

Automatic Studies are services which may be performed in the specialist's office when patients are seen for visits and evaluations as a result of our direct access programs or when authorized by a referral from their primary care physician. These services may be performed even if the procedure itself was not specifically indicated on the referral. These are in general, procedures which are integral to the evaluation of the problem which led to the referral to the specialist. Inclusion of a study on this list does not guarantee payment. Reimbursement for Automatic Studies will be made according to our standard processing guidelines. Automatic studies apply only to procedures done in the physician's office.

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Allergy & Immunology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
94010 - 94070	Spirometry
94664	Aerosol or vapor inhalations for sputum mobilization, bronchodilation, or sputum induction for diagnostic purposes; initial demonstration and / or evaluation
94665	Subsequent
95070	Bronchial Challenge Test
G0001	Venipuncture

Audiology - Adult & Pediatric

CPT Codes	Description
92551	Screening test, pure tone, air only
92552	Pure tone audiometry (threshold); air only
92553	air and bone
92555	Speech audiometry threshold;
92556	with speech recognition
92557	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)
92567*	Tympanometry (impedance testing)
92568*	Acoustic reflex testing
92579	Visual reinforced audiometry
92586	BAER - Limited
*Subject to appropriateness review.	

Cardiology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
78460-78496	Myocardial perfusion studies
78990	Provision of diagnostic radiopharmaceutical(s)
93000 - 93010	EKGs
93015 - 93018	Stress Tests
93224 - 93233	Holter monitoring
93303 - 93317	Echocardiography
93320 - 93350	Dopplers
93733	Telephonic analysis of pacemaker
93736	Telephonic analysis of pacemaker
93880 - 93882	Arterial duplex scan - extracranial
93922 - 93931	Arterial duplex scan - extremities
93965	Venous doppler

93970 - 93979	Venous duplex scan - extremities
A4641 - A4647	Radiopharmaceutical for stress tests
A9500 - A9505	Radiopharmaceutical for stress tests
G0001	Venipuncture

Colon/Rectal Surgery

CPT Codes	Description
10060	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single
10061	Complicated or multiple
10080	Incision and drainage of pilonidal cyst; simple
10081	Complicated or multiple
11770	Excision of pilonidal cyst; simple
11771	Extensive
11772	Complicated
36415	Venipuncture
45300 - 45385	Lower GI Endoscopy
46040 - 46060	Incision and drainage of abscess
46080	Sphincterotomy, anal, division of sphincter (separate procedure)
46083	Incision of thrombosed hemorrhoid, external
46200	Fissurectomy, with or without sphincterotomy
46210	Cryptectomy, single
46211	Multiple (separate procedure)
46220	Papillectomy or excision of simple skin tag, anus (separate procedure)
46221 - 46262	Hemorrhoidectomy
46270 - 46280	Treatment of anal fistula
46320	Enucleation or excision of external thrombotic hemorrhoid
46500	Injection of sclerosing solution, hemorrhoids
46600 - 46615	Anoscopy

46900 - 46924	Destruction of anal lesions
46934 - 46936	Destruction of hemorrhoids
46940	Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure), initial
46942	Subsequent
46945 - 46946	Ligation of internal hemorrhoids
82270 - 82273	Occult Blood Screening
87177	O&P Smear
87208	Smear, primary source, with interpretation, direct or concentrated, dry for ova and parasites
87210	Wet mount with simple stain, for bacteria, fungi
87211	Wet and dry mount for ova and parasite
G0001	Venipuncture

Dermatology - Adult & Pediatric

CPT Codes	Description
10040	Acne surgery (eg, marsupialization, opening or removal of multiple milia, comedones, cysts, pustules)
10060	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single
10061	Complicated or multiple
11000	Debridement of extensive eczematous or infected skin; up to 10% of body surface
11001	each additional 10% of the body surface
11040	Debridement; skin, partial thickness
11041	skin; full thickness
11042	skin; and subcutaneous tissue
11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed (separate procedure);single lesion
11101	each separate/additional lesion

11300	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.5 cm or less
11301	lesion diameter 0.6 to 1.0 cm
11302	lesion diameter 1.1 to 2.0 cm
11303	lesion diameter over 2.0 cm
11305	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11306	lesion diameter 0.6 to 1.0 cm
11307	lesion diameter 1.1 to 2.0 cm
11308	lesion diameter over 2.0 cm
11310	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less
11311	lesion diameter 0.6 to 1.0 cm
11312	lesion diameter 1.1 to 2.0 cm
11313	lesion diameter over 2.0 cm
11400	Excision, benign lesion, except skin tag (unless listed elsewhere), trunk, arms, or legs; lesion diameter 0.5 cm or less
11401	lesion diameter 0.6 to 1.0 cm
11402	lesion diameter 1.1 to 2.0 cm
11403	lesion diameter 2.1 to 3.0 cm
11404	lesion diameter 3.1 to 4.0 cm
11406	lesion diameter over 4.0 cm
11420	Excision, benign lesion, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11421	lesion diameter 0.6 to 1.0 cm
11422	lesion diameter 1.1 to 2.0 cm
11423	lesion diameter 2.1 to 3.0 cm
11424	lesion diameter 3.1 to 4.0 cm
11426	lesion diameter over 4.0 cm
11440	Excision, other benign lesion (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less

11441	lesion diameter 0.6 to 1.0 cm
11442	lesion diameter 1.1 to 2.0 cm
11443	lesion diameter 2.1 to 3.0 cm
11444	lesion diameter 3.1 to 4.0 cm
11446	lesion diameter over 4.0 cm
11600	Excision, malignant lesion, trunk, arms, or legs; lesion diameter 0.5 cm or less
11601	lesion diameter 0.6 to 1.0 cm
11602	lesion diameter 1.1 to 2.0 cm
11603	lesion diameter 2.1 to 3.0 cm
11604	lesion diameter 3.1 to 4.0 cm
11606	lesion diameter over 4.0 cm
11620	Excision, malignant lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11621	lesion diameter 0.6 to 1.0 cm
11622	lesion diameter 1.1 to 2.0 cm
11623	lesion diameter 2.1 to 3.0 cm
11624	lesion diameter 3.1 to 4.0 cm
11626	lesion diameter over 4.0 cm
11640	Excision, malignant lesion, face, ears, eyelids, nose, lips; lesion diameter 0.5 cm or less
11641	lesion diameter 0.6 to 1.0 cm
11642	lesion diameter 1.1 to 2.0 cm
11643	lesion diameter 2.1 to 3.0 cm
11644	lesion diameter 3.1 to 4.0 cm
11646	lesion diameter over 4.0 cm
11900	Injection, intralesional; up to and including seven lesions
11901	more than seven lesions
12031 - 14350	Repair codes

