

PRIOR TO SCHEDULING APPOINTMENT – FAX ORDER FORM TO: 305-243-9004

SCHEDULING REQUIREMENTS: ICD-9 CODE, CLINICAL HISTORY, SPECIFIC TEST ORDERED, ORIGINAL MD SIGNATURE AND UPIN #

Medical Necessity: Federal regulations require that only tests that are necessary for diagnosis and treatment of a patient's condition be ordered. ICD-9 Code and clinical history for each test is required to prove medical necessity.

****The patient is responsible to bring outside films/CD for comparison at the time of the imaging study. UM Department of Radiology will obtain in-house prior studies.**

Check if prior study done UMHC Applebaum OTHER _____

DIABETIC? Yes No DIABETES UNDER CONTROL WITH: _____

BLOOD THINNERS? Yes No WHAT BLOOD THINNER: _____

KNOWN ALLERGIES: _____

CLINICAL HISTORY (REQUIRED) _____

Attending Physician: _____ UPIN # (REQUIRED): _____

Attending Physician Phone: _____ Fax: _____ Beeper: _____

Attending Physicians Address: _____

Attending Physician Signature (Stamps not accepted): _____ Date: _____

ARTERIOGRAPHIC PROCEDURES		CPT#	ICD-9 #	DRAINAGE PROCEDURES		CPT#	ICD-9#
Abdominal Aortogram		75625,36200		Drainage Tube Placement (Site)		75989	
Abdominal Arteriogram w Runoff		75625,75716,36200		Drainage Tube Check and Exchange		76080,75984,49424,49423	
Lower Extremity Bilateral Runoff		75716,36200		Drainage Tube Removal		49424,76080	
Lower Extremity Unilateral Runoff		75710,36245		Cyst Drainage CT (Site)		10160,77012	
Pelvic		75736,36245		TRANSCATHETER PROCEDURES			
Pulmonary		36014,75741		A/V Embolization (Site)		75894,75898,37204	
Renal Bilateral		75724,36245,36245		Chemo Infusion (Site)		75896,37202,75898	
Renal Unilateral		75722,36245		Transcath Biopsy (Site)		75970,37200	
Thoracic Aortogram		75605,36200		Foreign Body Removal (e.g. IVC Filter)		75961,37203	
Upper Extremity Bilateral		75716,36215,36216		Uterine Artery Embolization		37210	
Upper Extremity Unilateral		75710,36215		GI PROCEDURES			
Visceral (Site)		75726,36245		Esophageal Dilatation		74360,43226	
VENOGRAPHY PROCEDURES				Gastrostomy / G-Jej Tube Check		76080,49424	
Adrenal Unilateral		75840,36011		Gastrostomy / G-Jej Tube Exchange		75984,43760	
Adrenal Bilateral		36012,75842,36011		Gastrostomy Tube Placement		74350,43750	
Hepatic		36011,75891		Gastro-Jej Tube Placement		43750,74355,74350	
IVC Gram		75825,36010		Gastrostomy / G-Jej Removal		76080,49424	
IVC Filter Placement		75825,75940,36010,37620		Jejunostomy Tube Placement		74350,43750	
Renal Unilateral		75825,75831,36011,36011		Jejunostomy Tube Exchange		75984,43760	
Renal Bilateral		75825,75833,36011		GU PROCEDURES			
SVC Gram		75827,36010		Nephrostogram and Nephrostomy Tube Placement		74425,74475,50392,50390	
Venous Dilatation (Site)		75978,35476		Nephrostogram and Nephro-Ureteral Tube Placement		74425,74480,50393,50390	
Venous Renin Sampling		75893,36500		Nephrostomy Tube Check/Exchange		74425,50394,50398,75984	
PAIN MANAGEMENT PROCEDURES				Nephro-Ureteral Tube Check/Exchange		50387	
Discogram (Site)		72295,62290		Nephrostomy Tube Removal Req. Fluoro		50389	
Epidural Injection (Site)		77003		Ureteral Stent Placement		50393,50390,74425,74480	
Facet Block (Site)		77003		Ureteral Stent Removal		50384	
S I Joint Injection (Site)		77003		Circle Appropriate Site: Right / Left / Bilateral			
VENOUS ACCESS DEVICES				BIOPSIES			
Port Placement		76937,36561,77001		Adrenal (Site)		49180	
Dialysis Cath Placement		76937,36558,77001		Kidney (Site)		50200	
Hickman Cath Placement		76937,36558,77001		Liver		47000	
Pheresis Cath Placement		76937,36558,77001		Lung (Site)		32405	
Port Removal		36590,77001		Pancreas		48102	
Port Injection		36598		Visceral (Site)		49180	
Tunneled Cath Removal		36589,77001		Thyroid		60100	
BILIARY PROCEDURES				Soft Tissue		20206	
Biliary Dilatation		74363,47555		Lymph Node		38505	
Biliary Tube Check/ Exchange		74305,47505,47525,75984		Bone		20225	
Biliary Tube Removal		47505,74305		Other			
Biliary Stent Placement		75982,47801		RF TUMOR ABLATION			
Biliary Stone Removal		47630,74327		Tumor (Site)		77013	
Transhep Cholangiogram Biliary Drain		47500,47511,74320,75982		OTHER			
				U/S Thoracentesis		76942,32002	
				U/S Paracentesis		76942,49080	

