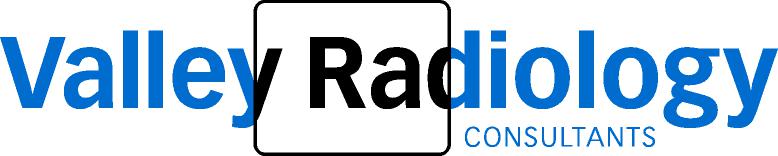
**CT and MRI Exam CPT Code Reference Guide**



If the CPT code you require is not listed, or you are unsure   
of a CPT code needed please call us before submitting   
authorization and we’ll be happy to assist you.

Valley Radiology Authorizations: 877-393-1933 Ext 2521



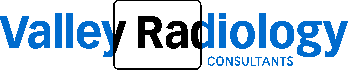
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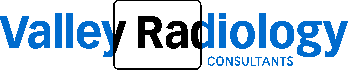
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| **CT Exam CPT Code Reference**  Use this reference to quickly determine the correct exam for your patients based on their indications described herein and the CPT for the folder. |  |

\*Creatinine levels should be obtained prior to contrast studies. Please call if you have any questions.

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| **BODY PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** |
| CT HEAD | CT Head without contrast | 70450 | Trauma Shunt Check  Headaches Hydrocephalus  TIA/CVA Change in Mental Status/  Bleed Confusion  Memory Loss/ Dizziness/Vertigo Alzheimer’s |
| CT Head with and without  contrast. (Note: MRI Brain may be  preferred study if patient is able.  Consult a radiologist) | 70470 | Primary Brain Cancer  Metastases/known cancer (MRI preferable)  Infection/Abscess |
| CT ORBITS | CT Orbits without contrast | 70480 | Trauma Foreign Body  Fracture Bony Abnormalities Proptosis |
| CT Orbits with and without  contrast | 70482 | Infection Pain  Abscess Mass/Tumor  Cellulitis Cancer |
| CT SINUS | CT Sinus without contrast | 70486 | Sinusitis Nasal Polyps  Mass Deviated Septum  Pain Sinus Headache  Rhinitis  Congestion |
| CT FACE  (From orbits to madible) | CT Maxillofacial without contrast | 70486 | Trauma Fracture  Pain Bony Abnormalities |
| CT Maxillofacial with contrast | 70487 | Tumor Infection  Swelling Abscess  Mass in Face |
| CT TEMPORAL BONES/MASTOIDS | CT Temporal Bones without  contrast | 70480 | Hearing Loss Drainage in Ear Cholesteatoma |
| CT Temporal Bones with and  without contrast | 70482 | Acoustic Neuroma (when there are  contradictions in MRI)  Tinnitus (Rigning in Ears)  Mass |
| CT NECK | CT Soft Tissue Neck with contrast | 70491 | Focal Mass Infection  Swollen Lymph Nodes Abscess  Lymphoma Cancer TX Follow Up Dysphagia |
| CT Soft Tissue Neck without and  with contrast | 70492 | Salivary Gland Stone |
| CT CHEST:  General | CT Chest with contrast | 71260 | Abnormal CXR Neoplasm / Mass  Shortness of Breath COPD / Emphysema  Pneumonia Pleural effusion/empeyama  Cough Sarcoidosis  Hemoptysis Adenopathy  Chest Pain Asbestos Exposure Hilar Abnormality |
| CT Chest without contrast | 71250 | Lung Nodule Follow Up Cough  Incedential Nodule on CXR COPD / Emphysema |
| CT CHEST:  Low Dose Screening | CT Chest without contrast |  | Lung Cancer Screening  (Please see requirements detailed on page 8) |



