<u>MRI</u>

For all W/WO exams: Patient will be given and IV to access for contrast injection. Patient may have a blood draw to check for creatinine. The MRI department does not need an order for creatinine. This is a standing per protocol blood drawer.

Exam Ordered	<u>Patient</u> <u>Position</u>	<u>Length of</u> <u>Scan</u>	<u>w/wo</u>	<u>wo</u>	Exam Information	<u>Diagnosis</u>
Abdomen	Feet First	20-25 mins	74183	74181 *Adrenals	*Patient must be able to hold breath for 20 seconds. Patient will need to fast and eat a fat free meal the previous day, with be 6hrs NPO	*Cirrohosis *Abnormal Labs *Liver Lesions *Renal Carcinoma
MRCP(Abdomen)NON SECRETIN	Feet First	20-25mins	74183	Prefer to do W/WO	*Patient must be able to hold breath for 20 seconds. Patient will need to fast and eat a fat free meal the previous day, with be 6hrs NPO	*Pancreatic Lesion *Biliary dialation *High Bilirubin *High Lipase
MRCP(Abdomen) SECRETIN	Feet First	30-35 mins	74183	Prefer to do W/WO	Same as MRCP except fasting for 12 hours. Only done between 8-4.	*Pancreatitis
Cancer Surveillance (abd/pelvis)	Feet First	50-60 mins	72197 & 74183	NA	*Patient must be able to hold breath; Patient will need to fast and eat a fat free meal the previous day, with be 6hrs NPO	*Post HIPEC *Appy Cancer *Surveillance of Abdomen CA
Enterography (abd/pelvis)	Feet First	20-25 mins	72197 & 74183	NA	*Patient must be able to hold breath for 20 seconds. Patient will arrive 1 hour and 15min prior to table time. Patient must be NPO 8 hours prior to exam. PT will be given oral contrast.	*IBS *Crohns Disease *Constipation
Head	Head First	20-25 min	70553	70551	*Please specify to scheduling and on order if protocol for Pituitary , IAC'S or Trigeminal is needed.	*Head Aches *Trauma *Confusion *Seizures

Breast(order bilateral) MUST BE W/WO AND STATE BOTH	Feet First	12-18 mins	77049	77047-Only for Rupture Eval	*Needs Mammo is the last 13 months	*Family Hx *Breast Cancer *High Risk
Breast Biopsy	Feet First	30 mins	19085	NA	Can eat or drink and take meds	*Recommended by Radiologist from previous Scans
Chest w/wo soft tissue	Feet or Head depending on Location of Scan Area	30 mins	71552	71550	*focuses on specific portion of chest. Ex: Clavicle, Petoralis Muscle	*Brachial Plexus *Pectoralis Major Tear *Clavicle Mass *Sternum Mass
Face/Neck	Head First	20-30 mins	70543	Prefer to do W/WO	*Evaluates soft tissue around orbits, face or neck area. No to be used when wanting to see CSP. Must order CSP instead.	*Neck Mass *Tongue CA *Parotid Mass
Orbits	Head First	18-20 min	70543	Prefer to do W/WO	Scan includes orbits and optic nerve.	*Orbit Nerve Mass *Vision Problems
Lower Extremity NON Joint(femur,tibfib,foot)	Feet First	20-30 min	73720	73718	*W/Wo only used when there is a mass or lesion.	*Mass in Area *Pain in area *Abnormal imaging
Lower Extremity Jt.(hip, knee, ankle)	Feet First	20-30 min	73723	73721	*W/Wo only used when there is a mass, lesion, ulcer or infection.	*Mass in Area *Pain in area *Abnormal imaging
Pelvis(Sacrum or bony pelvis)	Feet First	20-30mins	72197	72195		*Sacral pain *Abnormal Imaging *Pelvic Pain