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SYLVESTER COMPREHENSIVE CANCER CENTER
UNIVERSITY OF MIAMI HOSPITAL & CLINICS
 Miami, FL 33136 www.med.miami.edu (305)243-1000

INTERVENTIONAL RADIOLOGY ORDER FORM



Form
A1400020

Revised
02/22/07

NAME: _____

_____ UMMG # MRN

AGE: _____ DOB: _____ / _____ / _____

DATE OF SERVICE: _____

ICD - 9	DESCRIPTION
205.01	AC MYEL LEUK IN REMISS'N
208.00	ACUTE LEUKEMIA NOS.
204.00	ACUTE LYMPHOID LEUKEMIA.
205.00	ACUTE MYELOID LEUKEMIA.
213.1	BEN NEO LOWER JAW BONE
213.0	BEN NEO SKULL/FACE BONE
215.8	BEN NEO SOFT TISSUE NEC
226.	BENIGN NEOPLASM THYROID
239.2	BONE/SKIN NEOPLASM NOS
200.20	BURKITT'S TUM-EXTRND/NOS
233.0	CA IN SITU BREAST
240.9	GOITER NOS
042.	HIV DISEASE
201.90	HODGKINS NOS-EXTRNOD/NOS
041.10	INFECTION-STAPHYLOC NOS
041.04	INFECT'N-STREPTOCO GRP D
214.3	LIPOMA INTRA-ABDOMINAL
228.1	LYMPHANGIOMA, ANY SITE
174.4	MAL NEO BREAST UP-OUTER
162.8	MAL NEO BRONCH/LUNG NEC
180.9	MAL NEO CERVIX UTERI NOS
150.9	MAL NEO ESOPHAGUS NOS
156.1	MAL NEO EXTRAHEPAT DUCTS
195.0	MAL NEO HEAD/FACE/NECK
148.8	MAL NEO HYPOPHARYNX NEC
155.1	MAL NEO INTRAHEPAT DUCTS
140.9	MAL NEO LIP/VERMIL NOS
150.5	MAL NEO LOWER 3RD ESOPH
196.0	MAL NEO LYMPH-HEAD/NECK
144.9	MAL NEO MOUTH FLOOR NOS
146.8	MAL NEO OROPHARYNX NEC
170.6	MAL NEO PELVIC GIRDL
154.0	MAL NEO RECTOSIGMOID JCT
158.0	MAL NEO RETROPERITONEUM
173.3	MAL NEO SKIN FACE NEC
171.5	MAL NEO SOFT TIS ABDOMEN
171.6	MAL NEO SOFT TIS PELVIS
171.4	MAL NEO SOFT TIS THORAX
171.0	MAL NEO SOFT TISSUE HEAD
171.3	MAL NEO SOFT TISSUE LEG
171.9	MAL NEO SOFT TISSUE NOS
151.4	MAL NEO STOMACH BODY
150.1	MAL NEO THORACIC ESOPHAG
141.0	MAL NEO TONGUE BASE
146.1	MAL NEO TONSILLAR FOSSA
162.3	MAL NEO UPPER LOBE LUNG
162.3	MAL NEO UPPER LOBE LUNG
156.9	MALIG NEO BILIARY NOS
188.8	MALIG NEO BLADDER NEC
182.0	MALIG NEO CORPUS UTERI
199.0	MALIG NEO DISSEMINATED
156.0	MALIG NEO GALLBLADDER
157.8	MALIG NEO PANCREAS NEC
187.4	MALIG NEO PENIS NOS
189.1	MALIG NEO RENAL PELVIS
186.9	MALIG NEO TESTIS NEC
141.9	MALIG NEO TONGUE NOS
189.0	MALIG NEOPL KIDNEY
151.9	MALIG NEOPL STOMACH NOS
174.8	MALIGN NEOPL BREAST NEC
174.9	MALIGN NEOPL BREAST NOS
190.1	MALIGN NEOPL ORBIT
185.	MALIGN NEOPL PROSTATE
189.2	MALIGN NEOPL URETER
154.3	MALIGNANT NEO ANUS NOS
153.8	MALIGNANT NEO COLON NEC
153.9	MALIGNANT NEO COLON NOS
161.9	MALIGNANT NEO LARYNX NOS
155.2	MALIGNANT NEO LIVER NOS
145.5	MALIGNANT NEO PALATE NOS
154.1	MALIGNANT NEOPL RECTUM
146.0	MALIGNANT NEOPL TONSIL
199.1	MALIGNANT NEOPLASM NOS.
203.00	MULTIPLE MYELOMA.
239.5	OTHER GU NEOPLASM NOS
197.6	SEC MAL NEO PERITONEUM
197.4	SEC MALIG NEO SM BOWEL
198.7	SECOND MALIG NEO ADRENAL
198.81	SECOND MALIG NEO BREAST
197.7	SECOND MALIG NEO LIVER
198.5	SECONDARY MALIG NEO BONE

