

**SEPARATELY BILLABLE CPT CODES FOR ULTRASOUND GUIDED PROCEDURES (in numerical order)**

<b>CPT CODE</b>	<b>DESCRIPTION</b>	<b>wRVU 2023</b>
10060	INCISION AND DRAINAGE OF ABSCESS SIMPLE	1.22
10061	INCISION AND DRAINAGE OF ABSCESS COMPLICATED	2.45
10120	INCISION AND REMOVAL FOREIGN BODY SIMPLE	1.22
10121	INCISION AND REMOVAL FOREIGN BODY COMPLICATED	2.74
10160	ASPIRATION/PUNCTURE OF ABSCESS	1.25
36000	VENIPUNCTURE OR CATHETER PLACEMENT AND INJECTION PROCEDURE	0.18
36010	CATHETER PLACED IN SVC OR IVC; NO PICC OR CENTRAL VENOUS CATHETER	2.18
36410	VENIPUNCTURE, AGE ≥ 3, REQUIRING THE EXPERTISE OF A PHYSICIAN OR OTHER QUALIFIED PROVIDER	0.18
36555	INSERTION OF NON-TUNNELED CENTRAL VENOUS CATHETER AGE < 5 YO	1.93
36556	INSERTION OF A NON-TUNNELED CENTRAL VENOUS CATHETER AGE ≥ 5 YO	1.75
42700	DRAINAGE OF TONSIL OR PERITONSILLAR ABSCESS	1.67
51100	ASPIRATION OF BLADDER BY NEEDLE	0.78
76942	REGIONAL NERVE BLOCKS (U/S GUIDED NEEDLE PLACEMENT) - SEE "U/S GUIDED PROCEDURE CODES" CHART FOR MORE DETAIL	0.67
62270	DIAGNOSTIC LUMBAR PUNCTURE	1.22

\*not to include jugular or femoral veins and not routine venipuncture

Note: These “Separately Billable CPT Codes” should be used in addition to the “US Guided Procedure Codes” when US guidance is

**DO NOT USE THE FOLLOWING CODES WHEN PERFORMING AN ULTRASOUND GUIDED PICC WITH THE ADD ON +76937  
INSTEAD USE 36572 AND 36573 FOR PICC WITH IMAGE GUIDANCE**

36568#	INSERTION OF A NON-TUNNELED PICC AGE < 5 YO WITHOUT IMAGE GUIDANCE	2.11
36569#	INSERTION OF A NON-TUNNELED PICC AGE ≥ 5YO WITHOUT IMAGE GUIDANCE	1.90

**Disclaimer: wRVU Changes for 2023 are noted in RED. All codes and wRVU apply to 2023 only and may change in future years.**

**ADVANCED EMERGENCY ULTRASOUND CODES 2023 (recommend advanced training)**

<b>US STUDY</b>	<b>CPT CODE</b>	<b>CPT Description</b>	<b>wRVU 2023</b>
<b>COMPLETE TRANSTHORACIC ECHO W/DOPPLER</b>	93306	Echocardiography, transthoracic, real-time with image documentation (2D), w/ M-Mode recording, w/ spectral Doppler and color flow Doppler	1.46
<b>COMPLETE TRANSTHORACIC ECHO W/O DOPPLER</b>	93307	Echocardiography, transthoracic, real-time with image documentation (2D), w/ M-Mode recording, w/o spectral Doppler or color flow Doppler	0.92
<b>TRANSTHORACIC ECHO, LIMITED</b>	93308	Echocardiography, transthoracic, real-time with image documentation (2D), with or without M-Mode recording; follow-up or limited	0.53
<b>TRANSESOPHAGEAL ECHO</b>	93312	Echocardiography, transesophageal, real time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	2.3
<b>ADNEXAL PATHOLOGY</b>			
<b>NONPREGNANT UTERUS TA, COMPLETE</b>	76856	Ultrasound, pelvic (nonobstetric), complete B-scan and/or real time image	0.69
<b>NONPREGNANT UTERUS TA, LIMITED</b>	76857	Ultrasound, pelvic (nonobstetric), B-scan and/or real time with image documentation, limited or follow-up	0.50
<b>NONPREGNANT NONUTERUS TV</b>	76830	Ultrasound, transvaginal (nonobstetric) and/or real time with image documentation can be used for complete or limited study	0.69
<b>FOCUSED DUPLEX SCAN OF OVARIES OR TESTES FOR TORSION</b>	93976	Duplex scan of arterial inflo and venous outflow of abdominal, pelvic, scrotal contents or retroperitoneal organs; limited or unilateral	0.80
<b>US SCROTUM AND CONTENTS</b>	76870	Ultrasound internal anatomy of scroum and scrotal contents; to evaluate for hydrocele, azoospermia, oligospermia, orchitis and epididymitis	0.64
<b>DVT STUDY, COMPLETE BILATERAL</b>	93970	Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study	0.70
<b>Disclaimer: Changes to this document for 2023 are noted in RED. All codes and wRVU apply to 2023 only and may change in future years.</b>			