17000	Destruction by any method, including laser, with or without surgical curetment, all benign facial lesions or premalignant lesions in any location, or benign lesions other than cutaneous vascular proliferative lesions, including local anesthesia; one lesion
17003	second through 14 lesions, each (List separately in addition to code for first lesion)
17004	15 or more lesions
17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq. cm
17107	10.0 -50.0 sq. cm
17108	over 50.0 sq. cm
17110	Destruction by any method of flat warts, molluscum contagiosum or milia;up to 14 lesions
17111	15 or more lesions
17250	Chemical cuaterization of granulation tissue
17260	Destruction, malignant lesion, any method, trunk, arms or legs; lesion diameter 0.5 cm or less
17261	lesion diameter 0.6 to 1.0 cm
17262	lesion diameter 1.1 to 2.0 cm
17263	lesion diameter 2.1 to 3.0 cm
17264	lesion diameter 3.1 to 4.0 cm
17266	lesion diameter over 4.0 cm
17270	Destruction, malignant lesion, any method, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
17271	lesion diameter 0.6 to 1.0 cm
17272	lesion diameter 1.1 to 2.0 cm
17273	lesion diameter 2.1 to 3.0 cm
17274	lesion diameter 3.1 to 4.0 cm
17276	lesion diameter over 4.0 cm
17280	Destruction, malignant lesion, any method, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less
17281	lesion diameter 0.6 to 1.0 cm

17282	lesion diameter 1.1 to 2.0 cm
17283	lesion diameter 2.1 to 3.0 cm
17284	lesion diameter 3.1 to 4.0 cm
17286	lesion diameter over 4.0 cm
17340	Cryotherapy (CO2 slush, liquid N2)
17360	Chemical exfoliation for acne
36415	Venipuncture
40490	Biopsy of lip
54100	Biopsy of penis; cutaneous (separate procedure)
67810	Biopsy of eyelid
69100	Biopsy external ear
87177	O&P smear
87205	Smear, primary source, with interpretation; routine or cell stain for bacteria, fungi, types
87208	Smear, primary source, with interpretation ; direct or concentrated dry for ova and parasites
87210	Smear, primary source, with interpretation; wet mount with simple stain for bacteria fungi, ova and/or parasites
87211	Smear, primary source, with interpretation; wet and dry mount, for ova and parasites
87220	Tissue examination for fungi (eg, KOH slide)
88331	Frozen section
G0001	Venipuncture

Dermatopathology

CPT Codes	Description
10040	Acne surgery (eg, marsupialization, opening or removal of multiple milia, comedones, cysts, pustules)
10060	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single
10061	Complicated or multiple

11000	Debridement of extensive eczematous or infected skin; up to 10% of body surface
11001	each additional 10% of the body surface
11040	Debridement; skin, partial thickness
11041	skin; full thickness
11042	skin; and subcutaneous tissue
11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed (separate procedure);single lesion
11101	each separate/additional lesion
11300	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.5 cm or less
11301	lesion diameter 0.6 to 1.0 cm
11302	lesion diameter 1.1 to 2.0 cm
11303	lesion diameter over 2.0 cm
11305	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11306	lesion diameter 0.6 to 1.0 cm
11307	lesion diameter 1.1 to 2.0 cm
11308	lesion diameter over 2.0 cm
11310	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less
11311	lesion diameter 0.6 to 1.0 cm
11312	lesion diameter 1.1 to 2.0 cm
11313	lesion diameter over 2.0 cm
11400	Excision, benign lesion, except skin tag (unless listed elsewhere), trunk, arms, or legs; lesion diameter 0.5 cm or less
11401	lesion diameter 0.6 to 1.0 cm
11402	lesion diameter 1.1 to 2.0 cm
11403	lesion diameter 2.1 to 3.0 cm
11404	lesion diameter 3.1 to 4.0 cm
11406	lesion diameter over 4.0 cm

11420	Excision, benign lesion, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11421	lesion diameter 0.6 to 1.0 cm
11422	lesion diameter 1.1 to 2.0 cm
11423	lesion diameter 2.1 to 3.0 cm
11424	lesion diameter 3.1 to 4.0 cm
11426	lesion diameter over 4.0 cm
11440	Excision, other benign lesion (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less
11441	lesion diameter 0.6 to 1.0 cm
11442	lesion diameter 1.1 to 2.0 cm
11443	lesion diameter 2.1 to 3.0 cm
11444	lesion diameter 3.1 to 4.0 cm
11446	lesion diameter over 4.0 cm
11600	Excision, malignant lesion, trunk, arms, or legs; lesion diameter 0.5 cm or less
11601	lesion diameter 0.6 to 1.0 cm
11602	lesion diameter 1.1 to 2.0 cm
11603	lesion diameter 2.1 to 3.0 cm
11604	lesion diameter 3.1 to 4.0 cm
11606	lesion diameter over 4.0 cm
11620	Excision, malignant lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
11621	lesion diameter 0.6 to 1.0 cm
11622	lesion diameter 1.1 to 2.0 cm
11623	lesion diameter 2.1 to 3.0 cm
11624	lesion diameter 3.1 to 4.0 cm
11626	lesion diameter over 4.0 cm
11640	Excision, malignant lesion, face, ears, eyelids, nose, lips; lesion diameter 0.5 cm or less
11641	lesion diameter 0.6 to 1.0 cm
11642	lesion diameter 1.1 to 2.0 cm

