ULTRASOUND GUIDED PROCEDURE CODES 2024

US-GUIDED PROCEDURE

US-GUIDED PERICARDIOCENTESIS

US GUIDED VASCULAR ACCESS PLACEMENT

US-GUIDED THORACENTESIS

US-GUIDED PARACENTESIS

US-GUIDED INSERTION OF A NON-TUNNELED PICC AGE < 5 YO

US-GUIDED INSERTION OF A NON-TUNNELED PICC AGE \geq 5 YO

MISCELLANEOUS ULTRASOUND-GUIDED PROCEDURE WITHOUT CATHET

US-GUIDED ABSCESS DRAINAGE

US-GUIDED PERITONSILLAR ABSCESS DRAINAGE

US-GUIDED LUMBAR PUNCTURE

US-GUIDED SUPRAPUBIC ASPIRATION

US-GUIDED FB REMOVAL

US-GUIDED JOINT ASPRIATION

MISCELLANEOUS ULTRASOUND PROCEDURE

Notes

Relevent images must be archived for all procedures. Dynamic images, however, are not required. Static images of the target vessel/structure is sufficient.

2. 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 and are added onto the code of the primary procedure. 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 2024

US-GUIDED PROCEDURE US-GUIDED THORACENTESIS

US-GUIDED PERICARDIOCENTESIS (6 years old and up)

US-GUIDED PERICARDIOCENTESIS (birth through 5 years or any age with conge

IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, SOFT TISS

IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, VISCERAL **IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, PERITON** PERCUTANEOUS APPROACH

IMAGE GUIDED FLUID COLLECTION DRAINAGE BY CATHETER, PERITON TRANSVAGINAL/TRANSRECTAL APPROACH

					-	
	33016	Pericardiocentesis, including imaging guidance, when performed	4.40			
	+76937	Ultrasound Guidance for vascular access requiring ultrasound evaluation of potential access sites, documentation of selected vessel patency, concurrent realtime ultrasound visualization of vascular needle entry, with permananet recording and reporting (List separately in addition to code for primary procedure) ³	0.30	36410 (PIV 3 y/o+), 36406 (PIV <3 y/o) 36555 (CVL<5y/o), 36556 (CVL 5 y/o+)	Add on code for the US portion, to be u addition to the primary procedure code	
	32555	Thoracentesis and aspiration with a needle or catheter without leaving a catheter or needle.	2.27			
	49083	Abdomiinal paracentesis with imaging guidance	2.00			
	36572	PICC insertion without subcutaneous port including image guidance.	1.82			
	36573	PICC insertion without subcutaneous port including image guidance.	1.7			
ETER - NON ORGAN SPECIFIC	76942		0.67			
	76942	- Ultrasound guidance for needle placement (biopsy, aspiration, injection, localization), imaging supervision and interpretation.	0.67	10160 (single) OR 10061 (multiple)	Add on code for the US portion, to be u addition to the primary procedure code	
	76942		0.67	42700	Add on code for the US portion, to be u addition to the primary procedure code	
	76942		0.67	62270	Add on code for the US portion, to be taddition to the primary procedure code	
	76942		0.67	51100	Add on code for the US portion, to be taddition to the primary procedure code	
	76942		0.67	10120 (simple) OR 10121(complicated	Add on code for the US portion, to be taddition to the primary procedure code	
	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		1	
		Unlisted ultrasound procedure (eg. Diagnostic, interventional)	0.00			

CPT COD CPT CODE DESCRIPTION

EN INTLACE) CODES 2024			
	CPT CODE	CPT CODE DESCRIPTION	wRVU 2023
	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
	33017	Pericardial drainage with insertion of indwelling catheter, percutaneous, including ultrasound guidance, when performed	4.62
genital cardiac anomoly)	33018	Pericardial drainage with insertion of indwelling catheter, percutaneous, including	5.4
ISSUE	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.	2.75
AL PERCUTANEOUS	49405	(eg, abscess, hematoma, seroma, lymphocele, cyst), visceral (eg, bladder),	4
NEAL/RETROPERITONEAL	49406	(eg, abscess, hematoma, seroma, lymphocele, cyst), peritoneal/retroperitoneal percutaneous, includes moderate sedation when used. Must leave catheter in place for drainage.	4
NEAL/RETROPERITONEAL	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

wRVU 2023 ADDITIONAL CPT CODE

NOTES

r the US portion, to be u primary procedure code