



DIGITAL X-RAY: General Diagnostic Imaging (DI) Ordering Guide

Standardization Guide

Version 1, Last Update: August 2023

DIGITAL X-RAY: General

- The digital X-ray CPT codes are for reference only.
- This does not imply protocol standards for all radiology facilities.
- Information is subject to change.
- Digital X-rays are done on a scheduled basis at our main campus and at our Georgia Location on a walk-in basis.

Appointment Type	Indication	CPT Code
FL Arthrogram Hip Panel Left	assess the anatomy and function of the joint	73525
FL Arthrogram Hip Panel Left	assess the anatomy and function of the joint	27093
FL Arthrogram Hip Panel Right	assess the anatomy and function of the joint	73525
FL Arthrogram Hip Panel Right	assess the anatomy and function of the joint	27093
FL Arthrogram Knee Panel Left	assess the anatomy and function of the joint	73580
FL Arthrogram Knee Panel Left	assess the anatomy and function of the joint	27370
FL Arthrogram Knee Panel Right	assess the anatomy and function of the joint	73580
FL Arthrogram Knee Panel Right	assess the anatomy and function of the joint	27370
FL Arthrogram Shoulder P Left	assess the anatomy and function of the joint	73040
FL Arthrogram Shoulder P Left	assess the anatomy and function of the joint	23350
FL Arthrogram Shoulder P Right	assess the anatomy and function of the joint	73040
FL Arthrogram Shoulder P Right	assess the anatomy and function of the joint	23350
FL Arthrogram Wrist P Left	assess the anatomy and function of the joint	73115
FL Arthrogram Wrist P Left	assess the anatomy and function of the joint	25246
FL Arthrogram Wrist P Right	assess the anatomy and function of the joint	73115
FL Arthrogram Wrist P Right	assess the anatomy and function of the joint	25246
FL Esophagram BASW	(Barium swallow) Assess frequent heartburn (pain), gastric reflux (food/acid comes back up), aspiration (food and/or fluid in your windpipe), difficulty eating, drinking, or swallowing.	74221
FL Barium Enema Plain	Examination of the colon to assess a change in bowel habits, abdominal pain, rectal bleeding, diverticulitis, or suspected masses.	74270
FL Barium Enema with Air	May be used to examine the colon to assess symptoms, including: a recent change in bowel habits, abdominal pain, or rectal bleeding. Compared to a barium enema, the air contrast examination offers increased sensitivity for the detection of polyps and small masses.	74280
FL Cystogram with Fluoro P	Requires placement of a bladder catheter and is used frequently in children to evaluate the cause of urinary tract infections, including vesicoureteral reflux, bladder or urethral abnormalities.	74450
FL Therapeutic Hip Injection LT		77002
FL Therapeutic Hip Injection LT		73501
FL Therapeutic Hip Injection RT		77002
FL Therapeutic Hip Injection RT		73501
FL Hysterosalpingogram Panel	Study the inside of the uterus and fallopian tubes. **Patient needs a current UPT test on the morning of study**	74740

Appointment Type	Indication	CPT Code
FL Modified BA Swallow	Done in conjunction with our experts from speech therapy to evaluate the different phases of the swallowing process. Some of the more common indications are unexplained cough, difficult or painful swallowing or suspected aspiration.	74230
FL Small Bowel Follow Through	Crohn's disease, ulcerative colitis, and bowel cancer.	74250
FL Small Bowel Ser Gastrografin		74250
FL UGI Double Contrast	Uses a special form of X-ray (fluoroscopy) and an orally ingested contrast material, usually barium sulfate to examine the pharynx, esophagus, stomach, and duodenum. An upper GI examination helps in the detection of abnormalities of the esophagus, stomach, and duodenum, including ulcers, scarring, tumors, blockages, hiatal hernia, reflux, or inflammation. The procedure is also used to help diagnose symptoms including difficult or painful swallowing, severe indigestion, chest and abdominal pain, blood in stool or unexplained vomiting.	74246
FL UGI Double with Esophagram		74246
FL UGI SBFT	Adds the evaluation of the small bowel to the traditional upper GI examination and usually takes 2 to 4 hours.	74246
FL Voiding Cystourethrogram	Uses x-rays to produce images of the bladder and urethra. This study may be used to evaluate recurrent infection, frequent or painful urination, urinary incontinence or difficult urination	74455
XR Abdomen 1 vw AP (KUB)	AP (KUB) To include top of diaphragm to symphysis.	74018
XR Abdomen 2 vw Min	AP SUPINE ABDOMEN (to include symphysis)-UPRIGHT AP ABDOMEN (to include diaphragm)	74022
XR Abd Series w/Chest (AAS)	PA/AP Chest -UPRIGHT ABDOMEN (to include diaphragm) OR LEFT LATERAL DECUBITUS -AP SUPINE ABDOMEN (to include symphysis)	74022
XR AC Joints Bilat		73050
XR Ankle 2 vw Bilat		73600
XR Ankle 2 vw LT		73600
XR Ankle 2 vw RT		73600
XR Ankle 3 vw Min LT	AP -LATERAL -INTERNAL & EXTERNAL OBLIQUES	73610
XR Ankle 3 vw Min RT	AP -LATERAL -INTERNAL & EXTERNAL OBLIQUES	73610
XR Bone Age Study	PA LEFT HAND AND WRIST on one film	77072
XR Bone Length Study	-AP BILATERAL LEGS (to include hip and ankle joints) MUST BE DONE AT THE MOB.	77073
XR B-Read Chest	PA and LATERAL-*** These studies are NOT read by our radiologists, a CD of the study is given to the patient.	71046
XR Chest 1 vw	PA/AP (Must document upright/semi-upright/supine)	71045
XR Chest 2 vw	-PA/AP (document PA vs. AP; all APs must include upright/semi-upright or supine) -LATERAL	71046