11643	lesion diameter 2.1 to 3.0 cm
11644	lesion diameter 3.1 to 4.0 cm
11646	lesion diameter over 4.0 cm
11900	Injection, intralesional; up to and including seven lesions
11901	more than seven lesions
12031 - 14350	Repair codes
17000	Destruction by any method, including laser, with or without surgical curetment, all benign facial lesions or premalignant lesions in any location, or benign lesions other than cutaneous vascular proliferative lesions, including local anesthesia; one lesion
17003	second through 14 lesions, each (List separately in addition to code for first lesion)
17004	15 or more lesions
17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq. cm
17107	10.0 -50.0 sq. cm
17108	over 50.0 sq. cm
17110	Destruction by any method of flat warts, molluscum contagiosum or milia; up to 14 lesions
17111	15 or more lesions
17250	Chemical cuaterization of granulation tissue
17260	Destruction, malignant lesion, any method, trunk, arms or legs; lesion diameter 0.5 cm or less
17261	lesion diameter 0.6 to 1.0 cm
17262	lesion diameter 1.1 to 2.0 cm
17263	lesion diameter 2.1 to 3.0 cm
17264	lesion diameter 3.1 to 4.0 cm
17266	lesion diameter over 4.0 cm
17270	Destruction, malignant lesion, any method, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less
17271	lesion diameter 0.6 to 1.0 cm
17272	lesion diameter 1.1 to 2.0 cm

17273	lesion diameter 2.1 to 3.0 cm
17274	lesion diameter 3.1 to 4.0 cm
17276	lesion diameter over 4.0 cm
17280	Destruction, malignant lesion, any method, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less
17281	lesion diameter 0.6 to 1.0 cm
17282	lesion diameter 1.1 to 2.0 cm
17283	lesion diameter 2.1 to 3.0 cm
17284	lesion diameter 3.1 to 4.0 cm
17286	lesion diameter over 4.0 cm
17340	Cryotherapy (CO2 slush, liquid N2)
17360	Chemical exfoliation for acne
36415	Venipuncture
40490	Biopsy of lip
54100	Biopsy of penis; cutaneous (separate procedure)
67810	Biopsy of eyelid
69100	Biopsy external ear
87177	O&P smear
87205	Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types
87208	Smear, primary source, with interpretation ; direct or concentrated dry for ova and parasites
87210	Smear, primary source, with interpretation; wet mount with simple stain for bacteria fungi, ova and/or parasites
87211	Smear, primary source, with interpretation; wet and dry mount, for ova and parasites
87220	Tissue examination for fungi (eg, KOH slide)
88305	Surgical pathology, gross & microscopic exam
88331	Frozen section
G0001	Venipuncture

Endocrinology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
76536	Ultrasound neck (thyroid, parathyroid)
76942	Ultrasonic guidance for needle biopsy, radiological supervision and interpretation
82948	Glucose: blood, reagent strip
88170	Fine needle aspiration with or without preparation of smears: superficial tissue (eg, thyroid, breast, prostate)
90780	IV infusion for therapy/diagnosis, administered by physician or under direct supervision of physician; up to one hour
90781	each additional hour, up to eight (8) hours
90782	Therapeutic or diagnostic injection (specify material injected); subcutaneous or intramuscular
90783	intra-arterial
90784	intravenous
G0001	Venipuncture

Gastroenterology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
43200 - 43228	Esophagoscopy
43234 - 43259	Upper GI Endoscopy
45300 - 45385	Lower GI Endoscopy
46040 - 46060	Incision and drainage of abscess
46320	Enucleation or excision of external thrombotic hemorrhoid
46600 - 46615	Anoscopy
46900 - 46924	Destruction of anal lesions
46934 - 46936	Destruction of hemorrhoids
46945 - 46946	Ligation of internal hemorrhoids
82270 - 82273	Occult Blood Screening

G0001	Venipuncture
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Hematology/Oncology - Adult & Pediatric

CPT Codes	Description
32000	Thoracentesis
36415	Venipuncture
49080	Peritoneocentesis, abdominal paracentesis, or peritoneal lavage (diagnostic or therapeutic) , initial
49081	subsequent
51720	Bladder instillation of anticarcinogenic agent (including detention time)
76934	Ultrasonic guidance for thoracentesis or abdominal paracentesis, radiological supervision and interpretation
76942	Ultrasonic guidance for needle placement (replacement)
80051	Lytes
81000	Urinalysis
81005 - 81015	Urinalysis
83735	Magnesium
84132	Potassium
84295	Sodium
85002	Bleeding Time
85007	Manual Differential WBC Count
85013 - 85014	Hematocrit
85021 - 85048	All CBC's
85060	Blood Smear
85095	Bone Marrow; aspiration only
85097	smear interpretation only, w/wo differential cell count
85102	Bone Marrow Biopsy, Needle or Trocar
85585	estimation on smear, only
85590	manual count
85595	automated count

85610	PT
85730	PTT
88305	Bone Marrow Biopsy Interpretation
96400	Chemotherapy administration, subcutaneous or intramuscular, with or without local anesthesia
96405	Chemotherapy administration, intralesional; up to and including 7 lesions
96406	more than 7 lesions
96408	Chemotherapy administration, intravenous; push techniques
96410	infusion technique, up to one hour
96412	infusion technique, one to 8 hours, each additional hour
96414	infusion technique, irrigation or prolonged infusion (more than 8 hours), requiring the use of portable or implantable pump
96420	Chemotherapy administration, intra-arterial; push technique
96422	infusion technique, up to one hour
96423	infusion technique, one to 8 hours, each additional hour
96425	infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump
96440	Chemotherapy administration into pleural cavity, requiring and including thoracentesis
96445	Chemotherapy administration into peritoneal cavity, requiring and including peritoneocentesis
96450	Chemotherapy administration, into CNS (eg, intrathecal), requiring and including lumbar puncture
96520	Refilling and maintenance of portable pump
96530	Refilling and maintenance of implantable pump or reservoir (access of pump port is included in filling of implantable pump)
96542	Chemotherapy injection, subarachnoid or intraventricular via subcutaneous reservoir, single or multiple agents
96545	Provision of chemotherapy agent
G0001	Venipuncture

