```
AMA CPT
                        Short Description
                                                   Current Fee Long Description
                        GENERAL PHYSICAL
                                                      140.00 GENERAL PHYSICAL WITH REPORT ON ENCLOSED FORM
100
          99204
102
                                                      190.00
          99205
                       Orthopedic exam with
                                                               Orthopedic exam with narrative report
103
                     NEUROLOGICAL EXAMINA
                                                      190.00
                                                               NEUROLOGICAL EXAMINATION WITH NARRATIVE REPORT
          99205
104 96130-96131
                             WAIS IV
                                                      150.00
                                                               PSYCHOMETRIC EVALUATION (WAIS-IV)
                             WISC IV
                                                      150.00
                                                               PSYCHOMETRIC EVALUATION (WISC IV)
105 96130-96131
                      EYE EXAMINATION WITH
                                                               EYE EXAMINATION WITH NARRATIVE REPORT (CVA)
109
          92004
                                                      100.00
110
                                                               CARDIOLOGY EXAMINATION COMPLETE WITH NARRATIVE REPORT
          99205
                     CARDIOLOGY EXAMINAIO
                                                               EYE EXAMINATION, VISUAL ACUITY AND VISUAL FIELD TESTING WITH NARRATIVE REPORT
                      EYE EXAMINATION WITH
                                                      156.81
111 9200492083
                                                      120.00
113
          92523
                       SPEECH EVALUATION
                                                               SPEECH EVALUATION WITH NARRATIVE REPORT
                     DERMATOLOGY EXAMINAT
                                                      170.00
                                                               DERMATOLOGY EXAMINATION WITH NARRATIVE REPORT
116
          99205
                      EAR, NOSE AND THROAT
                                                               EAR, NOSE AND THROAT EXAMINATION WITH NARRATIVE REPORT
117
          99204
                                                      150.30 EAR, NOSE, AND THROAT EXAMINATION WITH AUDIOMETRIC TESTING AND NARRATIVE REPORT AUDIOMETRIC TESTING WITHOUT AIDS******
118
          99204
                       ENT W AUDIOMETRIC
120
                                                      150.00
          90791
                       Mental Status & Eval
                                                               Mental Status & Evaluation of Adaptive Functioning
121 9080199358
                       REEVAL- NEW MEDICAL
                                                      50.00
                                                               REEVALUATION BASED ON REVIEW OF ADDITIONAL MEDICAL EVIDENCE
                        STANDFORD-BINET
122 96130-96131
                                                               PSYCHOMETRIC TESTING (STANFORD-BINET)
123 96130-96131
                            BAYLEY III
                                                      150.00
                                                               PSYCHOMETRIC TESTING (BAYLEY, III)
124 96130-96131
                             WPPSI III
                                                      150.00
                                                               PSYCHOMETRIC TESTING (WPPSI,III)
                     WECHSLER MEMORY SCAL
128 96130-96131
                                                      150.00
                                                               WECHSLER MEMORY SCALE
                         PEDIATRIC EXAM
                                                      170.00
                                                               PEDIATRIC EXAMINATION WITH REPORT ON ENCLOSED FORM
129 99205
139 96130-96131
                        WIAT with subtest sc
                                                      65.00
                                                               WIAT with subtest scores
                                                               Kaufman Assessment Battery for children (KABC)
147 96130-96131
                       Kaufman Assessment B
                                                      105.00
                                                               WOODCOCK JOHNSON
155 96130-96131
                       WOODCOCK JOHNSON
                                                      105.00
                                                               TONI-III (Test of Non-Verbal Intelligence)
160 96130-96131
                        TONI-III (Test of No
                                                      150.00
161 92083
                        Visual Field Testing
                                                      56.81
                                                               SPECIAL EYE EXAMINATION (VISUAL FIELD)
165 96130-96131
                       VINELAND ADAPTIVE BE
                                                      55.00
                                                               VINELAND ADAPTIVE BEHAVIOR
170
          99205
                       Neuro-Ophthalmologic
                                                      161.44
                                                               Neuro-Ophthalmologic examination with narrative report
171 96130-96131
                             WRAT IV
                                                      65.00
                                                               WRAT IV
172
                         INTERROGATORY
                                                      80.00
                                                               INTERROGATORY
          99075
189 96130-96131
                            BATTELLE
                                                      150.00
                                                               PSYCHOMETRIC EVALUATION (BATTELLE)
190
