



Specialist MRI Imaging Requests

| Item | Description |
|-------|--|
| 63001 | MRI Head Scan of the head for tumour of the brain or meninges <i>Unlimited</i> |
| 63004 | MRI Head Scan of the head for inflammation of the brain or meninges <i>Unlimited</i> |
| 63007 | MRI Head Scan of the head for skull base or orbital tumour <i>Unlimited</i> |
| 63010 | MRI Head Scan of the head for stereotactic scan of brain, with Fiducials in place, for planning for stereotactic neurosurgery <i>Unlimited</i> |
| 63040 | MRI Head Scan of the head for acoustic neuroma <i>3 per year</i> |
| 63043 | MRI Head Scan of the head for pituitary tumour <i>3 per year</i> |
| 63046 | MRI Head Scan of the head for toxic or metabolic or ischaemic encephalopathy <i>3 per year</i> |
| 63049 | MRI Head Scan of the head for demyelinating disease of the brain <i>3 per year</i> |
| 63052 | MRI Head Scan of the head for congenital malformation of the brain or meninges <i>3 per year</i> |
| 63055 | MRI Head Scan of the head for venous sinus thrombosis <i>3 per year</i> |
| 63058 | MRI Head Scan of the head for trauma <i>3 per year</i> |
| 63061 | MRI Head Scan of the head for epilepsy <i>3 per year</i> |



07 5454 7844

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Specialist MRI Imaging Requests

| Item | Description |
|-------|---|
| 63064 | MRI Head Scan of the head for stroke <i>3 per year</i> |
| 63067 | MRI Head Scan of the head for carotid or vertebral artery dissection <i>3 per year</i> |
| 63070 | MRI Head Scan of the head for intracranial aneurysm <i>3 per year</i> |
| 63073 | MRI Head Scan of the head for intracranial arteriovenous malformation <i>3 per year</i> |
| 63101 | MRI Head and Neck Vessels Scan of the head and neck vessels for stroke <i>3 per year</i> |
| 63111 | MRI Head and cervical spine Scan of the head and cervical spine for tumour of the central nervous system or meninges <i>3 per year</i> |
| 63114 | MRI Head and cervical spine Scan of the head and cervical spine for inflammation of the central nervous system or meninges <i>3 per year</i> |
| 63125 | MRI Head and cervical spine Scan of the head and cervical spine for demyelinating disease of the central nervous system <i>3 per year</i> |
| 63128 | MRI Head and cervical spine Scan of the head and cervical spine for congenital malformation of the central nervous system or meninges <i>3 per year</i> |
| 63131 | MRI Head and cervical spine Scan of the head and cervical spine for syrinx (congenital or acquired) <i>3 per year</i> |

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Specialist MRI Imaging Requests

| Item | Description |
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| 63151 | MRI Spine - one region or two contiguous regions Scan of the spine for infection <i>Unlimited</i> |
| 63154 | MRI Spine - one region or two contiguous regions Scan of the spine for tumour <i>Unlimited</i> |
| 63161 | MRI Spine - one region or two contiguous regions Scan of the spine for demyelinating disease <i>3 per year</i> |
| 63164 | MRI Spine - one region or two contiguous regions Scan of the spine for congenital malformation of the spinal cord or the cauda equina or the meninges <i>3 per year</i> |
| 63167 | MRI Spine - one region or two contiguous regions Scan of the spine for myelopathy <i>3 per year</i> |
| 63170 | MRI Spine - one region or two contiguous regions Scan of the spine for syrinx (congenital or acquired) <i>3 per year</i> |
| 63173 | MRI Spine - one region or two contiguous regions Scan of the spine for cervical radiculopathy <i>3 per year</i> |
| 63176 | MRI Spine - one region or two contiguous regions Scan of the spine for sciatica <i>3 per year</i> |
| 63179 | MRI Spine - one region or two contiguous regions Scan of the spine for spinal canal stenosis <i>3 per year</i> |
| 63182 | MRI Spine - one region or two contiguous regions Scan of the spine for previous spinal surgery <i>3 per year</i> |
| 63185 | MRI Spine - one region or two contiguous regions Scan of the spine for trauma <i>3 per year</i> |

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Specialist MRI Imaging Requests