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| **BODY PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** |
| HIGH RESOLUTION | CT Chest without contrast | 71270 | Interstilial Disease Emphysema |
| CHEST | High Resolution |  | Fibrosis Bronchiectasis |
|  |  |  | COPD |
| CT ABDOMEN: | CT Abdomen with contrast | 74160 | Abdominal Pain Weight Loss |
| General |  |  | Abdominal US Nausea |
|  |  |  | Obstruction/Mass Vomiting |
|  | CT Abdomen without contrast | 74150 | Hernia Retroperitonal Hematoma |
|  |  |  | See Renal Stone Section |
| CT ABDOMEN & PELVIS: | Dual study: | 74177 | Mass Trauma |
| General (From lung bases | CT Abdomen with contrast |  | Abdominal Pain/Pelvic Pain Abnormal US |
| to pubis) | CT Pelvis with contrast |  | Appendicitis Constipation/Obstruction  Bloody Stool Cancer Staging |
|  |  |  | Nausea/Vomitting/Diarrhea |
|  |  |  | Diverticulitis |
|  |  |  | Weight Loss |
|  | Dual study: | 74170 | Cancer staging for Melanoma or Carcinoid |
|  | CT Abdomen with and without  contrast | 72193 |  |
|  | CT Pelvis with contrast |  |  |
| CT COLONOGRAPHY: | CT Abdomen | 74263 | Colon Cancer Screening |
| Screening | CT Pelvis without contrast |  |  |
| CT COLONOGRAPHY: | CT Abdomen | 74261 | Rectal Bleeding: |
| Diagnostic | CT Pelvis with and without  contrast |  | Changes in bowel habits  changes in stool |
| RENAL STONE | Dual study: | 74176 | Hematuria Stone |
|  | CT Abdomen without contrast |  | Flank Pain Renal/Ureteral |
|  | CT Pelvis without contrast |  | Lower Back Pain Dysuria |
|  |  |  | Urinary Frequency |
| TRI-PHASE RENAL | CT Abdomen with and without  contrast | 74170 | Hematuria Suspected Renal Mass  Flank Pain Polycystic Kidney Disease |
|  |  |  | Lower Back Pain History of Renal Cancer |
|  |  |  | Hydronephrosis Abnormal US |
| CT UROGRAM: | Dual study: | 74178 | Painless Hematuria History of Renal Cancer |
| (Urinary System,  kidneys to bladder) | CT Abdomen with and without  contrast |  | Abnormal Cystogram Abnormal Renal US Bladder Mass or Tumor |
|  | CT Pelvis with and without  contrast |  |  |
| ADRENAL | CT Abdomen with and without  contrast | 74170 | Adrenal Mass |
|  |  |  | LLQ or RLQ Pain Dysuria |
| CT PELVIS: | CT Pelvis with contrast | 72193 | Pelvic Pain Groin Pain |
| General (from iliac crest to |  |  | Abnormal Pelvic US Trauma |
| pubis) |  |  | Pelvic Mass Prostatis  Infection/Abscess |
| CT PELVIS: without contrast | CT Pelvis without contrast | 72192 | Hernia Workup |



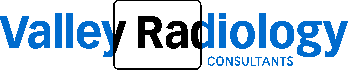
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| **BODY PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** |
| CT SPINE without CONTRAST | CT Cervical wo contrast | 72125 | |  | | --- | | Pain Fracture | | Trauma Post-op/Fusion | |
|  | CT Thoracic wo contrast  CT Lumbar wo contrast | 72128  72132 |  |
|  |  | 72131 | |  | | --- | | Degenerative Disc Disease | | Trauma Post-op/Fusion | |
|  |  |  |  |
| CT EXTREMITIES: | Dual study: | 73201 | Infection |
| Uper (hand, wrist, elbow, radius/ulna, humerus, shoulder) | CT Upper Extremity with contrast  CT Lower Extremity with contrast | 73701 | Tumor/Mass/Cancer/Mets  (MRI is more sensitive) |
|  |  |  |
|  | Dual study: | 73200 | Pain Fusion |
| CT EXTREMITIES: | CT Upper Extremity without | 73700 | Arthritis Malunion |
| Lower (foot, ankle, knee, hip | contrast |  | Fracture assessment |
| libia/fibula, femur) | CT Lower Extremity without  contrast |  |  |
| CTA HEAD: | CT Brain with and without contrast | 70496 | Aneurysm TIA/CVA |
| (Circle of Willis) |  |  | Non-traumatic SAH Vascular Malformation Family history of Aneurysm |
|  |  |  | 3rd Nerve Palsy |
| CT BRAIN | CT Brain with and without contrast | 70470 | |  | | --- | | Aneurysm TIA/CVA | | Non-traumatic SAH Vascular Malformation Family history of Aneurysm | | 3rd Nerve Palsy | |
| CT NECK ARTERIES | CT Angiography Neck with and  without contrast | 70498 | Carotid Stenosis Abnormal Carotid  Bruit Sonogram |
|  |  |  | Stroke/CVA/TIA |
| CTA CHEST | CTA Chest with and without contrast | 71275 | Pulmonary Embolism Thoracic Aneurysm |
|  |  |  | Aortic Dissection Lung Nodule Follow Up |
| CTA ABDOMEN | CT Abdomen with and without  contrast | 74175 | Abdominal Aortic Aneurysm Post Stent Grafting  (AAA) Mesenteric Ischemia |
|  |  |  | Renal Artery Stenosis Retroperitoneal Bleed |
|  |  |  | Dissection |
| CTA ABDOMEN | CT Abdomen and pelvis with and | 74174 | Aneurysm |
| CTA PELVIS | without contrast |  | Stent Graft Assessment |
| CTA AORTA | CT AORTA W / RUN OFF WITH WITHOUT INCLUDING IMAGES | 75635 |  |
| CTA ABDOMEN | CT Abdomen, pelvis, and lower | 74174 | Claudication |
| CTA PELVIS | extremities with and without | 73706 | Peripheral Vascular Disease |
| CTA LOWER EXTREMITIES | contrast |  | Aneurysm |
|  |  |  | Graft Assessment |