ICD - 9	DESCRIPTION
572.0	ABSCESS OF LIVER
577.0	ACUTE PANCREATITIS
255.9	ADRENAL DISORDER NOS
288.0	AGRANULOCYTOSIS
566.	ANAL & RECTAL ABSCESS
440.0	AORTIC ATHEROSCLEROSIS
284.9	APLASTIC ANEMIA NOS
284.8	APLASTIC ANEMIAS NEC
440.20	ATHEROSCLER-EXTREMTY NOS
337.9	AUTONOMIC NERVE DIS NEC
530.85	BARRETT'S ESOPHAGUS
353.0	BRACHIAL PLEXUS LESIONS
592.0	CALCULUS OF KIDNEY
592.1	CALCULUS OF URETER
576.1	CHOLANGITIS
575.10	CHOLECYSTITIS UNS
595.2	CHRONIC CYSTITIS NEC
571.40	CHRONIC HEPATITIS NOS
585.	CHRONIC RENAL FAILURE
459.89	CIRCULATORY DISEASE NEC
571.5	CIRRHOSIS OF LIVER NOS
456.42	COMPLICATION GASTROSTOMY
539.2	COMPRESSION OF VEIN
357.82	CRITICAL ILL POLYNEUROPATHY
553.3	DIAPHRAGMATIC HERNIA
576.8	DIS OF BILIARY TRACT NEC
349.2	DISORDER OF MENINGES NEC
562.10	DIVERTICULOSIS OF COLON
537.3	DUODENAL OBSTRUCTION NEC
530.89	ESOPHAGEAL DISORDERS NEC
530.81	ESOPHAGEAL REFLUX
530.3	ESOPHAGEAL STRICTURE
576.4	FISTULA OF BILE DUCT
537.4	GASTRIC/DUODENAL FISTULA
591.	HYDRONEPHROSIS
275.42	HYPERCALCEMIA
458.9	HYPOTENSION NOS
276.5	HYPOVOLEMIA
516.1	IDIO PULM HEMOSIDEROSIS
536.41	INFECTION OF GASTROSTOMY
579.3	INTEST POSTOP NONABSORB
569.5	INTESTINAL ABSCESS
569.81	INTESTINAL FISTULA
560.9	INTESTINAL OBSTRUCT NOS
573.8	LIVER DISORDERS NEC
424.0	MITRAL VALVE DISORDER
278.01	MORBID OBESITY
457.8	NONINFECT LYMPH DIS NEC
241.1	NONTOX MULTINODUL GOITER
241.0	NONTOX UNINODULAR GOITER
269.9	NUTRITION DEFICIENCY NOS
576.2	OBSTRUCTION OF BILE DUCT
518.89	OTHER LUNG DISEASE NEC
577.9	PANCREATIC DISEASE NOS
530.4	PERFORATION OF ESOPHAGUS
511.9	PLEURAL EFFUSION NOS
572.3	PORTAL HYPERTENSION
452.	PORTAL VEIN THROMBOSIS
263.9	PROTEIN-CAL MALNUTR NOS
569.49	RECTAL & ANAL DIS NEC
569.2	RECTAL & ANAL STENOSIS
569.1	RECTAL PROLAPSE
555.2	REG ENTERIT SMLG INTEST
555.1	REG ENTERITIS, LG INTEST
555.0	REG ENTERITIS, SM INTEST
555.9	REGIONAL ENTERITIS NOS
593.89	RENAL & URETERAL DIS NEC
593.9	RENAL & URETERAL DIS NOS
586.	RENAL FAILURE NOS
512.8	SPONT PNEUMOTHORAX NEC
447.1	STRICTURE OF ARTERY
593.3	STRICTURE OF URETER
567.2	SUPPURAT PERITONITIS NEC
556.9	ULCERATIVE COLITIS NOS
550.90	UNILAT INGUINAL HERNIA
593.4	URETERIC OBSTRUCTION NEC
459.81	VENOUS INSUFFICIENCY NOS
453.8	VENOUS THROMBOSIS NEC
593.70	VESURET RFLX NOS/NO PATH
593.72	VESURET RFLX W PATH BIL
593.71	VESURET RFLX W PATH UNI