                                                      190.00
                        Physiatry examinatio
                                                               Physiatry examination with narrative report
200
          81000
                        URINALYSIS ROUTINE
                                                      4.52
                                                               URINALYSIS ROUTINE
201
                                                       7.08
          82040
                            ALBUMIN
                                                               ALBUMIN
203
                         TOTAL BILIRUBIN
                                                      7.17
                                                               TOTAL BILIRUBIN
          82247
204
                         SERUM CALCIUM
          82310
                                                       7.36
                                                               SERUM CALCIUM
205 84156 / 82570
                           UP/CR Ratio
                                                      12.39
                                                               Total Urine Protein to Urine Creatinine Ratio
206
          82565
                           CREATININE
                                                       7.31
                                                               CREATININE
207
                       CREATININE CLEARANCE
          82575
                                                      13.50
                                                               CREATININE CLEARANCE
                                                       5.60
209
          82947
                          BLOOD SUGAR
                                                               BLOOD SUGAR
                                                       7.38
213
          84450
                              SGOT
                                                               SGOT
214
                              BUN
                                                       5.63
                                                               BUN
          84520
215
          84550
                           Uric Acid Test
                                                               Uric Acid Test
                           HEMATOCRIT
                                                       3.38
                                                                HEMATOCRIT
216
          85014
                           HEMOGLOBIN
                                                                HEMOGLOBIN
                                                       3.38
                      COMPLETE BLOOD COUNT
                                                      11.10
                                                               CBC
218
          85025
219
          86361
                        Absolute CD4 Count
                                                      28.75
                                                               Absolute CD4 Count
217
          85018
                           HEMOGLOBIN
                                                       3.38
                                                                HEMOGLOBIN
221
          85651
                            SED RATE
                                                       5.07
                                                               SEDIMENTATION RATE
222
                             RA TEST
                                                               RA TEST (RA FACTOR)
          86430
                                                      8.11
223
                       ALKALINE PHOSPHATASE
                                                                ALKALINE PHOSPHATASE
          84075
                                                       7.39
          80076
                          LIVER PROFILE
                                                               LIVER PROFILE: (SGOT,SGPT,TOTAL BILIRUBIN,ALBUMIN, AST, ALT)
226
                                                      11.42
227
          86200
                        CCP (CYCL. CIT. PEP)
                                                       18.69
                                                               CYCLIC CITRULLINATED PEPTIDE
228
          86038
                              ANA
                                                      17.26
                                                               ANA
230
          80188
                            MYSOLINE
                                                      23.69
                                                               MYSOLINE
233
          82150
                            AMYLASE
                                                       9.26
                                                                AMYLASE
237
                           DRAWING FEE
                                                       3.00
                                                                DRAWING FEE
          36415
238
                              SGPT
                                                       7.56
          84460
239
                              T-4
                                                       9.04
                                                               T-4 THYROID HORMONE
240
                              T-3
                                                               T-3 THYROID HORMONE
          84480
                                                      9.04
252
                           POTASSIUM
                                                       6.56
                                                               POTASSIUM
255
          83020
                        Hemoglobin Electroph
                                                                Hemoglobin Electrophoresis
                                                      17.99
257
          82746
                        FOLIC ACID SERUM
                                                      19.70
                                                               FOLIC ACID SERUM
258
          83550
                              TIBC
                                                      10.94
                                                               TOTAL IRON BINDING CAPACITY (TIBC)
259
