

CLINICAL PROCEDURES ASSOCIATED WITH DIAGNOSTIC RADIOLOGICAL EXAMINATIONS

PREAMBLE

SPECIFIC ELEMENTS

In addition to the *common elements*, Clinical Procedures Associated with Diagnostic Radiological Examinations include the following *specific elements*.

- A. Supervising the preparation of and/or preparing the patient for the procedure(s).
- B. Performing the procedure(s) including the introduction of any contrast media and carrying out all appropriate recovery room procedures including transfer of the patient to the recovery room, ongoing monitoring and detention during the immediate post-procedure and recovery period.
- C. Making arrangements for any related assessments or procedures, including obtaining any specimens from the patient and interpretation of any results where appropriate.
- D. Where indicated, making or supervising the making of arrangements for follow-up care, and post-procedure monitoring of the patient's condition, including intervening, until the next insured service.
- E. Discussion with, providing any advice and information and prescribing therapy to the patient or the *patient's representative*, whether by telephone or otherwise, on matters related to the service.
- F. Providing premises, equipment, supplies and personnel for the specific element
 - a. For services not identified with prefix # for all elements.
 - b. For services identified with prefix # for any aspect(s) of A, C, D and E that is(are) performed in a place other than the place in which the procedure is performed.

Radiological services may be claimed in addition. See Diagnostic Radiology for the appropriate fees.

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ANGIOGRAPHY

Spec

Anae

Note:

For cardiac catheterization procedures, see the Diagnostic and Therapeutic Procedures section of the *Schedule*.

By catheterization - abdominal, thoracic, cervical or cranial

# J021	- insertion of catheter (including cut down, if necessary) and injection, if given.....	121.40	6
# J022	- selective catheterization - add to catheter insertion fee (per vessel, to maximum of 4)	60.15	

Payment rules:

J021 and J022 are *not eligible for payment* in addition to cardiac catheterization procedures (Z439 to G288).

# J014	- selective catheterization for spinal and parathyroid angiography ("Selective" means manipulation of the catheter from the vessel of introduction into a branch tributary, or cardiac chamber with angiogram(s)) - add to catheter insertion fee	38.05	
# J056	- transcatheter fibrinolytic therapy	582.45	7

[Commentary:

1. For Extracranial approach to include balloon catheter techniques see N107 in Neurological Surgical Procedures.
2. For Carotid-cavernous fistula; extracranial approach to include balloon catheter techniques see N118 in Neurological Surgical Procedures.]

# J058	Vascular stenting.....	101.55	6
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Note:

J058 claimed same patient same *day* as G298 is payable at nil.

# J066	Renal angioplasty.....	438.10	6
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Carotid angiogram

# J031	- direct puncture.....	89.90	6
# J025	Transluminal angioplasty including angiography (if anatomy is known), with or without pressure measurements - one or more site(s) or vessel(s).....	398.15	6

Note:

1. If anatomy unknown at time of procedure, claim J021 and/or J022 at 50%. For simultaneous bilateral punctures and angioplasties, the amount payable for the second angioplasty is reduced by 50%.
2. J021 & J022 may not be claimed with J025 if anatomy is known.

# J067	Spinal angiography for AV malformation, per vessel, maximum of 12 vessels per side.....	38.20	6
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ANGIOGRAPHY

	Spec	Anae
# J048 Percutaneous trans-hepatic catheter portal venography	311.05	6
Peripheral arteriogram		
# J027 - direct puncture.....	76.55	6
Peripheral venogram		
# J026 - direct puncture.....	61.50	6
# J033 Splenoportogram.....	111.50	6
# J034 Trans-lumbar aortogram	89.90	6
Vertebral angiogram		
# J032 - direct puncture or by retrograde brachial injection	111.50	6
Embolization (e.g. for treatment of haemangioma or renal carcinoma)		
# J040 - first vessel, claim appropriate angiographic procedural and radiological fees plus.....	105.30	
# J047 - each additional vessel catheterized and occluded per vessel.....	49.35	
# J023 Intra-arterial infusion of drugs e.g. for control of gastrointestinal haemorrhage - claim appropriate angiographic procedural and radiological fees plus a per diem supervision fee of	29.55	
# J035 Pressure measurements during angiography	29.55	

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MISCELLANEOUS PROCEDURES

	Spec	Anae
# J001 Arthrogram, tenogram or bursogram.....	29.55	7
Note: Biliary duct calculus manipulation etc. (see Z562 listed in Digestive System - Biliary Tract.)		
Bronchial brushing		
# J024 - unilateral.....	89.90	6
# J044 - bilateral.....	135.00	6
Bronchogram		
# J002 - unilateral.....	27.00	6
# J043 - bilateral.....	40.65	6
Bronchogram with intra-tracheal catheter		
# J003 - unilateral.....	68.00	6
# J042 - bilateral.....	82.20	6
Carotid or vertebral artery occlusion by detachable balloon		
# J050 - percutaneous.....	297.30	
# J053 Cavernosography.....	45.35	
# J005 Dacrocystogram.....	45.40	6
Discogram		
# J006 - one disc.....	105.30	7
# J030 - each additional disc add	54.05	
Embolization of spinal arteriovenous malformation		
# J049 - percutaneous.....	437.30	6
# J036 Fistula or sinus injection.....	26.95	
# J068 Hydrostatic/pneumatic reduction of intussusception.....	44.25	7
# J008 Hysterosalpingogram.....	56.70	6
# J004 Intramammary needling for localization under mammographic control.....	70.35	
# J009 Laryngogram.....	33.50	

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MISCELLANEOUS PROCEDURES

	Spec	Anae
Lymphangiogram		
# J010 - per side.....	105.30	
# J037 Mammary ductography	70.35	
# J011 Myelogram	93.40	6
# J038 - with supine views requiring removal and re-introduction of spinal needle	21.75	
# J020 - with posterior fossa views	23.85	
# J012 Nephrotomogram	-	6
# J060 Nephrostogram	29.55	
# J045 Percutaneous antegrade pyelogram	122.10	6
# J055 Percutaneous gastrostomy	223.75	
# J061 Percutaneous cecostomy.....	223.75	
# J062 Percutaneous cholecystostomy	223.75	
# J063 Percutaneous jejunostomy.....	259.55	
# J064 Exchange of drainage tubes, including supervision, imaging and hard copy film interpretation if any	72.65	
# J046 Percutaneous nephrostomy	223.75	6
# J041 Percutaneous removal of intravascular and intraureteric foreign bodies.....	295.25	IC
# J065 Dilation of non-vascular structures.....	20.50	6
# J059 Non-vascular stenting	101.55	
# J069 Percutaneous radiofrequency ablation using CT or ultrasound guidance.....	515.70	
Note: CT or ultrasound guidance is <i>not eligible for payment</i> when performed in addition to J069.		
# J051 Percutaneous spinal cord puncture for syringogram.....	94.60	6
# J013 Percutaneous trans-hepatic cholangiogram.....	105.30	6
# J057 Transjugular intrahepatic portosystemic shunt (TIPS)	787.35	7
# J052 Positive contrast cisternogram.....	99.90	6
Z597 Intracavitary/intratumoural injections.....	90.10	7
# J039 Renal cyst puncture	121.95	6
# J018 Sialogram	45.40	6
# J007 Tomogram	-	7
# J028 Urethrogram and/or urethrocytogram and/or or intestinal conduit examination, cystogram.....	29.55	
# J029 Vasogram	59.95	6
Note: Intubation of small intestine (see Z540 listed in Digestive System - Intestines (except rectum)).		

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NOT ALLOCATED