

2023 PROCEDURES CPT CODES

| CPT CODE | CPT DESCRIPTION | EFF DATE |
|-----------------------------------|---|----------|
| PERCUTANEOUS NEEDLE BIOPSY | | |
| 10005 | Fine needle aspiration biopsy, including ultrasound guidance; first lesion | 1/1/2019 |
| 10006 | Fine needle aspiration biopsy, including ultrasound guidance; each additional lesion (List separately in addition to code for primary procedure) | 1/1/2019 |
| 10009 | Fine needle aspiration biopsy, including CT guidance; first lesion | 1/1/2019 |
| 10010 | Fine needle aspiration biopsy, including CT guidance; each additional lesion (List separately in addition to code for primary procedure) | 1/1/2019 |
| 20206 | Biopsy, muscle, percutaneous needle | 1/1/1994 |
| 20220 | Biopsy, bone, trocar, or needle; superficial (eg, ilium, sternum, spinous process, ribs) | 1/1/1994 |
| 20225 | Biopsy, bone, trocar, or needle; superficial (eg, ilium, sternum, spinous process, ribs) | 1/1/1994 |
| 32400 | Biopsy, pleura, percutaneous needle | 1/1/1994 |
| 32408 | Core needle biopsy, lung or mediastinum, percutaneous, including imaging guidance, when performed | 1/1/2021 |
| 38221 | Diagnostic bone marrow; biopsy (ies) | 1/1/2002 |
| 38220 | Diagnostic bone marrow; aspiration (s) only | 1/1/2002 |
| 38222 | Diagnostic bone marrow; biopsy(ies) and aspiration(s) | 1/1/2018 |
| 38505 | Biopsy or excision of lymph node(s); by needle, superficial (eg, cervical, inguinal, axillary) | 1/1/1994 |
| 42400 | Biopsy of salivary gland; needle | 1/1/1994 |
| 47000 | Biopsy of liver, needle; percutaneous | 1/1/1994 |
| 47001 | Biopsy of liver, needle; when done for indicated purpose at time of other major procedure (List separately in addition to code for primary procedure) | 1/1/1994 |
| 48102 | Biopsy of pancreas, percutaneous needle | 1/1/1994 |
| 49180 | Biopsy, abdominal or retroperitoneal mass, percutaneous needle | 1/1/1994 |
| 50200 | Renal biopsy; percutaneous, by trocar or needle | 1/1/1994 |
| 55700 | Biopsy, prostate; needle or punch, single or multiple, any approach | 1/1/1994 |
| 57100 | Biopsy of vaginal mucosa; simple (separate procedure) | 1/1/1994 |
| 58900 | Biopsy of ovary, unilateral or bilateral (separate procedure) | 1/1/1994 |
| 60100 | Biopsy thyroid, percutaneous core needle | 1/1/1994 |
| 76942 | Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation | 1/1/1994 |
| 77012 | Computed tomography guidance for needle placement (eg, biopsy, aspiration, injection, localization device), radiological supervision and interpretation | 1/1/2007 |

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|---|---|----------|
| PERCUTANEOUS DRAINAGE PROCEDURES | | |
| 10030 | Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst), soft tissue (eg, extremity, abdominal wall, neck), percutaneous | 1/1/2014 |
| 32550 | Insertion of indwelling tunneled pleural catheter with cuff | 1/1/2008 |
| 32551 | Tube thoracostomy, includes connection to drainage system (eg, water seal), when performed, open (separate procedure) | 1/1/2008 |
| 32554 | Thoracentesis, needle or catheter, aspiration of the pleural space; without imaging guidance | 1/1/2013 |
| 32555 | Thoracentesis, needle or catheter, aspiration of the pleural space; with imaging guidance | 1/1/2013 |
| 32556 | Pleural drainage, percutaneous, with insertion of indwelling catheter; without imaging guidance | 1/1/2013 |
| 32557 | Pleural drainage, percutaneous, with insertion of indwelling catheter; with imaging guidance | 1/1/2013 |
| 47490 | Cholecystostomy, percutaneous, complete procedure, including imaging guidance, catheter placement, cholecystogram when performed, and radiological supervision and interpretation | 1/1/1994 |
| 49083 | Abdominal paracentesis (diagnostic or therapeutic); with imaging guidance | 1/1/2012 |
| 49405 | Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); visceral (eg, kidney, liver, spleen, lung/mediastinum), percutaneous | 1/1/2014 |
| 49406 | Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); peritoneal or retroperitoneal, percutaneous | 1/1/2014 |
| 49407 | Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); peritoneal or retroperitoneal, transvaginal or transrectal | 1/1/2014 |
| 49423 | Exchange of previously placed abscess or cyst drainage catheter under radiological guidance (separate procedure) | 1/1/1998 |
| 49440 | Insertion of gastrostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report | 1/1/2008 |
| 49441 | Insertion of duodenostomy or jejunostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report | 1/1/2008 |
| 49465 | Contrast injection(s) for radiological evaluation of existing gastrostomy, duodenostomy, jejunostomy, gastro-jejunostomy, or cecostomy (or other colonic) tube, from a percutaneous approach including image documentation and report | 1/1/2008 |
| 75989 | Radiological guidance (ie, fluoroscopy, ultrasound, or computed tomography), for percutaneous drainage (eg, abscess, specimen collection), with placement of catheter, radiological supervision and interpretation | 1/1/1994 |
| 75984 | Change of percutaneous tube or drainage catheter with contrast monitoring (eg, genitourinary system, abscess), radiological supervision and interpretation | 1/1/1994 |