Hemodialysis - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
80049	<p>Basic metabolic panel (this panel must include the following):</p> <ul style="list-style-type: none"> --Carbon dioxide (82374) --Chloride (82435) --Creatinine (82565) --Glucose (82947) --Potassium (84132) --Sodium (84295) --Urea Nitrogen (BUN) (84520)
80050	<p>General Health panel (this panel must include the following):</p> <ul style="list-style-type: none"> --Comprehensive metabolic panel (80054). --Hemogram, automated, and manual differential WBC count (CBC) (85022) OR. --Hemogram and platelet count, automated, and automated complete differential WBC Count (CBC) (85025). --Thyroid stimulating hormone (TSH) (84443)
80051	<p>Electrolyte panel (this panel must include the following):</p> <ul style="list-style-type: none"> --Carbon dioxide (82374). --Chloride (82435) --Potassium (84132) --Sodium (84295)
	<p>Comprehensive metabolic panel (this panel must include the following):</p>

80054	--Albumin (82040)·
	--Bilirubin, total (82247)
	--Calcium (82310)
	--Carbon dioxide (bicarbonate) (82374)·
	--Chloride (82435)·
	--Creatinine (82565)·
	--Glucose (82947)·
	--Phosphatase, alkaline (84075)·
	--Potassium (84132)·
	--Protein, total (84155)·
	--Sodium (84295)·
	--Transferase, aspartate amino (AST) (SGOT) (84450)·
	--Urea Nitrogen (BUN) (84520)
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy
81001	automated with microscopy
85031	Blood count; hemogram, manual, complete CBC(RBC, WBC, Hct, differential & indices)
85041	red blood cell (RBC) only
85044	reticulocyte count, manual
85045	reticulocyte count, flow cytometry
85048	white blood cell (WBC)
85210	Clotting factor II, prothrombin, specific
85610	Prothrombin time

85651 - 85652	ESR (manual & automated)
G0001	Venipuncture

Nephrology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
80049	Basic Metabolic panel (this panel must include the following):·
	--Carbon dioxide (82374)
	--Chloride (82435)
	--Creatinine (82565)
	--Glucose (82947)
	--Potassium (84132)
	--Urea Nitrogen (BUN) (84520)
	--Sodium (84295)
80050	General health panel (this panel must include the following):·
	--Comprehensive metabolic panel (80054)·
	--Hemogram, automated, and manual differential WBC count (CBC) (85022) OR
	-- Hemogram & platelet count, automated, and automated complete differential WBC (CBC) (85025)
	--Thyroid stimulating hormone (TSH) (84443)
80051	Electrolyte panel (this panel must include the following):·
	--Carbon dioxide (82374)·
	--Chloride (82435)·
	--Potassium (84132)·
	--Sodium (84295)
	Comprehensive metabolic panel (this panel must include the following):·
	--Albumin (82040)·

80054	--Bilirubin, total (82247)·
	--Calcium (82310)·
	--Carbon dioxide (bicarbonate) (82374)·
	--Chloride (82435)·
	--Creatinine (82565)·
	--Glucose (82947)·
	--Potassium (81432)·
	--Phosphatase, alkaline (84075)·
	--Protein, total (84155)·
	--Sodium (84295)·
	--Transferase, aspartate amino (AST) (BUN) (84520)
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents non-automated with microscopy
81001	Automated, with microscopy
81005	Urinalysis;qualitative or semiquantitative, except immunoassays
81007	Bacteriuria screen, by non-culture technique, commercial kit
81015	Microscopic only
85007	Blood count; manual differential WBC count
85008	Blood count; manual blood smear examination without differential parameters
85009	Blood count; differential WBC count, buffy coat
85013	Blood count; spun microhematocrit
85014	Blood count; other than spun hematocrit
85018	Blood count; hemoglobin
85021	Blood count; hemogram, automated (RBC, WBC, Hgb. Hct and indices only)
85022	Blood count; hemogram, automated, and manual differential WBC count (CBC)
85023	Blood count; hemogram and platelet count, automated, and manual differential WBC count (CBC)
85024	Blood count; hemogram and platelet count, automated partial differential WBC count (CBC)

85025	Blood count; hemogram and platelet count, automated, and automated complete differential WBC count (CBC)
85027	Blood count; hemogram and platelet count, automated complete differential WBC count (CBC)
85031	Blood count; hemogram, manual, complete CBC (RBC, WBC, Hgb, Hct, differential and indices)
85041	Red blood cell (RBC) only
85044	Reticulocyte count, manual
85045	Reticulocyte count, flow cytometry
85046	Reticulocyte, hemoglobin concentration
85048	Reticulocyte white blood cell (WBC)
85060	Blood Smear, peripheral, interpretation by physician
87086	Culture, bacterial, urine; quantitative, colony count
87087	commercial kit
87088	Identification, in addition to quantitative or commercial kit
87181	Sensitivity studies, antibiotic; agar diffusion method, per antibiotic
87184	Disk method, per plate (12 or less disks)
G0001	Venipuncture

Neurology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
72010 - 72120	Radiologic exam - spine & pelvis
92533	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests)
92543	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four test), with recording
92585	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system
95805 – 95811	Sleep Studies / Polysomnography
95812 – 95823	EEGs

95860 – 95872	EMGs
95900 – 95904	Nerve conduction studies
95930	Visual evoked potential (VEP) testing central nervous system, checkerboard or flash
95933	Orbicularis oculi (blink) reflex, by electrodiagnostic testing
95934	H-reflex, amplitude and latency study; record gastrocnemius/soleus muscle
95936	record muscle other than gastrocnemius/soleus muscle
95937	Neuromuscular junction testing (repetitive stimulation, paired stimuli), each nerve, any one method

Neurosurgery - Adult & Pediatric, Spine

CPT Codes	Description
72010 - 72120	Radiologic exam - spine & pelvis

Neurophthalmology

CPT Codes	Description
36415	Venipuncture
76511	Ophthalmic ultrasound, echography, diagnostic; A-scan only, with amplitude quantification
76512	Ophthalmic ultrasound, echography, diagnostic; contact B-scan (with or without simultaneous A-scan)
76513	Ophthalmic ultrasound, echography, diagnostic; immersion water bath)
76516	Ophthalmic biometry by ultrasound echography, A-scan
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular interpretation and report (separate procedure)
76529	Ophthalmic ultrasonic foreign body ionization
92020	Gonioscopy with medical diagnostic evaluation (separate procedure)
92060	Sensorimotor examination with multiple measurements of ocular deviation (eg, restrictive or paretic muscle with diplopia) with interpretation and report (separate procedure)