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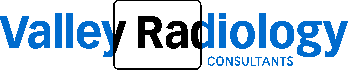
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| MRI Exam CPT Code Reference  Use this reference to quickly determine the correct exam for your patients based on their indications described herein and the CPT for the folder. |  |

\*Creatinine levels should be obtained prior to contrast studies. Please call if you have any questions.

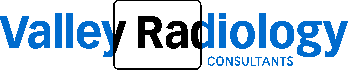
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| BODY  PART | PROCEDURE FOR  PREAUTHORIZATION | CPT  CODE | INDICATIONS FOR  EXAM OR STUDY | CONTRAST | SPEC |
| BRAIN | MRI Brain without contrast | 70551 | Alzheimer’s Stroke/CVA  Mental Status Change TIA (transient ischamic  Confusion attack)  Dementia Trauma  Memory Loss Dizziness/Vertigo | No Contrast | Neuro |
| MRI Brain with and without  contrast | 70553 | Tumor/Mass/Cancer weakness)  Cranial Nerve Lesions Pituitary lesion  HIV/AIDS Acoustic Neuroma  Infection Syringomyelia (Syrinx)  MS (multiple sclerosis) Visual Changes  Neurofibromatosis Metastases  Hearing Loss IAC Vascular lesions (AVM)  mass Elevated prolactin  Bell’s Palsy (facial Suspected MS | Yes Contrast | Neuro |
| MRA BRAIN: Arterial Circulation Cirlce of Willis | MRA Brain without contrast | 70544 | Aneurysm Family History  TIA (transient ischemic attack)  Stroke/CVA (cerebrovascular accident) | No Contrast | Neuro |
| MRA Brain: Venous Circulation | MRA Brain without contrast | 70544 | Venous Thrombosis | No Contrast | Neuro |
| MRA Brain with and without  contrast | 70546 | AVM  Sinus Thrombosis  Venous Circulatory Symptoms | As determined  by radiologist | Neuro |
| MRA Neck | MRA Neck with and without  contrast | 70549 | Alzheimer’s TIA  Mental Status Change (transient ischemic  Stroke/CVA attack) | Yes Contrast | Neuro |
| MRI ORBITS: Includes brain plus cuts through the orbits |  | 70543 | Trauma Tumor/Mass/Cancer/  Graves Disease Mets  Expothalmos/proptosis Vascular lesions  Pseudotumor (Hemangiome) | Yes Contrast | Neuro |
| MRI NECK:  Soft Tissue | MRI Orbits/face/neck  with and without contrast | 70543 | Infection Cancer/Mets  Pain Vocal Cord Paralysis Tumor/Mass | Yes Contrast | Neuro |
| MRI SPINE: Cervical | MRI Cervical Spine without  contrast | 72141 | Neck Pain Degenerative Disk  Arm/Shoulder Pain Disease  Disk Herniation (HNP) Radiculopathy Numbness | No contrast | Neuro  Ortho |
| MRI Cervical Spine with and  without contrast | 72156 | Syringomyelia (Syrinx) MS (Multiple Sclerosis)  Discitis (disk infection) Tumor/Mass/Cancer/  Osteomyelitis Mets  Myelopathy | Yes contrast | Neuro  Ortho |
| MRI SPINE: Thoracic | MRI Thoracic Spine without  contrast | 72146 | Back Pain Radiculopathy  Degenerative Disk Trauma  Disease Compression Fracture  Disk Herniation (HNP) (no history of malignancy) | No contrast | Neuro  Ortho |
| MRI Thoracic Spine with and  without contrast | 72157 | Syringomyelia (Syrinx) MS (Multiple Sclerosis)  Discitis (disk infection) Tumor/Mass/Cancer/  Osteomyelitis Mets  Myelopathy | Yes contrast | Neuro  Ortho |