          83540
                           IRON TOTAL
                                                       8.59
                                                               IRON TOTAL (ASSAY OF IRON)
264
                              TSH
                                                      23.47
                                                               TSH THYROID STIMULATING HORMONE
          84443
                       CREATINE KINASE(CPK)
265
          82550
                                                      9.31
                                                               CREATINE KINASE (CPK)
267
          82607
                        VITAMIN B12 LEVELS
                                                      19.25
                                                               VITAMIN B-12 SERUM LEVELS CYANOCOBAMIN
273
          83036
                         Hemoglobin A1C
                                                      13.56
                                                                Hemoglobin A1C
275
          84156
                        24 Hour Urine Protei
                                                      5.25
                                                               24 Hour Urine Protein
276
          82977
                              GTT
                                                      10.28
                                                               GTT
277
          86140
                       C- REACTIVE PROTEIN
                                                       7.39
                                                               C- REACTIVE PROTEIN
284
          80053
                                                                COMPREHENSIVE METABOLIC PANEL: TO INCLUE SODIUM, POTASSIUM, CALCIUM, CHLORIDE, CARBON DIOXIDE (BICARBONATE), GLUCOSE, BUN, CREATININE, TOTAL BILIRUBIN, ALKALINE PHOSPHATASE (ALP), ASPARTATE AMINOTRASFERASE (AST), ALANINE AMINOTRANSERASE (ALT)
                       COMP METABOLIC PANEL
                                                      15.10
285
          80048
                                                               BASIC METABOLIC PANEL: TO INCLUDE BUN CO2 CREATININE GLUCOSE CALCIUM CHLORIDE POTASSIUM SODIUM
                        BASIC METABOLIC PNL
                                                      12.09
292
          82380
                        SERUM CAROTENE
                                                      13.18
                                                               SERUM CAROTENE
297
          82378
                              CEA
                                                      26.22
                                                               CEA (CARCINOEMBRYONIC ANTIGEN)
300
          72020
                        XRAY THORACIC ONE
                                                      23.28
                                                               XRAY OF THORACIC SPINE, ONE VIEW
301
          71045
                                                      22.95
                       XRAY CHEST ONE VIEW
                                                               XRAY OF THE CHEST, SINGLE VIEW
302
          71046
                       XRAY CHEST TWO VIEWS
                                                      35.13
                                                               XRAY OF THE CHEST, TWO VIEWS
303
          72040
                        X-RAY OF CERVICAL
                                                      46.00
                                                               X-RAY OF CERVICAL SPINE, TWO VIEWS
304
          72050
                        X-RAY OF CERVICAL
                                                               X-RAY OF CERVICAL SPINE, MINIMUM FOUR VIEWS
305
          72070
                        X-RAY OF THORACIC
                                                      47.09
                                                               X-RAY OF THORACIC SPINE, TWO VIEWS
                       X-RAY OF LUMBAR SPIN
306
          72100
                                                      46.20
                                                               X-RAY OF LUMBAR SPINE, TWO VIEWS
307
          72110
                        X-RAY OF LUMBAR
                                                      66.00
                                                               X-RAY OF LUMBAR SPINE, MINIMUM FOUR VIEWS
308
          72170
                       X-RAY OF PELVIS, ONE
                                                      35.20
                                                               X-RAY OF PELVIS, ONE VIEW
309
          72190
                         X-RAY OF PELVIS,
                                                      46.20
                                                               X-RAY OF PELVIS, MINIMUM THREE VIEWS
310
          73020
                       X-RAY OF SHOULDER,
                                                      27.50
                                                               X-RAY OF SHOULDER, ONE VIEW (RIGHT)
          73030
                        X-RAY OF SHOULDER
                                                      38.50
                                                               X-RAY OF SHOULDER, COMPLETE, MINIMUM TWO VIEWS
311
312
          73060
                        X-RAY OF HUMERUS
                                                      37.40
                                                               X-RAY OF HUMERUS, TWO VIEWS (RIGHT)
          73070
313
                         X-RAY OF ELBOW
                                                      33.00
                                                               X-RAY OF ELBOW, TWO VIEWS, (RIGHT)
                                                               X-RAY OF ELBOW, COMPLETE, MINIMUM OF THREE VIEWS, (RIGHT)
314
          73080
                         X-RAY OF ELBOW
                                                      35.20
315
          73090
                        X-RAY OF FOREARM
                                                      33.00
                                                               X-RAY OF FOREARM, TWO VIEWS
316
          73100
                         X-RAY OF WRIST
                                                      33.00