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|-------------------------------|--|----------|
| ASPIRATION / INJECTION | | |
| 10160 | Puncture aspiration of abscess, hematoma, bulla, or cyst | 1/1/1994 |
| 20604 | Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); with ultrasound guidance, with permanent recording and reporting | 1/1/2015 |
| 20606 | Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); with ultrasound guidance, with permanent recording and reporting | 1/1/2015 |
| 20611 | Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance, with permanent recording and reporting | 1/1/2015 |
| 20612 | Aspiration and/or injection of ganglion cyst(s) any location | 1/1/2003 |
| 32555 | Thoracentesis, needle or catheter, aspiration of the pleural space; with imaging guidance | 1/1/2013 |
| 49083 | Abdominal paracentesis (diagnostic or therapeutic); with imaging guidance | 1/1/2012 |
| 50390 | Aspiration and/or injection of renal cyst ore pelvis by needle, percutaneous | 1/1/1994 |
| 60300 | Aspiration and/or injection, thyroid cyst | 1/1/2008 |
| 20600 | Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance | 1/1/1994 |
| 20605 | Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance | 1/1/1994 |
| 20610 | Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance | 1/1/1994 |
| 27096 | Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed | 1/1/2000 |
| G0260 | Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography | 1/1/2003 |
| 64445 | Injection(s), anesthetic agent(s) and/or steroid; sciatic nerve , including imaging guidance, when performed | 1/1/1994 |
| 64430 | Injection (s), anesthetic agent (s) and/or steroid; pudendal nerve | 1/1/1994 |
| 64530 | Injection (s), anesthetic agent (s) and/or steroid ; other peripheral nerve or branch | 1/1/1994 |
| ABLATION | | |
| 20982 | Ablation therapy for reduction or eradication of 1 or more bone tumors (eg, metastasis) including adjacent soft tissue when involved by tumor extension, percutaneous, including imaging guidance when performed; radiofrequency | 1/1/2004 |
| 32994 | Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, including imaging guidance when performed, unilateral; cryoablation | 1/1/2018 |
| 47382 | Ablation, 1 or more liver tumor(s), percutaneous, radiofrequency | 1/1/2002 |
| 50592 | Ablation, 1 or more renal tumor(s), percutaneous, unilateral, radiofrequency | 1/1/2006 |
| 50593 | Ablation, renal tumor(s), unilateral, percutaneous, cryotherapy | 1/1/2008 |
| 76940 | Ultrasound guidance for, and monitoring of, parenchymal tissue ablation | 1/1/2004 |
| 77013 | Computed tomography guidance for, and monitoring of, parenchymal tissue ablation | 1/1/2007 |