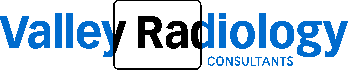
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| **BODY  PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** | **CONTRAST** | **SPEC** |
| MRI SPINE: Lumbar | MRI Lumbar Spine without  contrast | 72148 | Back/Leg Pain Scoliosis  Degenerative Disk Sciatica/radiculopathy  Disease Spinal stenosis  Disk Herniation (HNP) Compression Fracture  Radiculopathy (no history of malignancy) Trauma | No contrast | Neuro  Ortho |
| MRI Lumbar Spine with and  without contrast | 72158 | Discitis (disk infection) Tumor/Mass/Cancer/  Osteomyelitis Mets  Post-op of back  surgery | Yes contrast | Neuro  Ortho |
| MRI  LUMBOSACRAL PLEXUS | MRI Pelvis without contrast | 72195 | Leg Pain Lumbar plexopathy  Sciatica Sacral/coccyx pain Radiculopathy | No Contrast | Neuro |
| MRI  BRACHIAL PLEXUS | MRI Upper Extremity  Non-joint with and without  contrast | 73220 | Shoulder Injury  nerve avulsion  brachial plexopathy | Determined by  radiologist | Neuro |
| MRI CHEST | MRI Chest/mediastinum  with and without contrast | 71552 | Tumor/Mass/Cancer/Mets | Yes Contrast | Body |
| MRA AORTA | MRA Aorta with and without  contrast | 74185 | Abdominal aortic dissection | Yes Contrast | Body |
| MRA AORTA: with peripheral runoff | MRA Aorta with and without  contrast  Lower extremity with and  without contrast | 74185  73725 | Peripheral vascular disease  Claudication | No Contrast | Body |
| MRA CHEST | MRA Chest with and without  contrast | 71555 | Excluding myocardium  Thoracic aorta | Yes Contrast | Body |
| BREAST MRI | MRI Breast bilateral with and  without contrast | 77049 | Newly diagnosed breast cancer  Family history of breast cancer  BRCA1 and BRCA2 genes (some criterai may apply)  Implant integrity rupture | Yes Contrast | Body |
| BREAST MRI | MRI Breast without contrast | 77046 | Breast Implant Evaluation | No Contrast | Body |
| MRI  ABDOMEN: | MRI Abdomen with and  without contrast | 74183 | Tumor/Mass/Cancer/Mets  Abdominal Pain | Yes Contrast | Body |
| MRI  ABDOMEN: Liver | Post embolization Cirrhosis  Hemangioma Increased liver function  Hepatoma tets  Hepatitis |
| MRI  ABDOMEN: Renal | Hematuria (blood in Renal mass (cyst or  urine) solid)  Transitional cell Abnormal findings carcinoma of kidney |
| MRI  ABDOMEN: Adrenal | MRI Abdomen with and  without contrast | 74183 | Adrenal mass or lesion  Pheochromocytoma  Hypertension | Determined by  radiologist | Body |
| MRCP:Biliary | MRI Abdomen with and  without contrast | 74183 | Abdominal Pain Jaundice  Biliary obstruction Abnormal enzymes Stones | Yes contrast | Body |