                                                               X-RAY OF WRIST, TWO VIEWS, (RIGHT)
317
          73110
                          X-RAY OF WRIST
                                                      37.77
                                                               X-RAY OF WRIST, COMPLETE, MINIMUM THREE VIEWS, (RIGHT)
318
          73120
                          X-RAY OF HAND
                                                      30.80
                                                              X-RAY OF HAND, TWO VIEWS, (RIGHT)
319
          73501
                           X-RAY OF HIP
                                                      29.62
                                                               X-RAY OF HIP, UNILATERAL, ONE VIEW, (RIGHT)
320
                                                               X-RAY OF HIP, COMPLETE, MINIMUM TWO VIEWS (RIGHT)
          73502
                           X-RAY OF HIP
                                                      40.78
                                                               X-RAY OF FEMUR, TWO VIEWS, (RIGHT)
321
          73552
                          X-RAY OF FEMUR
                                                      32.05
322
          73560
                          X-RAY OF KNEE
                                                      37.30
                                                               X-RAY OF KNEE, TWO VIEWS, (RIGHT)
323
                                                               X-RAY OF KNEE, THREE VIEWS, (RIGHT)
          73562
                          X-RAY OF KNEE
                                                      48.00
                                                               X-RAY OF TIBIA AND FIBULA, TWO VIEWS, (RIGHT)
324
          73590
                        X-RAY OF TIBIA AND
                                                      37.30
325
          73600
                          X-RAY OF ANKLE
                                                      33.00
                                                               X-RAY OF ANKLE, TWO VIEWS (RIGHT)
                                                               X-RAY OF ANKLE, COMPLETE, MINIMUM OF THREE VIEWS TO INCLUDE OBLIQUE VIEW (RIGHT)
326
          73610
                          X-RAY OF ANKLE
327
          73620
                          X-RAY OF FOOT
                                                               X-RAY OF FOOT, TWO VIEWS, (RIGHT)
                                                               X-RAY OF FOOT, COMPLETE, MINIMUM OF THREE VIEWS, (RIGHT)
329
          73564
                          XRAY KNEE R 4 +
                                                      51.00
                                                               XRAY OF THE RIGHT KNEE 4 OR MORE VIEWS
                        XRAY TIBIA FIBULA 3
330
          73590
                                                      37.30
                                                               XRAY OF TIBIA / FIBULA 2 VIEWS TO INCLUDE OBLIQUE VIEW
350
          73650
                        X-RAY OF OS CALCIS
                                                      21.24
                                                               X-RAY OF OS CALCIS (HEEL) TO INCLUDE INTERPRETATION (RIGHT)
352
          71130
                       X-RAY STERNUM 3 VIEW
                                                      33.70
                                                               XRAY OF THE STERNOCLAVICULAR JOINT OR JOINTS, 3 VIEWS MINIMUM
358
          72082
                          Scoliosis series
                                                      51.75
                                                               Scoliosis series
372
          77072
                            Bone Age
                                                      22.84
                                                               Bone Age
377
          70250
                           X-RAY SCULL
                                                      45.10
                                                               X-RAY SCULL, LESS THAN FOUR VIEWS
378
          70210
                       X-RAY OF THE SINUSES
                                                      29.07
                                                               X-RAY OF THE SINUSES, THREE VIEWS TO INCLUDE INTERPRETATION
385
          73565
                      STNDNG XR BOTH KNEES
                                                      35.20
                                                               X-RAY OF BOTH KNEES, STANDING AP
                      X-RAY OF THORACO-LUM
386
          72080
                                                      40.00
                                                               X-RAY OF THORACO-LUMBAR SPINE, STANDING, TO INCLUDE INTERPRETATION
401
          93303
                      ECHOCARDIOGRAM WITH
                                                      189.05
                                                               ECHOCARDIOGRAM WITH INTERPRETATION
402
          93923
                       DOPPLER TEST, ARTERI
                                                      107.54
                                                               DOPPLER, ARTERIAL, BOTH LOWER EXTREMITIES AND ABI'S
403
          93307
                       DOPPLER ECHO COLOR
                                                      98.89
                                                               DOPPLER ECHOCARDIOGRAPHY COLOR FLOW VELOCITY MAPPING
404
          36600
                                                               WITHDRAWAL OF ARTERIAL BLOOD (fee too little)
                       WITHDRAWAL OF ARTERI
                                                      29.00
405
                                                      27.63
                                                               BLOOD GASES, RESTING
          82803
                       BLOOD GASES, RESTING
407
          93000
                       EKG TO INCLUDE TRAC
                                                      28.60
                                                               EKG TO INCLUDE TRACINGS
                                                      156.20
                                                               EKG WITH STRESS (TREADMILL, BICYCLE, ETC.)