Appointment Type	Indication	CPT Code
XR Chest 4 vw Min	PA/AP ,LATERAL, BOTH DECUBS (Left lateral and right lateral)	71048
XR Clavicle LT		73000
XR Clavicle RT		73000
XR Clavicle Bilat		73000
XR Cervical Spine 2-3 vw	AP -ODONTOID -LATERAL -SWIMMERS (if needed)	72040
XR Cervical Spine 4 or 5 vw	-AP -ODONTOID -LATERAL -SWIMMERS (if needed) **Swimmers view must include from C1 to T1. -BOTH OBLIQUES **Obliques must be marked PA vs. AP. If done PA, the images must be flipped to be in anatomical position** -FLEXION/EXTENSION upon request ONLY **Must mark images flexion or extension** ***Our protocol is to do everything except the flex/ext views on all routine patients (non-trauma), unless specified otherwise by the referring physician. ***	72050
XR Cervical Spine 6 vw Min	-AP -ODONTOID -LATERAL -SWIMMERS (if needed) **Swimmers' view must include from C1 to T1. -BOTH OBLIQUES **Obliques must be marked PA vs. AP. If done PA, the images must be flipped to be in anatomical position** -FLEXION/EXTENSION upon request ONLY **Must mark images flexion or extension** ***Our protocol is to do everything except the flex/ext views on all routine patients (non-trauma), unless specified otherwise by the referring physician. *** Charges: C-Spine 4vw or 5 views (if all views and obliques OR flexion/extension)	72052
XR Small Bowel Series SBFT BAD		74250
XR Elbow 2 vw Bilat		73070
XR Elbow 2 vw LT		73070
XR Elbow 2 vw RT		73070
XR Elbow 3 vw Min Bilat		73080
XR Elbow 3 vw Min LT		73080
XR Elbow 3 vw Min RT		73080
XR Facial Bones 1-2 vws		70140
XR Facial Bones 3 vw Min	CALDWELL (PA, OML perpendicular, 15degrees caudal) -WATERS (PA, OML 37degrees to table/bucky) -LATERAL	70150
XR Femur 2 vw LT		73552
XR Femur 2 vw RT		73552
XR Femur 2 vw Bilat		73552

Appointment Type	Indication	CPT Code
XR Finger(s) 2 vw Min LT		73140
XR Finger(s) 2 vw Min RT		73140
XR Forearm 2 vw LT		73090
XR Forearm 2 vw RT		73090
XR Forearm 2 vw Bilat		73090
XR Foot 2 vw Bilat		73620
XR Foot 2 vw LT		73620
XR Foot 2 vw RT		73620
XR Foot 3 vw Min Bilat		73630
XR Foot 3 vw Min LT	AP -LATERAL -MEDIAL OBLIQUE	73630
XR Foot 3 vw Min RT	AP -LATERAL -MEDIAL OBLIQUE	73630
XR Heel 2 vw Min LT		73650
XR Heel 2 vw Min RT		73650
XR Hip 1 vw LT		73501
XR Hip 1 vw RT		73501
XR Hip 2 vw Min LT	AP Hip and FROG LATERAL Hip	73502
XR Hip 2 vw Min RT	AP Hip and FROG LATERAL Hip	73502
XR Hip 2 vw Min LT w/ AP Pelvis	AP Pelvis -AP Hip -FROG LATERAL Hip	73502
XR Hip 2 vw Min LT w/ AP Pelvis	AP Pelvis -AP Hip -FROG LATERAL Hip	72170
XR Hip 2 vw Min RT w/ AP Pelvis	AP Pelvis -AP Hip -FROG LATERAL Hip	73502
XR Hip 2 vw Min RT w/ AP Pelvis	AP Pelvis -AP Hip -FROG LATERAL Hip	72170
XR Hip 2vw Min Bil w/wo AP Pelvis	AP Pelvis -AP of Each Hip -FROG LATERAL of Each Hip	73523
XR Hip 2 vw w/Pelvis Infant/Child		73521
XR Heel 2 vw Min Bilat	-AXIAL -LATERAL	73650
XR Hand 2 vw Bilat		73120
XR Hand 2 vw LT		73120
XR Hand 2 vw RT		73120
XR Hand 3 vw Min Bilat		73130
XR Hand 3 vw Min LT		73130
XR Humerus 2vw Min Bilat		73060
XR Humerus 2 vw Min LT		73060
XR Humerus 2 vw Min RT		73060
XR Infant Lower Ext (0 to 1 Year)		73592
XR Knee 1 or 2 vw Bilat		73560
XR Knee 1 or 2 vw LT		73560