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| **BODY  PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** | **CONTRAST** | **SPEC** |
| MRCP:  Pancreas | MRI Abdomen with and  without contrast | 74183 | Pancreatitis Increased liver function  Pancreas Mass tests | Yes contrast | Body |
|  |  |  | Cholangiocarcinoma Painless jaundice |  |  |
|  |  |  | PSC (Primary Ampulia evaluation |  |  |
|  |  |  | Sclerosis Cholangitis |  |  |
| MRA  ABDOMEN | MRA Abdomen with and  without contrast | 74185 | Renal artery stenosis Mesenteric arterial  Hypertension Ischemia | Yes contrast | Body |
| MRA PELVIS:  ilias vessels | MRA Pelvis with and without  contrast | 72198 | Pelvic venous thrombosis | Yes contrast | Body |
| MRI PELVIS:  Soft tissue: | MRI Pelvis with and without  contrast | 72197 | Pain Mets  Abscess Decubitus Ulcer | Yes contrast | Body |
| General |  |  | Tumor/Mass/Cancer/ |  |  |
| MRI PELVIS:  Soft tissue: | MRI Pelvis with and without  contrast | 72197 | Fibroid Fibroid Embolization  Adenomysis (UFE) | Yes contrast | Body |
|  |  |  | Infertility Endometrioma |  |  |
| Uterus/Overies |  |  | Pre/Post-Unterine Ovarian Mass |  |  |
| MRI | Dual Study: | 74183 |  | Yes contrast | Body |
| ENTEROGRAPHY | MRI Abdomen with and  without contrast | 72197 | Crohn’s Disease Crohn’s fistulous  Celiac Disease disease | and Glucagon |  |
|  | MRI Pelvis with and without  contrast |  | (Spruce) Small bowel tumor |  |  |
| MRI | MRI Non-joint without | 73218 | Fracture | No contrast | Body |
| EXTREMITY: | contrast: | 73718 | Stress fracture |  |  |
| NON-JOINT: | Upper extremity  Lower extremity |  | Muscle or tendon tear |  |  |
| Forearm, humerus, Lower |  |  |  |  |  |
| MRI Non-joint with and | 73220 | Abscess Myositis | Yes contrast | Ortho |
| leg/calf, Femur/ thigh | without contrast:  Upper extremity | 73720 | Ulcer Osteomyelitis  Tumor/Mass/Cancer/ Morton’s neuroma |  |  |
|  | Lower extremity |  | Mets Soft tissue tumor or |  |  |
|  |  |  | Plantar fascititis mass |  |  |
| MRI | MRI Joint without contrast: | 73221 | Arthritis Meninscla tear | No contrast | Ortho |
| EXTREMITY: | Upper extremity  Lower extremity | 73721 | Avascular necrosis Muscle tear  (AVN) Ligament tear |  |  |
| JOINT: |  |  | Stress fracture Cartilage tear |  |  |
| UPPER: |  |  | Internal derangement Ostochondritis |  |  |
| Hand |  |  | Joint pain dissecans (OCD) |  |  |
| Wrist |  |  |  |  |  |
|  |  |  |  |  |
| Elbow | MRI Joint with and without | 73223 | Abscess Inflammatory arthritis | Yes contrast | Ortho |
| Shoulder | contrast: | 73723 | Ulcer Septic arthritis |  |  |
| SC Joint | Upper extremity |  | Cellulitis Tumor/Mass/Cancer/ |  |  |
|  | Lower extremity |  | Plantar fascititis Mets |  |  |
| LOWER: |  |  | Myositis Labral tear  Osteomyelitis |  |  |
| Foot |  |  |  |  |  |
| Ankle |  |  |  |  |  |
| Knee |  |  |  |  |  |
| Hip (whole  pelvis) |  |  |  |  |  |