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| CHEMODENERVATION (Botox Injection) | | |
| 52287 | Cystourethroscopy, with injection(s) for chemodenervation of the bladder | 1/1/2013 |
| 64612 | Chemodenervation of muscle(s); muscle(s) innervated by facial nerve, unilateral (eg, for blepharospasm, hemifacial spasm) | 1/1/1994 |
| 64615 | Chemodenervation of muscle(s); muscle(s) innervated by facial, trigeminal, cervical spinal and accessory nerves, bilateral (eg, for chronic migraine) | 1/1/1994 |
| 64616 | Chemodenervation of muscle(s); neck muscle(s), excluding muscles of the larynx, unilateral (eg, for cervical dystonia, spasmodic torticollis) | 1/1/2014 |
| 64617 | Chemodenervation of muscle(s); larynx, unilateral, percutaneous (eg, for spasmodic dysphonia), includes guidance by needle electromyography, when performed | 1/1/2014 |
| 64642 | Chemodenervation of one extremity; 1-4 muscle(s) | 1/1/2014 |
| 64643 | Chemodenervation of one extremity; each additional extremity, 1-4 muscle(s) (List separately in addition to code for primary procedure) | 1/1/2014 |
| 64644 | Chemodenervation of one extremity; 5 or more muscle(s) | 1/1/2014 |
| 64645 | Chemodenervation of one extremity; each additional extremity, 5 or more muscles (List separately in addition to code for primary procedure) | 1/1/2014 |
| 64646 | Chemodenervation of trunk muscle(s); 1-5 muscle(s) | 1/1/2014 |
| 64647 | Chemodenervation of trunk muscle(s); 6 or more muscle(s) | 1/1/2014 |
| 95874 | Needle electromyography for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure) | 1/1/2006 |
| OTHER | | |
| 49411 | Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple | 1/1/2010 |
| 76998 | Ultrasonic guidance, intraoperative | 1/1/2007 |
| 76948 | Ultrasonic guidance for aspiration of ova, imaging supervision and interpretation | 1/1/1994 |

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| SPINAL PROCEDURES | | |
| 61055 | Cisternal or lateral cervical (C1-C2) puncture; with injection of medication or other substance for diagnosis or treatment | 1/1/1994 |
| 62267 | Percutaneous aspiration within the nucleus pulposus, intervertebral disc, or paravertebral tissue for diagnostic purposes | 1/1/2009 |
| 62270 | Lumbar Puncture for Diagnosis | 1/1/1994 |
| 62272 | Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter) | 1/1/1994 |
| 62273 | Injection, epidural, of blood or clot patch | 1/1/1994 |
| 62282 | Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal) | 1/1/1994 |
| 62284 | Injection procedure for myelography and/or computed tomography, lumbar | 1/1/1994 |
| 62320 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or <u>subarachnoid, cervical or thoracic; without imaging guidance</u> | 1/1/2017 |
| 62321 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or <u>subarachnoid, cervical or thoracic; with imaging guidance</u> (ie, fluoroscopy or CT) | 1/1/2017 |
| 62322 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or <u>subarachnoid, lumbar or sacral (caudal); without imaging guidance</u> | 1/1/2017 |
| 62323 | Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or <u>subarachnoid, lumbar or sacral (caudal); with imaging guidance</u> (ie, fluoroscopy or CT) | 1/1/2017 |
| 62328 | Spinal puncture, lumbar, diagnostic; with fluoroscopic or CT guidance | 1/1/2020 |
| 62329 | Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter); with fluoroscopic or CT guidance | 1/1/2020 |
| 64451 | Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography) | 1/1/2020 |
| 64479 | Injection(s), anesthetic agent (s) and/or steroid ; transforaminal epidural, with imaging guidance (fluoroscopy or CT),); cervical or thoracic, single level | 1/1/2020 |
| 64480 | Injection(s), anesthetic agent (s) and/or steroid ; transforaminal epidural, with imaging guidance (fluoroscopy or CT),); cervical or thoracic, each additional level (List separately in addition to code for primary procedure) | 1/1/2020 |
| 64483 | Injection(s), anesthetic agent (s) and/or steroid ; transforaminal epidural, with imaging guidance (fluoroscopy or CT) lumbar or sacral, single level | 1/1/2020 |
| 64484 | Injection(s), anesthetic agent (s) and/or steroid ; transforaminal epidural, with imaging guidance (fluoroscopy or CT),); lumbar or sacral, each additional level (List separately in addition to code for primary procedure) | 1/1/2020 |

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|--------------|--|----------|
| 64490 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level | 1/1/2010 |
| 64491 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (List separately in addition to code for primary procedure) | 1/1/2010 |
| 64492 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure) | 1/1/2010 |
| 64493 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level | 1/1/2010 |
| 64494 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level (List separately in addition to code for primary procedure) | 1/1/2010 |
| 64495 | Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure) | 1/1/2010 |
| 64633 | Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint | 1/1/2012 |
| 64634 | Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure) | 1/1/2012 |
| 64635 | Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint | 1/1/2012 |
| 64636 | Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure) | 1/1/2012 |
| 64680 | Destruction by neurolytic agent, with or without radiologic monitoring; celiac plexus | 1/1/1994 |
| 96450 | Chemotherapy administration, into CNS (eg, intrathecal), requiring and including spinal puncture | 1/1/1994 |
| 77003 | Fluoroscopic guidance and localization of needle or catheter tip for spine or paraspinal diagnostic or therapeutic injection procedures (epidural or subarachnoid) (List separately in addition to code for primary procedure) | 1/1/2007 |