92083	Visual field examination, unilateral or bilateral with interpretation and report; limited extended examination (eg, Goldmann visual fields with at least three isopters plotted and static determination within the central 30 degree, or quantitative, automated threshold perimetry, Octopus program G-1, 32 or 42, Humphrey visual field analyzer full threshold programs 30-2, 24-2, or 30/60-2)
92225	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma), with interpretation and report initial
92226	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma), with interpretation and report subsequent
92230	Fluorescein angiography with interpretation and report
92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report
92240	Indocyanine green angiography (includes multiframe imaging) with interpretation and report
92250	Fundus photography with interpretation and report
92260	(Ophthalmodynamometry)
92285	External ocular photography
92286	Special anterior segment photography with medical diagnostic evaluation: with specular endothelial microscopy and cell count
92287	with fluorescein angiography
92531	Spontaneous nystagmus
92532	Positional nystagmus
92533	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests)
92534	Optokinetic nystagmus
95857	Tensilon test for myasthenia gravis
95858	With electromyographic recording
95930	Visual evoked potential (VEP) testing central nervous system, checkerboard or flash
G0001	Venipuncture

Obstetrics & Gynecology, Adolescent Gynecology, Gyn Oncology

CPT Codes	Description
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11100 - 11101	Excision - debridements
11400 - 11426	Excision - benign lesions
11620 - 11626	Excision, malignant lesions, genitalia
11975	*Insertion, implantable contraceptive capsules
11976	*Removal, implantable contraceptive capsules
11977	*Removal with reinsertion, implantable contraceptive capsules
17250	Chemical cauterization of granulation tissue
19000	Puncture aspiration of cyst of breast
19001	each additional cyst
19100	Biopsy of breast; needle core (separate procedure)
19101	incisional
19102	percutaneous, needle core, using imaging guidance
19103	percutaneous, automated vacuum assisted or rotating biopsy device
36415	Venipuncture
51735 - 51797	Urodynamics
53670	Manipulation - catheter, urethra, simple
56350	Hysteroscopy, diagnostic (separate procedure)
56351	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D&C
56352	with lysis of intrauterine adhesions (any method)
56353	with division or resection of intrauterine septum (any method)
56354	With removal of leiomyomata
56355	with removal of impacted foreign body
56356	with endometrial ablation (any method)
56405	Incision and drainage of vulva or perineal abscess
56420	Incision and drainage of Bartholin's gland abscess
56440	Marsupialization of Bartholin's gland abscess
56441	Lysis of labial adhesions
56501	Destruction of lesion(s), vulva; simple, any method
56515	extensive, any method

56605	Biopsy of vulva or perineum (separate procedure); one lesion
56606	each separate additional lesion
56720	Simple hymenotomy
57022	Incision & drainage of vaginal hematoma; post-obstetrical
57023	Incision & drainage of vaginal hematoma; non-obstetrical
57061	Destruction of vaginal lesion(s); simple, any method
57065	extensive, any method
57100	Biopsy of vaginal mucosa; simple (separate procedure)
57105	extensive, requiring suture (including cysts)
57135	Excision of vaginal cyst or tumor
57150	Irrigation of vagina
57160	Insertion of pessary
57170	*Diaphragm or cervical cap fitting with instructions
57180	Vaginal pack of non-obstetrical hemorrhage
57200	Colporrhaphy, suture of injury of vagina (non obstetrical)
57210	Colpoperineorrhaphy, suture of injury of vagina and/or perineum (non obstetrical)
57452	Colposcopy (vaginocopy); (separate procedure)
57454	with biopsy(s), of the cervix and/or endocervical curettage
57460	with loop electrosurgical excisions(s) of the cervix (LEEP)
57500	Biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)
57505	Endocervical curettage (not done as part of a D&C)
57510	Cauterization of cervix; electro or thermal
57511	cryocautery, initial or repeat
57513	laser ablation
57520	Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair (any method)
57522	Loop electrode excision
57800	Cervical canal dilatation

58100	Endometrial and/or endocervical sampling (biopsy), without cervical dilation, any method (separate procedure)
58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)
58300	*Insertion of intrauterine device (IUD)
58301	*Removal of intrauterine device (IUD)
58340	Cath or intro of saline or contrast for hystosalpingogram
58555 - 58563	Hysteroscopy
59812	Treatment of incomplete abortion
59820	Treatment of missed abortion
59830	Treatment of septic abortion
59840	Induced abortion D&C
59841	Induced abortion D&E
59870	Evacuation and curettage of hydatidiform mole
64435	Paracervical nerve block
81000 - 81001	Urinalysis
81005 - 81015	Urinalysis
81025	Urine pregnancy test, by visual color comparison methods
82120	Amines, vaginal fluid, qualitative
82270	Occult blood
83986	pH, body fluid except blood
84703	Gonadotropin
85002	Bleeding time
85013	Hct
87177	O&P - direct smear
87205	Smear, primary source, w/ interpretation; routine stain for bacteria, fungi, or cell types
87210	wet mount with simple stain for bacteria, fungi, ova and/or
87211	O&P (deleted code)
87220	KOH

88170	Fine needle aspiration with or without preparation of smears; superficial tissue (e.g., thyroid, breast, prostate)
89300	Semen analysis
89330	Sperm evaluation, cervical mucus penetration test with or without spinnbarkeit test
90384	Rho (D) immune globin (RhIG), human, full dose, for intramuscular use
90385	Rho (D) immune globin (RhIG), human, mini dose, for intramuscular use
90386	Rho (D) immune globin (RhIG), human, for intravenous use *Coverage for contraception related services dependent on the benefits of the member's plan and varies by state.
90659	Influenza vaccine
90743	Hep B vaccine - adolescent
90746	Hep B vaccine - adult dosage
90782	Injection
90788	IM injection of antibiotic
90911	Biofeedback, perineal muscles
G0001	Venipuncture
*Coverage for contraception related services dependent on the benefits of the member's plan and varies by state.	