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| 63201 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for infection <i>Unlimited</i> |
| 63204 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for tumour <i>Unlimited</i> |
| 63219 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for demyelinating disease <i>3 per year</i> |
| 63222 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for congenital malformation of the spinal cord or the cauda equina or the meninges <i>3 per year</i> |
| 63225 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for myelopathy <i>3 per year</i> |
| 63228 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for syrinx (congenital or acquired) <i>3 per year</i> |
| 63231 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for cervical radiculopathy <i>3 per year</i> |
| 63234 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for sciatica <i>3 per year</i> |
| 63237 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for spinal canal stenosis <i>3 per year</i> |
| 63240 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for previous spinal surgery <i>3 per year</i> |
| 63243 | MRI Spine - three contiguous regions or two non-contiguous regions Scan of the spine for trauma <i>3 per year</i> |

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Specialist MRI Imaging Requests

| Item | Description |
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| 63271 | MRI Cervical spine and brachial plexus Scan of cervical spine and brachial plexus for tumour <i>3 per year</i> |
| 63274 | MRI Cervical spine and brachial plexus Scan of cervical spine and brachial plexus for trauma <i>3 per year</i> |
| 63277 | MRI Cervical spine and brachial plexus Scan of cervical spine and brachial plexus for cervical radiculopathy <i>3 per year</i> |
| 63280 | MRI Cervical spine and brachial plexus Scan of cervical spine and brachial plexus for previous surgery <i>3 per year</i> |
| 63301 | MRI Musculoskeletal (MSK) system Scan of the MSK system for tumour arising in bone or MSK system excludes tumour arising in breast, prostate or rectum <i>Unlimited</i> |
| 63304 | MRI Musculoskeletal (MSK) system Scan of the MSK system for infection arising in bone or MSK system excludes infection arising in breast, prostate or rectum <i>Unlimited</i> |
| 63307 | MRI Musculoskeletal (MSK) system Scan of the MSK system for osteonecrosis <i>Unlimited</i> |
| 63322 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of hip or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |
| 63325 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of shoulder or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |
| 63328 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of knee or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |
| 63331 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of ankle and/or foot or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |

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| 63334 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of one or both temporomandibular joints or their supporting structures <i>3 per year</i> |
| 63337 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of wrist and/or hand or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |
| 63340 | MRI Musculoskeletal (MSK) system Scan of the MSK system for derangement of elbow or its supporting structures* <i>3 per year (*Limitation is 3 for each side in 12 months)</i> |
| 63361 | MRI Musculoskeletal (MSK) system Scan of the MSK system for Gaucher disease <i>2 per year</i> |
| 63401 | MRA Cardiovascular System Scan of the cardiovascular system for vascular abnormality with a previous anaphylactic reaction to an iodinated contrast medium <i>3 per year</i> |
| 63404 | MRA Cardiovascular System Scan of the cardiovascular system for obstruction of the superior vena cava, inferior vena cava or a major pelvic vein <i>3 per year</i> |
| 63416 | MRA Paediatric (<16yrs) Scan of the vasculature of limbs prior to limb or digit transfer surgery in congenital limb deficiency syndrome <i>1 per year</i> |
| 63425 | MRI Paediatric (<16yrs) Scan for post-inflammatory or post-traumatic physeal fusion <i>2 per year</i> |
| 63428 | MRI Paediatric (<16yrs) Scan for Gaucher disease <i>2 per year</i> |
| 63440 | MRI Paediatric (<16yrs) Scan for pelvic or abdominal mass <i>Unlimited</i> |

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| 63443 | MRI Paediatric (<16yrs) Scan for mediastinal mass <i>Unlimited</i> |
| 63446 | MRI Paediatric (<16yrs) Scan for congenital uterine or anorectal abnormality <i>Unlimited</i> |
| 63461 | MRI Body Scan of adrenal mass in a patient with malignancy which is otherwise resectable <i>1 per year</i> |
| 63470 | MRI Pelvis Scan of the pelvis for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater, if the request for scan identifies that: (a) a histological diagnosis of carcinoma of the cervix has been made; and (b) the patient has been diagnosed with cervical cancer at FIGO stage 1B or greater <i>1 in a lifetime</i> |
| 63473 | MRI Pelvis & Abdomen Scan of the pelvis and upper abdomen, in a single examination, for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater, if the request for the scan identifies that: (a) a histological diagnosis of carcinoma of the cervix has been made; and (b) the patient has been diagnosed with cervical cancer at FIGO stage 1B or greater <i>1 in a lifetime</i> |
| 63476 | MRI Pelvis Scan of the pelvis for the initial staging of rectal cancer, if: (a) a phased array body coil is used; and (b) the request for the scan identifies that the indication is for the initial staging of rectal cancer (including cancer of the rectosigmoid and anorectum). <i>1 in a lifetime</i> |
| 63482 | MRCP Scan of pancreas and biliary tree for suspected biliary or pancreatic pathology <i>3 in 12 months</i> |

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Specialist MRI Imaging Requests

