

Touchstone Imaging of Oklahoma
Cherry Street
QUALIFIED PROCEDURES

Services include: technical and reading fees.

Bundle ID	CPT	Procedure	Fee
MRI Scans			
	70336	MRI, temporomandibular joint(s)	\$ 549.00
	70540	MRI, orbit, face, and/or neck; without contrast	\$ 549.00
	70542	MRI, orbit, face, and/or neck; with contrast	\$ 599.00
	70543	MRI, orbit, face, and/or neck; without and with contrast	\$ 699.00
	70544	MRA, head; without contrast	\$ 549.00
	70545	MRA, head; with contrast	\$ 599.00
	70546	MRA, head; without and with contrast	\$ 699.00
	70547	MRA, neck; without contrast	\$ 549.00
	70548	MRA, neck; with contrast	\$ 599.00
	70549	MRA, neck; without and with contrast	\$ 699.00
	70551	MRI, brain (including brain stem); without contrast	\$ 549.00
	70552	MRI, brain (including brain stem); with contrast	\$ 599.00
	70553	MRI, brain (including brain stem); without and with contrast	\$ 699.00
	71550	MRI, chest; without contrast	\$ 549.00
	71551	MRI, chest; with contrast	\$ 599.00
	71552	MRI, chest; without and with contrast	\$ 699.00
	71555	MRA, chest (excluding myocardium), with or without contrast	\$ 549.00
	72141	MRI, spinal canal and contents, cervical; without contrast	\$ 549.00
	72142	MRI, spinal canal and contents, cervical; with contrast	\$ 599.00
	72146	MRI, spinal canal and contents, thoracic; without contrast	\$ 549.00
	72147	MRI, spinal canal and contents, thoracic; with contrast	\$ 599.00
	72148	MRI, spinal canal and contents, lumbar; without contrast	\$ 549.00
	72149	MRI, spinal canal and contents, lumbar; with contrast	\$ 599.00
	72156	MRI, spinal canal and contents, without and with contrast; cervical	\$ 699.00
	72157	MRI, spinal canal and contents, without and with contrast; thoracic	\$ 699.00
	72158	MRI, spinal canal and contents, without and with contrast; lumbar	\$ 699.00
	72159	MRA, spinal canal and contents, with or without contrast	\$ 549.00
	72195	MRI, pelvis; without contrast	\$ 549.00
	72196	MRI, pelvis; with contrast	\$ 599.00
	72197	MRI, pelvis; without and with contrast	\$ 699.00
	72198	MRA, pelvis, with or without contrast	\$ 549.00
	73218	MRI, upper extremity, other than joint; without contrast	\$ 549.00
	73219	MRI, upper extremity, other than joint; with contrast	\$ 599.00
	73220	MRI, upper extremity, other than joint; without and with contrast	\$ 699.00
	73221	MRI, any joint of upper extremity; without contrast	\$ 549.00
	73222	MRI, any joint of upper extremity; with contrast	\$ 599.00
	73223	MRI, any joint of upper extremity; without and with contrast	\$ 699.00
	73225	MRA, upper extremity, with or without contrast	\$ 549.00
	73718	MRI, lower extremity other than joint; without contrast	\$ 549.00
	73719	MRI, lower extremity other than joint; with contrast	\$ 599.00
	73720	MRI, lower extremity other than joint; without and with contrast	\$ 699.00
	73721	MRI, any joint of lower extremity; without contrast	\$ 549.00
	73722	MRI, any joint of lower extremity; with contrast	\$ 599.00
	73723	MRI, any joint of lower extremity; without and with contrast	\$ 699.00
	73725	MRA, lower extremity, with or without contrast	\$ 549.00
	74181	MRI, abdomen; without contrast	\$ 549.00
	74182	MRI, abdomen; with contrast	\$ 599.00
	74183	MRI, abdomen; without and with contrast	\$ 699.00
Ultrasound			
	76536	Ultrasound, soft tissues of head and neck	\$ 175.00
	76604	Ultrasound, chest (includes mediastinum)	\$ 175.00
	76700	Ultrasound, abdominal; complete	\$ 175.00

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Bundle ID	CPT	Procedure	Fee
	76705	Ultrasound, abdominal; limited	\$ 145.00
	76770	Ultrasound, retroperitoneal; complete	\$ 175.00
	76775	Ultrasound, retroperitoneal; limited	\$ 145.00
	76776	Ultrasound, transplanted kidney, real time and duplex Doppler	\$ 175.00
	76800	Ultrasound, spinal canal and contents	\$ 175.00
	76801	Ultrasound, pregnant uterus, first trimester; single/first gestation	\$ 175.00
	76802	Ultrasound, pregnant uterus, first trimester; each add'l gestation	\$ 175.00
	76805	Ultrasound, pregnant uterus, after first trimester; single/first gestation	\$ 175.00
	76810	Ultrasound, pregnant uterus, after first trimester; each add'l gestation	\$ 175.00
	76811	Ultrasound, pregnant uterus, with fetal exam; single/first gestation	\$ 175.00
	76812	Ultrasound, pregnant uterus, with fetal exam; each add'l gestation	\$ 175.00
	76813	Ultrasound, pregnant uterus, first trimester measurement; single/first	\$ 175.00
	76814	Ultrasound, pregnant uterus, first trimester measurement; each add'l	\$ 175.00
	76815	Ultrasound, pregnant uterus, limited, one or more fetuses	\$ 175.00
	76816	Ultrasound, pregnant uterus, follow-up, per fetus	\$ 175.00
	76817	Ultrasound, pregnant uterus, transvaginal	\$ 175.00
	76830	Ultrasound, transvaginal	\$ 175.00
	76856	Ultrasound, pelvic (nonobstetric); complete	\$ 175.00
	76857	Ultrasound, pelvic (nonobstetric); limited or follow-up	\$ 175.00
	76870	Ultrasound, scrotum and contents	\$ 175.00
	76880	Ultrasound, extremity, nonvascular	\$ 175.00
	76881	Ultrasound, extremity, nonvascular; complete	\$ 175.00
	76882	Ultrasound, extremity, nonvascular; limited	\$ 175.00