ULTRASOUND GUIDED PROCEDURE CODES 2023

US-GUIDED PROCEDURE	CPT CODE	NOTES	wRVU 2023	ADDITIONAL CPT CODE
US-GUIDED PERICARDIOCENTESIS <sup>2</sup>	33016	The old code, 76930 has been deleted. This new code includes pericardiocentesis and image guidance. Requires image of site to be localized but does not require image of needle in site.	4.40	33010
US GUIDED VASCULAR ACCESS PLACEMENT	+76937 <sup>3</sup>	Requires written documentation of real-time ultrasound guidance and a representative image but does not require image of needle in site. This is an add-on code and must be used in conjunction with a primary code <sup>3</sup>	0.30	36000, 36555, 36556, 36557, 36558
US-GUIDED THORACENTESIS <sup>2</sup>	32555	Thoracentesis and aspiration with a needle or catheter without leaving a catheter or needle. Requires image of site to be localized but does not require image of needle in site	2.27	
US-GUIDED PARACENTESIS <sup>2</sup>	49083	Requires image of site to be localized but does not require image of needle in site	2.00	
US-GUIDED INSERTION OF A NON-TUNNELED PICC AGE < 5 YO <sup>2</sup>	36572	PICC insertion without subcutaneous port including image guidance. Requires image of site to be localized but does not require image of needle in site	1.82	
US-GUIDED INSERTION OF A NON-TUNNELED PICC AGE ≥ 5 YO <sup>2</sup>	36573	PICC insertion without subcutaneous port including image guidance. Requires image of site to be localized but does not require image of needle in site	1.7	
MISCELLANEOUS ULTRASOUND-GUIDED PROCEDURE WITHOUT CATHETER - NON ORGAN SPECIFIC <sup>1</sup>	76942	Ultrasound guidance for needle placement (biopsy, aspiration, injection, localization). Requires image of site to be localized but does not require image of needle in site	0.67	
US-GUIDED ABSCESS DRAINAGE <sup>1</sup>	76942		0.67	10160 OR 10061
US-GUIDED PERITONSILLAR ABSCESS DRAINAGE <sup>1</sup>	76942		0.67	42700
US-GUIDED LUMBAR PUNCTURE <sup>1</sup>	76942		0.67	62270
US-GUIDED SUPRAPUBIC ASPIRATION <sup>1</sup>	76942		0.67	51100
US-GUIDED FB REMOVAL <sup>1</sup>	76942		0.67	10120 OR 10121
US-GUIDED JOINT ASPRIATION <sup>2</sup>	20604	Arthrocentesis of small joint (fingers, toes)	0.89	
	20606	Arthrocentesis of medium joint (TMJ, AC, wrist, elbow, ankle)	1.00	
	20611	Arthrocentesis of large joint (shoulder, hip, knee)	1.10	
<b>ULTRASOUND GUIDED REGIONAL NERVE BLOCKS</b>				
FEMORAL <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64447
BRACHIAL PLEXUS (includes interscalene, supraclavicular, infraclavicular, axillary, and intercostal nerve blocks) <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64415 (brachial plexus); 64417 (axillary), 64418 (suprascapular), 64420/64421 (intercostal)
ULNAR <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64450
RADIAL <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64450
SCIATIC <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64445
SAPHENOUS <sup>1</sup>	76942	Requires image of site to be localized but does not require image of needle in site	0.67	64450

1. These codes are imaging codes only. They do not include the charge for the surgical procedure.

2. These codes include both the imaging code, as well as the surgical procedural code.

3. CMS designated add-on codes are procedures that are performed in conjunction with another primary procedure/service. These are designated by the "+" symbol in front of the code. Eg. placing a catheter in the vein is billed with ultrasound guided vascular access placement and coded as: 36000 +76937