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| 63541 | <p>MRI Prostate</p> <p>Scan of the prostate for the detection of cancer, requested by a specialist in the speciality of urology, radiation oncology or medical oncology. The patient must be suspected of having prostate cancer based on:</p> <ul style="list-style-type: none">(a) A digital rectal examination (DRE) which is suspicious for prostate cancer; or(b) In a person aged <70 years, at least two prostate specific antigen (PSA) tests performed within an interval of 1-3 months are > 3.0ng/ml, and the free/total PSA ratio is <25% or the repeat PSA exceeds 5.5ng/ml; or(c) In a person aged <70 years, whose risk of developing prostate cancer based on family history is at least double the average risk, at least two PSA tests performed within an interval of 1-3months are < than 2.0ng/ml, and the free/total PSA ratio is <25%; or(d) In a person aged 70 years or older, at least two PSA tests performed within an interval of 1-3months are <5.5ng/ml and the free/total PSA ratio is <25%. <p><i>Note: Relevant family history is a first degree relative with prostate cancer or suspected of carrying a BRCA 1, BRCA 2 mutation. 1 in 12 months</i></p> |
| 63543 | <p>MRI Prostate</p> <p>Scan of the prostate for the detection of cancer, requested by a specialist in the speciality of urology, radiation oncology or medical oncology the request specifies that the clinical criteria below are met;</p> <ul style="list-style-type: none">(a) the patient is under active surveillance following a confirmed diagnosis of prostate cancer by the biopsy histopathology; and(b) The patient is not planning or undergoing treatment for prostate cancer <p>Benefits are payable for patients with proven diagnosis of prostate cancer following biopsy histopathology who:</p> <ul style="list-style-type: none">i. have not had a diagnostic mpMRI, and are placed on active surveillance following confirmed diagnosis; orii. 12 months following confirmed diagnosis and then every third year thereafter; oriii. at any time there is a clinical concern, or concern with PSA progression. <p><i>Note: Not to be used for the purpose of treatment, planning or for monitoring after treatment. 12 months following diagnosis and every 3rd year thereafter or if there is clinical concern</i></p> |

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Specialist MRI Imaging Requests

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| 63545 | MRI Liver Scans of liver with a contrast agent, for characterisation or intervention planning, if: (a) the patient has: i. known colorectal carcinoma; and ii. known, suspected, or possible liver metastasis; and (b) computed tomography, or ultrasound imaging, has identified a mass lesion in patient's liver. <i>1 in 12 months</i> |
| 63546 | MRI Liver Scan of the liver with a contrast agent, for diagnosis or staging, if: (a) the patient has: i. known or suspected hepatocellular carcinoma; and ii. chronic liver disease that has been confirmed by a specialist or consultant physician; and (b) the patient's liver function has been identified as Child Pugh class A or B; and (c) the patient has an identified hepatic lesion over 10 mm in diameter. <i>1 in 12 months</i> |
| 63740 | MRI Pelvis & Abdomen Scan to evaluate small bowel Crohn's disease if the service is provided to a patient for: (a) evaluation of disease extent at time of initial diagnosis of Crohn's disease; or (b) evaluation of exacerbation, or suspected complications, of known Crohn's disease; or (c) evaluation of known or suspected Crohn's disease in pregnancy; or (d) assessment of change to therapy in a patient with small bowel Crohn's disease <i>1 in 12 months</i> |
| 63741 | MRI Pelvis & Abdomen Scan with enteroclysis for Crohn's disease if the service is related to item 63740 <i>1 in 12 months</i> |
| 63743 | MRI Pelvis & Abdomen Scan for fistulising perianal Crohn's disease if the service is provided to a patient for: (a) evaluation of pelvic sepsis and fistulas associated with established or suspected Crohn's disease; or (b) assessment of change to therapy of pelvis sepsis and fistulas from Crohn's disease <i>1 in 12 months</i> |

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Specialist MRI Imaging Requests

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| 63454 | MRI Obstetric Fetal Scan Scan of the pelvis or abdomen, for a patient who is pregnant, if: (a) the pregnancy is at, or after, 18 weeks gestation; and (b) fetal central nervous system abnormality is suspected; and (c) an ultrasound has been performed and is provided by, or on behalf of, or at the request of, a specialist who is practising in the specialty of obstetrics; and (d) the diagnosis is indeterminate or requires further examination; and (e) the service is requested by a specialist practising in the specialty of obstetrics |

Should you require additional information please contact our Referrer Liaison Manager, Laura Law for assistance on connect@cooroy-radiology.com.au or 0417 007 574. All reports and images are available via electronic download or online via Radiology Connect.

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