Optometry

CPT Codes	Description
65205	Remove of foreign body, external eye, conjunctival superficial
65210	Conjunctival embedded (includes concretions), subconjunctival , or scleral nonperforating
65220	Corneal without slit lamp
65222	Corneal with slit lamp
76511- 76529	Ophthalmic ultrasounds
92012 - 92014	Eye exams
92015	Refraction
92020	Gonioscopy with medical diagnostic evaluation (separate procedure)

92081 - 92083	Visual field exam
92225 - 92260	All extended ophthalmoscopy Services
92286	Special anterior segment photography with medical diagnostic evaluation with specular endothelial microscopy and cell count
92287	with fluorescein angiography

Ophthalmology - Adult & Pediatric

CPT Codes	Description
36415	Venipuncture
65205	Removal of foreign body, external eye; conjunctival superficial
65210	conjunctival embedded (includes concretions),subconjunctival, or scleral non perforating
65220	corneal, without slit lamp
65222	corneal, with slit lamp
67820 - 67825	Correction of trichiasis by epilation
76511	Ophthalmic ultrasounds, echography, diagnostic; A-scan only, with amplitude quantification
76512	Ophthalmic ultrasound, echography, diagnostic; contact B-scan (with or without simultaneous A-scan)
76513	Ophthalmic ultrasound, echography, diagnostic; immersion (water bath) B-Scan
76516	Ophthalmic biometry by ultrasound echography, A-scan
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular lens power calculation
76529	Ophthalmic ultrasonic foreign body localization
92020	Gonioscopy with medical diagnostic evaluation (separate procedure)
92081-92083	Visual field examination
92225	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma) with interpretation and report initial
92226	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma) with interpretation and report subsequent
92230	Fluorescein angiography with interpretation and report

92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report
99240	Indocyanine green angiography (includes multiframe imaging) with interpretation and report
92250	Fundus photography with interpretation and report
92260	All extended ophthalmoscopy services
92286	Special anterior segment photography with medical diagnostic evaluation: with specular endothelial microscopy and cell count
92287	Special anterior segment photography with interpretation and report with fluorescein angiography
G0001	Venipuncture

Ophthalmology: Ophthalmology Retinal Specialists

CPT Codes	Description
36415	Venipuncture
65205	Removal of foreign body, external eye; conjunctival superficial
65210	Conjunctival embedded (includes concretions), subconjunctival or scleral nonperforating
65220	corneal, without slit lamp
65222	corneal, with slit lamp
76511	Ophthalmic ultrasounds, echography, diagnostic; A-scan only, with amplitude quantifications
76512	Ophthalmic ultrasound, echography, diagnostic; contact B-scan (with or without simultaneous A- scan)
76513	Ophthalmic ultrasound, echography, diagnostic; immersion (water bath) B-scan
76516	Ophthalmic biometry by ultrasound echography, A-scan
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular lens power calculation
76529	Ophthalmic ultrasonic foreign body localization
92020	Gonioscopy with medical diagnostic evaluation (separate procedure)

92083	Visual field examination, unilateral or bilateral with interpretation and report, limited extended examination (eg Goldmann visual fields with at least three isopters plotted and static determination with the central 30 degree, or quantitative, automated threshold perimetry, Octopus program G-1, 32 or 42, Humphrey visual field analyzer full threshold programs 30-2, 24-2, or 30/60-2
92225	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma) with interpretation and report, initial
92226	Ophthalmoscopy, extended, with retinal drawing (eg, for retinal detachment, melanoma) with interpretation and report subsequent
92230	Fluorescein angiography with interpretation and report
92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report
92240	Indocyanine green angiography (includes multiframe imaging) with interpretation and report)
92250	Fundus photography with interpretation and report
92260	All extended ophthalmoscopy services
92286	Special anterior segment photography with medical diagnostic evaluation: with specular endothelial microscopy and cell count
92287	Special anterio segment photography with interpretation and report; with fluorescein angiography
G0001	Venipuncture

Oral Surgery

CPT Codes	Description
36415	Venipuncture
70100	Myelography, posterior fossa, radiological supervision and interpretation
70110	Complete, minimum of four views
70300	Radiologica examination, teeth; single view
70310	Partial examination, less than full mouth
70320	Complete full mouth
70355	Orthopantogram
G0001	Venipuncture

Orthopedics - Adult & Pediatric

CPT Codes	Description
20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
20600- 20610	Arthrocentesis 3 sets of X-rays for fracture care
20615	Aspiration and injection for treatment bone or cyst
36415	Venipuncture
71100 - 71130	Rib sternum x-rays
72010 - 72120	Spine x-rays
72170 - 72190	Pelvic x-rays
72200 - 72220	Sacral-coccygeal x-rays
73000 - 73725	Upper or lower extremity for fracture care (added 03/02/2001)
76006	Stress films of a joint
G0001	Venipuncture

Otolaryngology - Adult & Pediatric

CPT Codes	Description
30901	Control Nasal hemorrhage, anterior, simple (limited cautery and/or packing) any method
30903	Control nasal hemorrhage, anterior, complex (extensive cautery and/or packing) any method
30905	Control nasal hemorrhage, posterior, with posterior nasal packs and/or cauterization; any method, initial
30906	Subsequent
31000	Lavage by cannulation; maxillary sinus (antrum puncture or natural ostium)
31002	Sphenoid sinus
31505	Laryngoscopy, indirect (separate procedure); diagnostic
31510	With biopsy
31511	With removal of foreign body
31512	With removal of lesion
31513	With vocal cord injection

31515	Laryngoscopy direct, with or without tracheoscopy; for aspiration
31520	Diagnostic, newborn
31525	Diagnostic, except newborn
31526	Diagnostic, with operating microscope
31527	With insertion of obturator
31528	With dilatation, initial
31529	With dilatation, subsequent
31530	Laryngoscopy, direct, operative, with foreign body removal;
31531	With operating microscope
31535	Laryngoscopy, direct, operative, with biopsy;
31536	With operating microscope
31540	Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis;
31541	With operating microscope
31560	Laryngoscopy, direct, operative, with arytenoidectomy
31561	With operating microscope
31570	Laryngoscopy, direct, with injection into vocal cord(s), therapeutic;
31571	With operating microscope
31575	Laryngoscopy, flexible fiberoptic; diagnostic
31576	With biopsy
31577	With removal of foreign body
31578	With removal of lesion
31579	With stroboscopy
36415	Venipuncture
43215	Esophagoscopy with removal of foreign body
60100	Percutaneous thyroid biopsy
69210	Removal impacted cerumen (separate procedure), one or both ears
76942	Ultrasonic guidance for needle biopsy
88170	Fine needle aspiration
92504	Binocular microscopy (separate diagnostic procedure)