Appointment Type	Indication	CPT Code
XR Knee 1 or 2 vw RT		73560
XR Knee 3 vw Bilat		73562
XR Knee 3 vw LT		73562
XR Knee 3 vw RT		73562
XR Knee 4 vw Min Bilat		73564
XR Knee 4 vw Min LT		73564
XR Knee 4 vw Min RT		73564
XR Knees Bilat AP Standing		73565
XR Leg Tib/Fib 2vw Bilat		73590
XR Leg Tib/Fib 2 vw LT	AP (to include both joints) -LATERAL (to include both joints)	73590
XR Leg Tib/Fib 2 vw RT	AP (to include both joints) -LATERAL (to include both joints)	73590
XR Lumbar Spine 2-3 vw	AP -LATERAL **X-Table laterals for Traumas**	72100
XR Lumbar Spine 4 vw Min	-AP -LATERAL **X-Table laterals for Traumas** -L5-S1 SPOT	72100
XR Lumbar Spine 6vw Min w Bending	-AP -LATERAL **X-Table laterals for Traumas** -L5-S1 SPOT **X-Table Spots for Traumas** -OBLIQUES upon request ONLY -FLEXION/EXTENSION upon request ONLY **Flex/Ext should be performed with patient standing** Charges: L-spine 2-3vw (AP/Lat/Spot OR Flex/Ext Only) L-spine 4 or 5 vw (AP/Lat/Spot and Obliques OR Flex/Ext) L-spine 6 vw min w bending. (AP/Lat/Spot w/Obliques and Flex/Ext)	72114
XR Mandible 4 vw Min	AP AXIAL (OML perpendicular; 30degrees caudal) **can be done PA: AML perpendicular; 30degrees cephalic** -PA (forehead and nose for rami; nose and chin for body) -AXIOLATERAL OBLIQUES (both sides)	70110
XR Nasal Bones 3 vw Min	WATERS (PA, OML 37degrees to table/bucky) -LATERAL of each side	70160
XR Neck Soft Tissue 2 vw	-AP -LATERAL	70360
XR Optic Foramina LT	CALDWELL (PA, OML perpendicular, 15degrees caudal) -WATERS (PA, OML 37degrees to table/bucky) -LATERAL -RHESE VIEW of affected side	70190
XR Optic Foramina RT	CALDWELL (PA, OML perpendicular, 15degrees caudal) -WATERS (PA, OML 37degrees to table/bucky) -LATERAL -RHESE VIEW of affected side	70190
XR Orbits for Foreign Body	PA AXIAL (PA, OML perpendicular, 30degrees caudal) -LATERAL of affected side	70030
XR Pelvis 3 vw Min		72190
XR Pelvis 1-2 vw	AP PELVIS	72170