408
          93015
                        EKG WITH STRESS
410
                                                               PULMONARY, BEFORE AND AFTER Fee X 2 3 pre and 3 post
          94060
                                                      103.00
                       PULMONARY, BEFORE
          95819
                                                      172.53
413
                     ELECTROENCEPHALOGRAM
                                                               ELECTROENCEPHALOGRAM WITH SLEEP TO INCLUDE INTERPRETATION (EEG)
                       ELECTROMYOGRAPHY
414
          95860
                                                      85.79
                                                               ELECTROMYOGRAPHY, ONE EXTREMITY AND RELATED PARASPINAL AREAS
                                                               CARBON MONOXIDE DIFFUSING CAPACITY (DLCO)
418
          94729
                     CARBON MONOXIDE DIFF
                                                      162.04
                                                               EXERCISE DOPPLER BILATERAL: AN INITIAL POSTERIOR TIBIAL PRESSURE SHOULD BE OBTAINED PRIOR TO EXERCISE, IMMEDIATELY AFTER EXERCISE AND 10 MINUTES POST EXERCISE.
419
          93924
                       DOPPLER, AFTER EXERC
          99075
421
                       Medical Assessment F
                                                                Audiometric testing to include Speech Reception Threshold (SRT), Pure Tone Air and Bone Audiometry at 500, 1000, 2000 & 4000 HZ and Speech Discrimination and otologic exam *******PLEASE PERFORM AUDIOMETRIC TESTING WITHOUT AIDS**
429 92557/99202
                Audiometric testing with Otologic Exam
                                                      110.00
436
                                                      75.00
                                                               HEARING IN NOISE TESTING (HINT)
          92700
440
          99202
                                                      25.00
                         Height and weight
                                                                Height and weight
441
          99075
                       MEDICAL ASSESSMENT
                                                      20.00
                                                                MEDICAL ASSESSMENT, PHYSICAL
                                                               NERVE CONDUCTION VELOCITY (4 nerves)
460
          95908
                        NERVE CONDUCTION
                                                      110.00
                                                               NERVE CONDUCTION VELOCITY (8 NERVES)
462
          95910
                        NERVE CONDUCTION
                                                      169.00
464
          95861
                                                      152.70
                               EMG
                                                               Two extremities
                              EMG
466
          95864
                                                      213.00
                                                               Four Extremities
                        TOE DOPPLER W/ ABI
471
          93923
                                                      165.19
                                                               TOE DOPPLER TO INCLUDE ABI -- DIGITAL TEST (PPEG WAVE FORMS & PRESSURES)
476
          69210
                       REMOVAL OF CERUMEN
                                                      45.67
                                                               REMOVAL OF CERUMEN IMPACTION
477
          76700
                     ULTRASOUND ABDOMINAL
                                                      141.90
                                                               ULTRASOUND ABDOMINAL, TO INCLUDE INTERPRETATION
482
                             Weight
                                                      25.00
494
          94761
                          Pulse Oximeter
                                                      15.00
                                                               Pulse Oximeter (REST AND EXERCISE WALKING 600 FT AT A NORMAL PACE)
496
          92588
                              OAE
                                                               OTO ACUSTIC EMISSIONS
                                                      64.06
500
          71045
                        CHEST X-RAY, SINGLE
                                                               CHEST X-RAY, SINGLE VIEW TECHNICAL ONLY
501
          71046
                        CHEST X-RAY, TWO
                                                      19.15
                                                               CHEST X-RAY, TWO VIEWS, TECHNICAL ONLY
502
          72040
                        X-RAY OF CERVICAL
                                                      28.00
                                                               X-RAY OF CERVICAL SPINE, TWO VIEWS TECHNICAL ONLY
503
          72050
                        X-RAY OF CERVICAL
                                                      37.30
                                                               X-RAY OF CERVICAL SPINE, MINIMUM FOUR VIEWS TECHNICAL ONLY
504
          72070
                                                      28.09
                        X-RAY OF THORACIC
                                                               X-RAY OF THORACIC SPINE, TWO VIEWS TECHNICAL ONLY
505