92531	Spontaneous nystagmus, including gaze
92532	Positional nystagmus
92533	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests)
92534	Optokinetic nystagmus
92541	Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording
92542	Positional nystagmus test, minimum of 4 positions, with recording
92543	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests) with recording
92544	Optokinetic nystagmus test, bi-directional, foveal or peripheral stimulation, with recording
92545	Oscillating tracking test, with recording
92546	Sinusoidal vertical axis rotational testing
92547	Use of vertical electrodes in any or all of above tests counts as one additional test
92551 - 92556	Various audiometries
92557*	Basic comprehensive audiometry (92553 and 92556 combined), pure tone, air and bone and speech, threshold and discrimination)
92564	Short increment sensitivity index (SISI)
92567*	Tympanometry (impedance testing)
92568*	Acoustic reflex testing
92585	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system
92586	Limited auditory evoked potential
92587	Evoked otoacoustic emissions; limited (single stimulus level, either transient or distortion products)
92588	comprehensive or diagnostic evaluation (comparison of transient and/or distortion product otoacoustic emissions at multiple levels and frequencies)
G0001	Venipuncture

* Subject to appropriateness review

Physical Medicine/Rehabilitation

CPT Codes	Description
20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
36415	Venipuncture
95860	Needle electromyography, one extremity and related paraspinal areas
95861	Needle electromyography, two extremities and related paraspinal areas
95863	Needle electromyography, three extremities and related paraspinal areas
95864	Needle electromyography, four extremities and related paraspinal areas
95867	Needle electromyography, cranial nerve supplied muscles, unilateral
95868	Needle electromyography, cranial nerve supplied muscles, bilateral
95869	Needle electromyography, limited study of specific muscles (eg, thoracic spinal muscles)
95870	Other than paraspinal (eg abdomen, thorax)
95872	Needle electromyography using single fiber electrode, with quantitative measurement of jitter blocking and/or fiber density any/all sites of each muscle studied
95875	Ischemic limb exercise with needle electromyography, with lactic acid determination
95900	Nerve conduction, amplitude and latency /velocity study, each nerve, any/all site(s) along the nerve; motor, without F-wave study
95903	motor, with F-wave study
95904	sensory
95934	H-reflex, amplitude and latency study; record gastrocnemius/soleus muscle
95936	record muscular other than gastrocnemius/soleus muscle
95937	Neuromuscular junction testing (repetitive stimulation, paired stimuli), each nerve, any one method
G0001	Venipuncture

Plastic Surgery

CPT Codes	Description
10060 - 10180	Incision and drainage of abscess etc.
11000 - 11044	Skin Debridement

11100 - 11101	Biopsies
11400 - 11646	Excision of Lesions
11900 - 11901	Intralesional injecons
12001 - 13300	Repairs
17000 - 17111	Destruction of Lesions
20500 - 20501	Injection of sinus tract
20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
36415	Venipuncture
G0001	Venipuncture

Proctology

CPT Codes	Description
10060	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single
10061	complicated or multiple
10080	Incision and drainage of pilonidal cyst; simple
10081	complicated or multiple
11770	Excision of pilonidal cyst; simple
11771	extensive
11772	complicated
36415	Venipuncture
45300 - 45385	Lower GI Endoscopy
46040 - 46060	Incision and drainage of abscess
46080	Sphincterotomy, anal, division of sphincter (separate procedure)
46083	Incision of thrombosed hemorrhoid, external
46200	Fissurectomy, with or without sphincterotomy
46210	Cryptectomy, single
46211	multiple (separate procedure)
46220	Papillectomy or excision of simple skin tag, anus (separate procedure)

46221 - 46262	Hemorrhoidectomy
46270 - 46280	Treatment of anal fistula
46320	Enucleation or excision of external thrombotic hemorrhoid
46500	Injection of sclerosing solution, hemorrhoids
46600 - 46615	Anoscopy
46900 - 46924	Destruction of anal lesions
46934 - 46936	Destruction of hemorrhoids
46940	Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure), initial
46942	subsequent
46945 - 46946	Ligation of internal hemorrhoids
82270 - 82273	Occult Blood Screening
G0001	Venipuncture

Pulmonary - Adult & Pediatric

CPT Codes	Description
31515	Laryngoscopy direct, with or without tracheoscopy; for aspiration
31525	diagnostic, except newborn
31575	Laryngoscopy, flexible fiberoptic; diagnostic
31576	with biopsy
31577	with removal of foreign body
31578	with removal of lesion
31579	Laryngoscopy, flexible or rigid fiberoptic, with stroboscopy
31622 - 31656	Bronchoscopy
32000	Thoracentesis
32002	Thoracentesis with insertion of tube
32400	Pleural biopsy - needle
36415	Venipuncture
36600	Arterial puncture, withdrawal of blood for diagnosis

82800	Gases, blood, pH only
82803	Gases, blood, any combination of pH, pCO ₂ , pO ₂ , CO ₂ , HCO ₃ (including calculated O ₂ saturation
82805	with O ₂ saturation, by direct measurement, except pulse oximetry
82810	Gases, blood, O ₂ saturation only, by direct measurement, except pulse oximetry
82820	Hemoglobin-oxygen affinity (pO ₂ for 50% hemoglobin saturation with oxygen)
94010	Spirometry
94014 - 94016	Patient spirometric recordings
94060 - 94070	Spirometry
94664	Aerosol or vapor inhalations for sputum mobilization, bronchodilation or sputum induction for diagnostic purposes initial demonstrations and/or evaluation
94665	subsequent
94720	Carbon monoxide diffusing capacity, any method
94760*	Noninvasive ear or pulse oximetry for oxygen saturation; single determination
94761*	multiple determinations (e.g., during exercise)
G0001	Venipuncture

*Although pulse oximetry is listed as an automatic study, this procedure is "bundled" into other services and no additional payment is made for this service.