Appointment Type	Indication	CPT Code
XR Ribs 3 vw Min Bilat w/o PA CXR	PA/AP of affected side **AP for posterior ribs; PA for anterior ribs; to include 1st rib** -OBLIQUE of affected side (45 degrees) **Left Anterior= Pt. RAO; Left Posterior= LPO; Right Anterior= Pt. LAO; Right Posterior= RPO, mark images** -PA/AP floating ribs of affected side (lower ribs)	71110
XR Ribs 4 vw Min Bilat w/ PA CXR	PA/AP of affected side **AP for posterior ribs; PA for anterior ribs; to include 1st rib** -OBLIQUE of affected side (45 degrees) **Left Anterior= Pt. RAO; Left Posterior= LPO; Right Anterior= Pt. LAO; Right Posterior= RPO, mark images** -PA/AP floating ribs of affected side (lower ribs) -PA/AP CHEST IF REQUESTED	71111
XR Ribs 3 vw Min LT w/ PA CXR	PA/AP of affected side **AP for posterior ribs; PA for anterior ribs; to include 1st rib** -OBLIQUE of affected side (45 degrees) **Left Anterior= Pt. RAO; Left Posterior= LPO; Right Anterior= Pt. LAO; Right Posterior= RPO, mark images** -PA/AP floating ribs of affected side (lower ribs) -PA/AP CHEST IF REQUESTED	71101
XR Ribs 2 vw LT w/o PA CXR		71100
XR Ribs 2 vw RT w/o PA CXR		71100
XR Ribs 3 vw Min RT w/ PA CXR	PA/AP of affected side **AP for posterior ribs; PA for anterior ribs; to include 1st rib** -OBLIQUE of affected side (45 degrees) **Left Anterior= Pt. RAO; Left Posterior= LPO; Right Anterior= Pt. LAO; Right Posterior= RPO, mark images** -PA/AP floating ribs of affected side (lower ribs) -PA/AP CHEST IF REQUESTED	71101
XR Scapula LT		73010
XR Scapula RT		73010
XR Scapula Bilat		73010
XR Sacrum and Coccyx 2 vw Min	-AP AXIAL Sacrum (15 degrees cephalic) -AP AXIAL Coccyx -LATERAL (to include both sacrum/coccyx)	72220
XR Sternoclavicular Jts 3 vw Min	PA , RAO & LAO	71130
XR Scoliosis Survey	-AP & LATERAL (to include from mouth to sacrum) ***Follow up visits only require AP view*** THESE MUST BE DONE AT THE MOB, WHERE THE APPROPRIATE EQUIPMENT IS.	72081
XR Shoulder 1 vw Bilat		73020
XR Shoulder 1 vw LT		73020
XR Shoulder 1 vw RT		73020
XR Shoulder 2vw Min Bilat		73030
XR Shoulder 2 vw Min LT		73030

Appointment Type	Indication	CPT Code
XR Shunt Series Panel	-AP & LATERAL SKULL to include neck -AP CHEST -AP & LATERAL ABDOMEN	70250
XR SI Joints 1 to 2 vw		72200
XR SI Joints 3 vw Min	-AP AXIAL -AP OBLIQUES (both sides)	72202
XR Sinuses Paranasal 1-2 vw		70210
XR Sinuses Paranasal 3 vw Min	CALDWELL UPRIGHT (PA, OML perpendicular, 15degrees caudal) -WATERS UPRIGHT (PA, OML 37degrees to table/bucky) -LATERAL UPRIGHT ***All views are done upright.	70220
XR Skull 1-3 vw	AP/PA (OML perpendicular) -AP TOWNES (30degrees caudal; OML perpendicular) -LATERAL	70250
XR Skeletal Survey Complete	PA CHEST -AP PELVIS -LATERAL SKULL -AP & LATERAL C, T & L-SPINES -BILATERAL AP FEMUR -BILATERAL AP TIB/FIB -BILATERAL AP FEET -BILATERAL AP HUMUERUS -BILATERAL AP FOREARM -BILATERAL PA HAND	77075
XR Skeletal Survey Infant <12 Mos	AP & LATERAL SKULL -AP & LATERAL C-SPINE -LATERAL L-SPINE -AP/PA & LATERAL CHEST (To include ribs and T-spine) -KUB -BILATERAL AP HUMERUS -BILATERAL AP FOREARM -BILATERAL PA HANDS -BILATERAL AP FEMUR -BILATERAL AP TIB/FIB -BILATERAL AP FEET	77076
XR Skeletal Survey Metastases		77074
XR Spine 1 vw		72020
XR Sternum 2 vw Min	RAO and LATERAL	71120
XR Thoracolumbar 2 vw	(About T7 down - centered around the level of the Xiphoid) - AP - LATERAL	72080
XR Toe(s) 2 vw Min LT	AP -LATERAL -OBLIQUE	73660
XR Toe(s) 2 vw Min RT	AP -LATERAL -OBLIQUE	73660
XR Thoracic Spine 2 vw	-AP -LATERAL	72070
XR Thoracic Spine 3 vw	-AP -LATERAL -SWIMMERS	72072

Appointment Type	Indication	CPT Code
XR Thoracic Spine 4 vw Min	-AP -LATERAL -SWIMMERS -OBLIQUES upon request ONLY	72074
XR Wrist 2 vw Bilat		73100
XR Wrist 2 vw LT		73100
XR Wrist 2 vw RT		73100
XR Wrist 3 vw Min Bilat		73110
XR Wrist 3 vw Min LT		73110
XR Wrist 3 vw Min RT		73110
XR Zygomatic Arch 3 vw Min LT	AP AXIAL (IOML perpendicular, 30degrees to table/bucky) -SMV (IOML parallel to table/bucky; CR perpendicular to IOML) -TANGENTIAL of affected side	70150