          72100
                        X-RAY OF LUMBAR
                                                      31.28
                                                               X-RAY OF LUMBAR SPINE, TWO VIEWS TECHNICAL ONLY
506
                                                             X-RAY OF LUMBAR SPINE, MINIMUM FOUR VIEWS TECHNICAL ONLY
          72110
                        X-RAY OF LUMBAR
507
                                                      23.54
          72170
                       X-RAY OF PELVIS, ONE
                                                               X-RAY OF PELVIS, ONE VIEW TECHNICAL ONLY
508
          72190
                         X-RAY OF PELVIS
                                                      33.00
                                                               X-RAY OF PELVIS, MINIMUM THREE VIEWS TECHNICAL ONLY
509
          73020
                        X-RAY OF SHOULDER
                                                      15.50 X-RAY OF SHOULDER, ONE VIEW, (RIGHT) TECHNICAL ONLY
510
          73030
                        X-RAY OF SHOULDER
                                                      23.50
                                                              X-RAY OF SHOULDER, MINIMUM TWO VIEWS, (RIGHT) TECHNICAL ONLY
511
          73060
                        X-RAY OF HUMERUS
                                                      25.40
                                                              X-RAY OF HUMERUS, TWO VIEWS, (RIGHT) TECHNICAL ONLY
512
          73070
                         X-RAY OF ELBOW
                                                      21.00
                                                               X-RAY OF ELBOW, TWO VIEWS (RIGHT) TECHNICAL ONLY
          73080
                         X-RAY OF ELBOW
                                                      23.20
                                                              X-RAY OF ELBOW, COMPLETE, MINIMUM OF THREE VIEWS, (RIGHT)technical
513
                       X-RAY OF FOREARM TC
                                                      21.00
                                                             X-RAY OF FOREARM, TWO VIEWS, (RIGHT) TECHNICAL ONLY
514
          73090
515
          73100
                        X-RAY OF WRIST TC
                                                      21.00
                                                               X-RAY OF WRIST, TWO VIEWS, TWO VIEWS (RIGHT) TECHNICAL ONLY
516
          73110
                        X-RAY OF WRIST TC
                                                      25.77
                                                               X-RAY OF WRIST, COMPLETE, MINIMUM THREE VIEWS, (RIGHT) TECHNICAL ONLY
517
          73120
                        X-RAY OF HAND TC
                                                      18.80 X-RAY OF HAND, TWO VIEWS, (RIGHT) TECHNICAL ONLY
                                                               X-RAY OF HIP, UNILATERAL, ONE VIEW, (RIGHT) TECHNICAL ONLY
518
          73501
                                                      19.32
                         X-RAY OF HIP TC
519
          73502
                         X-RAY OF HIP TC
                                                      27.84
                                                               X-RAY OF HIP, COMPLETE, MINIMUM TWO VIEWS (RIGHT) TECHNICAL ONLY
520
          73552
                        X-RAY OF FEMUR TC
                                                      22.05 X-RAY OF FEMUR, TWO VIEWS, (RIGHT) TECHNICAL ONLY
521
                         X-RAY OF KNEE TC
                                                      25.30 X-RAY OF KNEE, TWO VIEWS, (RIGHT) TECHNICAL ONLY
522
          73562
                         X-RAY OF KNEE TC
                                                               X-RAY OF KNEE, THREE VIEWS, (RIGHT) TECHNICAL ONLY
                                                              X-RAY OF TIBIA AND FIBULA, TWO VIEWS, (RIGHT) TECHNICAL ONLY
523
          73590
                        X-RAY TIBIA FIB. TC
524
          73600
                        X-RAY OF ANKLE TC
                                                      21.81 X-RAY OF ANKLE, TWO VIEWS, (RIGHT) TECHNICAL ONLY
                                                      21.40 X-RAY OF ANKLE, COMPLETE, MINIMUM THREE VIEWS, (RIGHT) TECHNICAL ONLY
525
          73610
                        X-RAY OF ANKLE TC
          73620
526
                        X-RAY OF FOOT TC
                                                      23.90
                                                              X-RAY OF FOOT, TWO VIEWS, (RIGHT) TECHNICAL ONLY
527
          73630
                       X-RAY FOOT COMP TC
                                                      28.00
                                                               X-RAY OF FOOT, COMPLETE, MINIMMUM THREE VIEWS, (RIGHT) TECHNICAL COMPONENT ONLY
528
          72120
                      X-RAY L SPINE Bending TC
                                                      38.30
                                                               X-RAY LUMBAR SPINE, BENDING VIEWS ONLY, MINIMUM FOUR VIEWS TECHNICAL COMPONENT
                                                                                                                                                                       ONLY
530
          77072
                                                      25.00
                           Bone Age TC
                                                               Bone age techinical only