Rheumatology - Adult & Pediatric

CPT Codes	Description
20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
20600 - 20610	Arthrocentesis
36415	Venipuncture
81000 - 81001	Urinalysis
81005 - 81015	Urinalysis
85021 - 85048	All CBC's
85651 - 85652	Sedimentation Rate
87205 - 87206	Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types

89050 - 89051	Cell Count, synovial fluid
89060	Crystal Identification, synovial fluid
95060	Ophthalmic mucous membrane tests
G0001	Venipuncture

Surgery

CPT Codes	Description
10060 - 10181	Incision and drainage of abscess etc.
11000 - 11044	Skin Debridement
11400 - 11646	Excision of Lesions
11700 - 11772	Excision of pilonidal cyst or sinus
11900 - 11901	Intralesional injections
12001 - 13300	Repairs
17000 - 17111	Destruction of Lesions
19000	Puncture aspiration of cyst of breast;
19001	each additional cyst
19100	Biopsy of breast; needle core (separate procedure)
19101	incisional
19102 - 19103	Biopsy of breast, percutaneous
20500 - 20501	Injection of sinus tract
20550	Injection, tendon sheath, ligament, trigger points or ganglion cyst
20600 - 20610	Arthrocentesis
36415	Venipuncture
43200 - 43228	Esophagoscopy
43231 - 43232	Esophagoscopy with endoscopic ultrasound
43234 - 43259	Upper GI Endoscopy
45300 - 45385	Lower GI Endoscopy
46040 - 46060	Incision and drainage of abscess
46080	Sphincterotomy, anal, division of sphincter (separate procedure)

46083	Incision of thromboid hemorrhoid, external
46200	Fissurectomy, with or without sphincterotomy
46220	Papillectomy or excision of single tag, anus (separate procedure)
46221	Hemorrhoidectomy by single ligature (eg rubber band)
46230	Excision of external hemorrhoid tags and/or multiple papillae
46250	Hemorrhoidectomy, external, complete
46255	Hemorrhoidectomy, internal and external, simple:
46257	With fissurectomy
46258	With fistulectomy, with or without fissurectomy
46260	Hemorrhoidectomy, internal and external complex or extensive;
46261	With fissurectomy
46262	With fistulectomy, with or without fissurectomy
46270	Surgical treatment of anal fistula (fistulectomy/fistulotomy), subcutaneous
46275	Submuscular
46280	Complex or multiple, with or without placement of seton
46320	Enucleation or excision of external thrombotic hemorrhoid
46500	Injection of sclerosing solution, hemorrhoids
46600 - 46615	Anoscopy
46900 - 46924	Destruction of anal lesions
46934 - 46936	Destruction of hemorrhoids
46940 - 46942	Curettage or cauterization anal fissure
46945 - 46946	Ligation of internal hemorrhoids
82270 - 82273	Occult Blood screening
88170	Fine needle aspiration with or without preparation of smears; superficial tissue (eg thyroid breast, prostate)
93880 - 93882	Arterial duplex scan - extracranial
93922 - 93931	Arterial duplex scan - extremities
93965	Venous doppler
93970 - 93979	Venous duplex scan - extremities
93990	Duplex scan for hemodialysis access

G0001	Venipuncture
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Urology - Adult & Pediatric

CPT Codes	Description
11620 – 11626	Excision, malignant lesions, genitalia
36415	Venipuncture
51700	Bladder irrigation, simple, lavage and/or instillation
51705*	Change of cystostomy tube; simple
51710*	complicated
51715	Endoscopic injection of implant material into the submuscosal tissues of the urethra and/or bladder neck
51720	Bladder instillation of anticarcinogenic agent (including dentention time)
51725 – 51797	Urodynamic Studies
52000 – 52318	Cystoscopy Procedures
53600	Dilation of urethral stricture by passage of sound or urethral dialtor, male; initial
53601	subsequent
53620	Dilation of urethral stricture by passage of filiform and follower, male; initial
53621	subsequent
53660	Dilation of female urethral including suppository and/or instillation; initial
53661	subsequent
53670	Catheterization, urethra; simple
53675	complicated (may include difficult removal of balloon catheter)
54015	Incision and drainage of penis, deep (for skin and subcutaneous abscess, see 10060-10160)
54050	Destruction, lesion(s), penis (eg condyloma papilloma, molluscum contagiosum, herpetic vesicle), simple, chemical
54055	electrodesiccation
54056	cryosurgery
54057	laser surgery
54060	surgical excision

54065	Destruction of lesion(s), penis (eg, condyloma, pappilloma, molluscum contagiosum, herpetic vesicle), extensive, any method (for destrction or excision of other lesions, see Integumentary System)
55700	Biopsy, prostate, needle or punch, single or multiple, any approach (for find needle aspiration, preparation and interpretation of smears see 88170-88173)
55705	Incisional, any approach
76942	Ultrasonic guidance for needle biopsy, radiological supervision and interpretation (76943 (complete procedure) has been delete, see appropriate organ or site and 76942) (76944 has been deleted. To report, use 75989)
81000 – 81001	Urinalysis
81005 - 81015	Urinalysis
87081	Screening urine culture
87082 – 87088	Urine culture, bacterial, urine quantitative, colony count
87181	Sensitivity studies, antibiotic; agar diffusion method, per antibiotic
87184	disk method, per plate (12 or less disks)
87205	Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types
87210	Parasites
87220	Tissue examination for fungi (eg, KOH slide)
88170	Fine needle aspiration with or without preparation of smears superficial see 60100 for thyroid, 19100 for breast, 55700 for prostate)
89050	Cell count, body fluid
89300 - 89320	Sperm counts (before and after vasectomies)
89321	Semen analysis
G0001	Venipuncture
G0050	Ultrasonic measure of residual urine/bladder capacity

Uro-Gynecology

CPT Codes	Description
56405	Incision & drainage of vulva or perineal abscess
56420	Incision and drainage of Bartholin's gland abscess
56440	Marsupialization of Bartholin's gland cy

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