilateral R L

Lower Extremity Venous

- Duplex Imaging **93970** Bilateral
- 93971** Unilateral R L
- Pre-Op Vein Survey
- Varicose Vein Study

Comments/Special Instructions: _____

Call Pt. to schedule - Ph#: _____

Delivery of Preliminary/Final Results

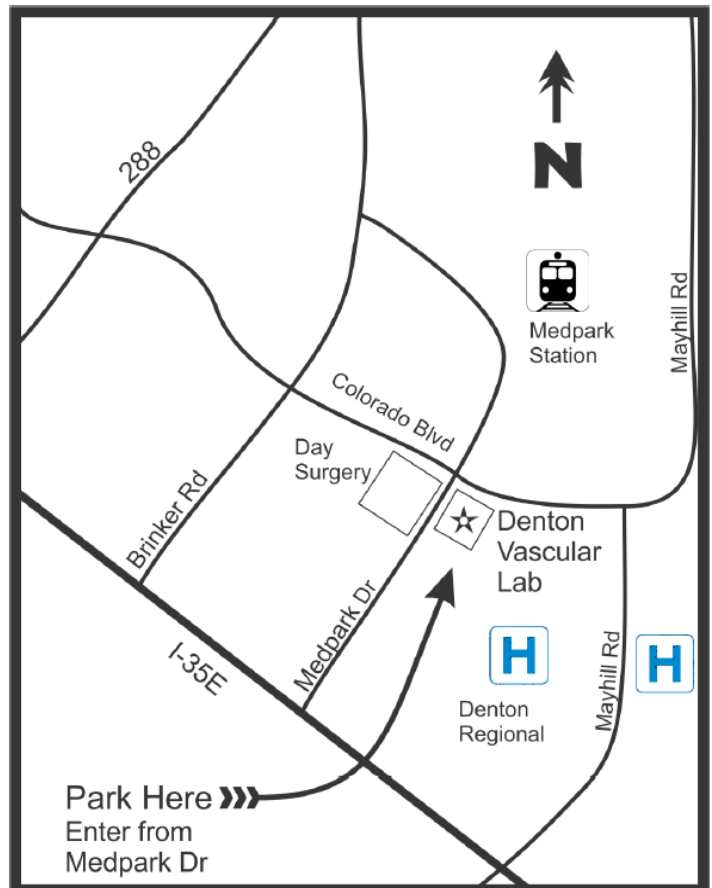
FAX #: _____

PHONE # for emergent results: _____

(Please provide best contact number. We routinely give courtesy calls for emergent findings as part of our protocol, but cannot leave results on messaging systems.)

Ordering Physician's Name: _____

Signature: _____



Important!
 Please bring this form along with photo ID and insurance information to the exam.