**ULTRASOUND GUIDED PROCEDURE (LEAVING A CATHETER IN PLACE) CODES 2023**

US-GUIDED PROCEDURE	CPT CODE	NOTES	wRVU
US-GUIDED THORACENTESIS	32557	Thoracentesis and catheter placement, with U/S guidance. Requires image of site to be localized but does not require image of the needle in site	3.12
US-GUIDED PERICARDIOCENTESIS	33017	Percutaneous pericardial drainage and catheter placement, with U/S guidance; $\geq 6$ y/o. Requires image of site to be localized but does not require image of the needle in site	4.62
IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, SOFT TISSUE	10030	(eg, abscess, hematoma, seroma, lymphocele, cyst), soft tissue (eg, extremity, abdominal wall, neck), percutaneous, includes moderate sedation when used. Must leave catheter in place for drainage. Requires image of site to be localized but does not require image of needle in site	2.75
IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, VISCERAL PERCUTANEOUS	49405	(eg, abscess, hematoma, seroma, lymphocele, cyst), visceral (eg, bladder), percutaneous, includes moderate sedation when used. Must leave catheter in place for drainage. Requires image of site to be localized but does not require image of needle in site	4
IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, PERITONEAL/RETROPERITONEAL PERCUTANEOUS APPROACH	49406	(eg, abscess, hematoma, seroma, lymphocele, cyst), peritoneal/retroperitoneal percutaneous, includes moderate sedation when used. Must leave catheter in place for drainage. Requires image of site to be localized but does not require image of needle in site.	4
IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, PERITONEAL/RETROPERITONEAL TRANSVAGINAL/TRANSRECTAL APPROACH	49407	(eg, abscess, hematoma, seroma, lymphocele, cyst), peritoneal/retroperitoneal transvaginal/transrectal includes moderate sedation when used. Must leave catheter in place for drainage.	4.25
<b>Disclaimer: Changes to this document for 2023 are noted in RED. All codes and wRVU apply to 2023 only and may change in future years.</b>			

**SEPARATELY BILLABLE CPT CODES FOR ULTRASOUND GUIDED PROCEDURES (in numerical order)**

<b>CPT CODE</b>	<b>DESCRIPTION</b>	<b>wRVU 2023</b>
10060	INCISION AND DRAINAGE OF ABSCESS SIMPLE	1.22
10061	INCISION AND DRAINAGE OF ABSCESS COMPLICATED	2.45
10120	INCISION AND REMOVAL FOREIGN BODY SIMPLE	1.22
10121	INCISION AND REMOVAL FOREIGN BODY COMPLICATED	2.74
10160	ASPIRATION/PUNCTURE OF ABSCESS	1.25
36000	VENIPUNCTURE OR CATHETER PLACEMENT AND INJECTION PROCEDURE	0.18
36010	CATHETER PLACED IN SVC OR IVC; NO PICC OR CENTRAL VENOUS CATHETER	2.18
36410	VENIPUNCTURE, AGE ≥ 3, REQUIRING THE EXPERTISE OF A PHYSICIAN OR OTHER QUALIFIED PROVIDER	0.18
36555	INSERTION OF NON-TUNNELED CENTRAL VENOUS CATHETER AGE < 5 YO	1.93
36556	INSERTION OF A NON-TUNNELED CENTRAL VENOUS CATHETER AGE ≥ 5 YO	1.75
42700	DRAINAGE OF TONSIL OR PERITONSILLAR ABSCESS	1.67
51100	ASPIRATION OF BLADDER BY NEEDLE	0.78
76942	REGIONAL NERVE BLOCKS (U/S GUIDED NEEDLE PLACEMENT) - SEE "U/S GUIDED PROCEDURE CODES" CHART FOR MORE DETAIL	0.67
62270	DIAGNOSTIC LUMBAR PUNCTURE	1.22

\*not to include jugular or femoral veins and not routine venipuncture

Note: These “Separately Billable CPT Codes” should be used in addition to the “US Guided Procedure Codes” when US guidance is

**DO NOT USE THE FOLLOWING CODES WHEN PERFORMING AN ULTRASOUND GUIDED PICC WITH THE ADD ON +76937  
INSTEAD USE 36572 AND 36573 FOR PICC WITH IMAGE GUIDANCE**

36568#	INSERTION OF A NON-TUNNELED PICC AGE < 5 YO WITHOUT IMAGE GUIDANCE	2.11
36569#	INSERTION OF A NON-TUNNELED PICC AGE ≥ 5YO WITHOUT IMAGE GUIDANCE	1.90

**Disclaimer: wRVU Changes for 2023 are noted in RED. All codes and wRVU apply to 2023 only and may change in future years.**