Pelvis(VAG/ Rectal Cancer)	Feet First	25-30 mins	72197	72195	*May involve inserting US gel into rectum and/or vagina. Order must state gel if needed. All rectal cancer need to be with Gel.	*Uterine, Cervical and or Rectal mass *Abnormal Imaging		
*Female Pelvis is ordered to examine *Pelvic Girdle includes both bone and								
	Spine							
Cervical	Head First	20-25 mins	72156	72141	*W/WO if patient had posterior c-spine surgery, mass, infection or MS. NO SX NOTES IF PT HAS MS	*Neck Pain *Extremity Numbness		
Thoracic	Head First	20-25 mins	72157	72146	*W/WO if looking for mass, infection, MS or posterior sx.	*Mid-Back pain *Abnormal Imaging		
Lumbar	Feet	20-25 mins	72158	72148	*W/WO if looking for mass, infection or sx.	*Back Pain *Radiculopathy *Leg numbness		
Upper Ext NON Jt. (humerus, forearm, hand, finger, thumb)	Head First	20-25 mins	73220	73218	w/wo if looking for mass or infection.	*Mass in Area *Pain in area *Abnormal imaging		
Upper Ext Jt. (shoulder, elbow, wrist)	Head First	20-25 mins	73223	73221	w/wo if looking for mass or infection.	*Mass in Area *Pain in area *Abnormal imaging		
Lower Ext Jt. Arthro	Feet First	20-25 mins	73722 with only	NA	See IR codes for Arthrogram procedure at the bottom of the page.	*Issues following		
Upper Ext. Jt. Arthro	Head First	20-25 mins	73222 with only	NA	See IR codes for Arthrogram procedure at the bottom of the page.	sx in Area *Pain in joint		

Exam Ordered			<u>w/wo</u>	<u>wo</u>	<u>Exam Information</u>	
MRA Head or MRV Head	Head First	15-20 mins	70546	70544	Order must state Venous or Arterial. This is one code for 2 exams. Only done w/wo if brain coils.	*Family Hx of Aneurysm *Head Ache *Hx of Aneurysm
MRA Carotids	Head First	30 mins	70549	70547	Done WO at the hospital and W/WO contrast at NeuroCenter. No caffeine or stimulants for 12 hours. No erectile dysfuntion medications 48 hours prior. No Excedrin 12 hours.	*Abnormal Imaging *Hx of Carotid Stenosis *Hx of Strokes
MRA Chest	Head First	30 mins	Both are 71555		Done WO at the hospital and W/WO contrast at NeuroCenter. No caffeine or stimulants for 12 hours. No erectile dysfuntion medications 48 hours prior. No Excedrin 12 hours.	*Personal hx of Aorta Aneursym *Hx of Aortic Dissection
MRA Abdomen	Feet First	30 mins	Both are 74185		Done WO at the hospital and W/WO contrast at NeuroCenter. No caffeine or stimulants for 12 hours. No erectile dysfuntion medications 48 hours prior. No Excedrin 12 hours.	*Uncontrolled HBP *Renal Artery Stenosis
MRA RUNOFF	Feet First	60-70 mins	NA	74185, 73725R, 73725L	No caffeine or stimulants for 12 hours. No erectile dysfuntion medications 48 hours prior. No Excedrin 12 hours.	

Shoulder	Head First	20-25 mins	CPT 23	3350	Add LT or RT depending on Left or Right	
Elbow	Head or Feet First. Depends on patient size.	20-25 mins	CPT 24220		Add LT or RT depending on Left or Right	*Issues following sx in Area *Pain in joint
Wrist	Head or Feet First. Depends on patient size.	20-25 mins	CPT 25246		Add LT or RT depending on Left or Right	
Hip	Feet First	20-25 mins	CPT 27093		Add LT or RT depending on Left or Right	
Knee	Feet First	20-25 mins	CPT 27370		Add LT or RT depending on Left or Right	
Ankle	Feet First	20-25 mins	CPT 27648		Add LT or RT depending on Left or Right	
PACEMAKER-APPROVED ONLY BY MRI&NOTES BE FAXED BEFORE Appt.					Patient will arrive 1 hours prior to scan.	

^{*} All cardiac stents are MRI safe.

Sedations: PT OK to take pain meds/**Don't take diabetic meds--Nothing to eat 8 hours prior** 73231

^{*} Pacemakers, Defibrillators, Stimulators, Heart Valves and Brain sx must be approved by MRI department prior to scanning.

^{*} If patients have ever had metal stuck in their eye and did NOT have it removed by a physician, they will need to have an x-ray of their orbits.

^{*} If patient has had previous comparable exam at another facility, we need the images and reports before the patient's exam. This is also true if the patient had surgery to area of interest.