ERRATA for Diagnostic Radiology Coding Reference 2018 Edition

Text deletions are crossed out. New text is **blue and bolded**. Ordered by appearance in text.

Page 69, Coding Instructions

1. The "entire spine" codes are only utilized when all anatomical areas are imaged on a single film. If separate thoracic and lumbar imaging is performed, report the codes specific to those areas.

Page 77, Coding Instructions

3. Do not use codes 74710 and 74775 unless the x-ray is for the specified reason noted in the description. If for any other reason, utilize the procedure describing the study performed [e.g., a KUB for position of the fetus is reported as a KUB (74018) (71045)].

Page 78, Coding Instructions

4. Report code 74022 when one or more views of the abdomen and one view of the chest are performed as part of an acute abdominal study. This can be any view of the chest. If not performed as part of an acute abdominal study, report the abdominal and chest procedures separately.

Note: The current NCCI edit between the one-view chest and one-view abdomen codes will be deleted on April 1, 2018, retroactive to January 1, 2018. In the meantime, either hold the claim until after April 1, 2018, or append a distinct procedure modifier to the one-view abdomen code (74018) when the two procedures are performed together, but not part of an acute abdomen series.

Page 81, Coding Instructions

5. Report code 73092 when the upper extremity of an infant is radiographed. There is not a specified age for an infant, but includes children of a size that the entire extremity can be radiographed on one film. An infant is a child less than one year old.

Page 81, References

CPT Assistant, Nov 06:22, Nov 17:10

Page 84, Coding Instructions

7. Report code 73592 when the lower extremity of an infant is radiographed. There is not a specified age for an infant, but includes children of a size that the entire extremity can be radiographed at one time on one film. An infant is a child less than one year old.

Page 86, References

CPT Assistant, Nov 97:10, Nov 98:21, May 15:10, Oct 15:9, Nov 17:10

Page 92, Coding Instructions

3. Do not report more than one of the bone density procedure code that describes imaging of the same area codes on a single date of service.

4. If axial and appendicular imaging are both performed, report both procedures, appending modifier -59 or -XS to the appendicular skeleton code only the axial skeleton procedure.

Page 106, Procedure

There are four procedure codes that are specific to the imaging of pediatric patients. There has not been an age defined for these codes. Use of the codes should be based on whether the structure stated can be placed on a single film. An infant is a child less than one year old.