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| **BODY  PART** | **PROCEDURE FOR  PREAUTHORIZATION** | **CPT  CODE** | **INDICATIONS FOR  EXAM OR STUDY** | **CONTRAST** | **SPEC** |
| MRI HIP/  PELVIS | MRI Pelvis without contrast | 72195 | Fracture Trauma  Hip/Pelvis Pain Muscle/Tendon tear | No contrast | Ortho |
| MRI Pelvis with and without  contrast | 72197 | Tumor/Mass/Cancer/ Osteomyelitis  Mets Septic arthritis | Yes contrast | Ortho |
| MRA UPPER  EXTREMITY | MRA Upper Extremity with  and without contrast | 73225 | Subiciavian Tenderness  Redness or swelling | Yes contrast | Ortho |
| MRA LOWER  EXTREMITY | MRA Lower Extremity with  and without contrast | 73725 | Peripheral vascular disease | Yes contrast | Ortho |
| MR ARTHO- GRAM: Upper Extremity: Shoulder Elbow Wrist | MRI Upper Extremity Joint  with and without contrast | 73222 | Slap tear Ligament injury  Labral tear Tunnel syndrome  Loose body TFCC tear | Yes contrast | Ortho |
| MR ARTHO- GRAM: Lower Extremity: Hip  Knee  Ankle | MRI Lower Extremity Joint  with and without contrast | 73723 | Labral Tear  FAI (Femoracetabular impingement)  Loose Body  OCD lesion (Osteochondritis Dissecans) | Yes contrast | Ortho |



**Lung Cancer Screening Requirements**

**Decision Memo for Screening for Lung Cancer with Low Dose Computed Tomography (LDCT) (CAG-00439N)**

**Decision Summary**

The Centers for Medicare & Medicaid Services (CMS) has determined that the evidence is sufficient to add a lung cancer screening counseling and shared decision making visit, and for appropriate beneficiaries, annual screening for lung cancer with low dose computed tomography (LDCT), as an additional preventive service benefit under the Medicare program only if all of the following criteria are met:

Beneficiary eligibility criteria:

* Age 55 — 77 years;
* Asymptomatic (no signs or symptoms of lung cancer);
* Tobacco smoking history of at least 30 pack-years (one pack-year = smoking one pack per day for one year; 1 pack = 20 cigarettes);
* Current smoker or one who has quit smoking within the last 15 years; and
* Receives a written order for LDCT lung cancer screening that meets the following criteria:
* *For the initial LDCT lung cancer screening service:* a beneficiary must receive a written order for LDCT lung cancer screening during a lung cancer screening counseling and shared decision making visit, furnished by a physician (as defined in Section 1861(r)(1) of the Social Security Act) or qualified non-physician practitioner (meaning a physician assistant, nurse practitioner, or clinical nurse specialist as defined in §1861(aa)(5) of the Social Security Act). A lung cancer screening counseling and shared decision making visit includes the following elements (and is appropriately documented in the beneficiary's medical records):
* Determination of beneficiary eligibility including age, absence of signs or symptoms of lung cancer, a specific calculation of cigarette smoking pack-years; and if a former smoker, the number of years since quitting;
* Shared decision making, including the use of one or more decision aids, to include benefits and harms of screening, follow-up diagnostic testing, over-diagnosis, false positive rate, and total radiation exposure;
* Counseling on the importance of adherence to annual lung cancer LDCT screening, impact of comorbidities and ability or willingness to undergo diagnosis and treatment;
* Counseling on the importance of maintaining cigarette smoking abstinence if former smoker; or the importance of smoking cessation if current smoker and, if appropriate, furnishing of information about tobacco cessation interventions; and
* If appropriate, the furnishing of a written order for lung cancer screening with LDCT.
* *For subsequent LDCT lung cancer screenings:* the beneficiary must receive a written order for LDCT lung cancer screening, which may be furnished during any appropriate visit with a physician (as defined in Section 1861(r)(1) of the Social Security Act) or qualified non-physician practitioner (meaning a physician assistant, nurse practitioner, or clinical nurse specialist as defined in Section 1861(aa) (5) of the Social Security Act). If a physician or qualified non-physician practitioner elects to provide a lung cancer screening counseling and shared decision making visit for subsequent lung cancer screenings with LDCT, the visit must meet the criteria described above for a counseling and shared decision making visit.
* Written orders for both initial and subsequent LDCT lung cancer screenings must contain the following information, which must also be appropriately documented in the beneficiary's medical records:
* Beneficiary date of birth;
* Actual pack - year smoking history (number);
* Current smoking status, and for former smokers, the number of years since quitting smoking;
* Statement that the beneficiary is asymptomatic (no signs or symptoms of lung cancer); and
* National Provider Identifier (NPI) of the ordering practitioner.



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