532
                                                               X-ray of Oscalcis (heel) RIGHT TECHNICAL ONLY
          73650
                         X-ray of Oscalcis
                                                      17.50
535
          72082
                                                               SCOLIOSIS SERIES TECHNICAL COMPONENT ONLY
                        SCOLIOSIS SERIES TC
                                                      33.10
552
                                                      23.70
                                                               XRAY OF THE STERNOCLAVICULAR JOINT OR JOINTS, 3 VIEWS MINIMUM TECHNICAL ONLY
          71130
                       X-RAY STERNUM 3V TC
600
          71045
                         INTERP. OF CHEST
                                                      11.09
                                                             INTERPRETATION OF CHEST X-RAY, SINGLE VIEW
601
          71046
                       INTERP. OF CHEST, TWO
                                                      13.27
                                                               INTERPRETATION OF CHEST X-RAY, TWO VIEWS
602
          72040
                       INTERP. OF CERVICAL
                                                      18.00
                                                               INTERPRETATION OF CERVICAL SPINE, TWO VIEWS
603
          72050
                        INTERP OF CERVICAL
                                                      21.00
                                                               INTERPRETATION OF CERVICAL SPINE, MINIMUM FOUR VIEWS
604
          72070
                       INTERP OF THORACIC
                                                      19.00
                                                              INTERPRETATION OF THORACIC SPINE, TWO VIEWS
605
          72100
                                                      14.92
                       INTERP OF LUMBAR SPI
                                                               INTERPRETATION OF LUMBAR SPINE, AP AND LATERAL
          72110
606
                       INTERP OF LUMBAR SPI
                                                      20.51
                                                               INTERPRETATION OF LUMBAR SPINE, MINIMUM FOUR VIEWS
607
                                                      11.66 INTERPRETATION OF PELVIS, ONE VIEW
          72170
                        INTERP OF PELVIS
608
          72190
                        INTERP OF PELVIS
                                                      13.20
                                                               INTERPRETATION OF PELVIS, MINIMUM THREE VIEWS
609
          73020
                       INTERP OF SHOULDER
                                                      12.00
                                                               INTERPRETATION OF SHOULDER, ONE VIEW, (RIGHT)
610
          73030
                       INTERP OF SHOULDER
                                                      15.00
                                                               INTERPRETATION OF SHOULDER COMPLETE, MINIMUM OF TWO VIEWS
                                                      12.00 INTERPRETATION OF HUMERUS, TWO VIEWS, (RIGHT)
611
          73060
                       INTERP OF HUMERUS
612
          73070
                       INTERP OF ELBOW, TWO
                                                      12.00
                                                               INTERPRETATION OF ELBOW, TWO VIEWS, (RIGHT)
          73080
                                                      12.00
                                                               INTERPRETATION OF ELBOW, COMPLETE, MINIMUM OF THREE VIEWS, (RIGHT)
613
                       INTERP OF ELBOW, COM
614
          73090
                       INTERP OF FOREARM
                                                      12.00
                                                               INTERPRETATION OF FOREARM, TWO VIEWS, (RIGHT)
                                                      12.00 INTERPRTATION OF WRIST, TWO VIEWS, (RIGHT)
615
          73100
                       INTERP OF WRIST, TWO
616
          73110
                       INTERP OF WRIST COM
                                                      12.00
                                                               INTERPRETATION OF WRIST, COMPLETE MINIMUM OF THREE VIEWS
          73120
                                                      12.00
617
                       INTERP OF HAND, TWO
                                                              INTERPRETATION OF HAND, TWO VIEWS, (RIGHT)
                                                               INTERPRETATION OF HIP, UNILATERAL, ONE VIEW
618
          73501
                       INTERP OF HIP, UNILA
                                                      9.16
619
          73502
                        INTERP OF HIP, TWO
                                                      11.65
                                                               INTERPRETATION OF HIP, COMPLETE, MINIMUM, TWO VIEWS (RIGHT)
620
          73552
                       INTERP OF FEMUR, TWO
                                                      9.78
                                                               INTERPRETATION OF FEMUR, TWO VIEWS, (RIGHT)
                       INTERP OF KNEE, TWO
                                                      12.00 INTERPRETATION OF KNEE, TWO VIEWS, (RIGHT)
```

621

73560