ICD - 9	DESCRIPTION
789.39	ABD/PELV SWELL NEC/MULTI
789.30	ABD/PELV SWELL NOS SITE
789.31	ABD/PELV SWELL RUQ
789.00	ABDOM PAIN NOS SITE
738.19	ACQ HEAD DEFORMITY NEC.
789.5	ASCITES
724.9	BACK DISORDER NOS
600.00	BENIGN PROSTATE W/O OBSTR
596.8	BLADDER DISORDER NEC
596.9	BLADDER DISORDER NOS
867.0	BLADDER/URETHRA INJ-CLOS
733.90	BONE & CARTILAGE DIS NOS
611.8	BREAST DISORDERS NEC
682.2	CELLULITIS OF TRUNK
V58.1	CHEMOTHERAPY ENCOUNTER
786.50	CHEST PAIN NOS
786.6	CHEST SWELLING/MASS/LUMP
730.15	CHR OSTEOMYELIT-PELVIS
601.1	CHRONIC PROSTATITIS
788.37	CONTINUOUS LEAKAGE
610.1	DIFFUS CYSTIC MASTOPATHY
619.1	DIGEST-GENIT FISTUL, FEM
997.4	DIGESTIVE SYSTEM COMPLI
722.92	DISC DIS NEC/NOS-THORAC
722.90	DISC DIS NEC/NOS-UNSPEC
722.2	DISC DISPLACEMENT NOS
596.3	DIVERTICULUM OF BLADDER
787.2	DYSPHAGIA
785.6	ENLARGEMENT LYMPH NODES
611.3	FAT NECROSIS OF BREAST
783.3	FEEDING PROBLEM
619.8	FEM GENITAL FISTULA NEC
625.6	FEM STRESS INCONTINENCE
780.6	FEVER
610.2	FIBROADENOSIS OF BREAST
728.79	FIBROMATOSIS NEC
610.3	FIBROSCLEROSIS OF BREAST
959.13	FX CORPUS CAVERNOSM PENIS
821.01	FX FEMUR SHAFT-CLOSED
V10.05	HX OF COLONIC MALIGNANCY
V10.41	HX-CERVICAL MALIGNANCY
V10.46	HX-PROSTATIC MALIGNANCY
996.61	INFEC DUE TO HRT DEVICE
996.62	INFEC DUE TO VASC DEVICE
998.51	INFECTED POSTOP SEROMA
611.0	INFLAM DISEASE OF BREAST
V45.3	INTESTINAL BYPASS STATUS
782.4	JAUNDICE NOS
719.47	JOINT PAIN-ANKLE
719.45	JOINT PAIN-PELVIS
V42.7	LIVER TRANSPLANT STATUS
783.21	LOSS OF WEIGHT
724.2	LUMBAGO
611.72	LUMP OR MASS IN BREAST
608.89	MALE GENITAL DIS NEC..
996.31	MALFUNC URETHRAL CATH
996.1	MALFUNC VASC DEVICE/GRAF
728.9	MUSCLE/LIGAMENT DIS NOS
729.89	MUSCSELK SYMPT LIMB NEC
787.02	NAUSEA ALONE
596.54	NEUROGENIC BLADDER NOS
894.1	OPEN WOUND LEG NEC-COMPL
730.28	OSTEOMYELIT NOS-OTH SITE
998.59	OTH POSTOP INFECTION
729.5	PAIN IN LIMB
733.13	PATHOLOG FRACT VERTEBRAE
618.0	PROLAPSE OF VAGINAL WALL
786.09	RESPIRATORY ABNORM NEC
788.20	RETENTION OF URINE NOS
998.13	SEROMA COMPLIC PROCEDURE
786.05	SHORTNESS OF BREATH
610.0	SOLITARY CYST OF BREAST
742.59	SPINAL CORD ANOMALY NEC.
840.4	SPRAIN ROTATOR CUFF
784.2	SWELLING IN HEAD & NECK
599.2	URETHRAL DIVERTICULUM
598.8	URETHRAL STRICTURE NEC
788.31	URGE INCONTINENCE
599.0	URIN TRACT INFECTION NOS
788.30	URINARY INCONTINENCE NOS
619.0	URIN-GENITAL FISTUL, FEM

OTHER, (PLEASE SPECIFY ICD-9 CODE)

This list is not all-inclusive, but is a guide only. The ordering provider represents that the diagnostic information provided with each procedure accurately reflects his/her current knowledge of the nature of severity of complaint or condition, and that this information can be substantiated by the patient's medical record.