

## Radiology 2025 CPT Updates Effective 1/1/2025

Each year the CPT® codebook is updated to add, revise, or delete codes and/or guidelines to reflect current technologies, techniques, and services. As a service to our clients, APS Medical Billing has summarized those changes to facilitate accurate reporting of the affected services as of January 1, 2025. The American Medical Association has released 270 new CPT codes, 112 deleted CPT codes and 38 revised CPT codes for 2025. The following may apply to radiology.

The radiology changes are outlined below. New codes are highlighted in **red**, revised codes in **blue**, and deleted codes are in **black**.

## Radiology

## **New Codes for 2025**

- Ablation of 1 or more thyroid nodule(s), one lobe or the isthmus, percutaneous, including imaging guidance, radiofrequency
  Ablation of 1 or more thyroid nodule(s), additional lobe, percutaneous, including imaging guidance, radiofrequency (List separately in addition to code for primary procedure)
- 64466 Thoracic fascial plane block, unilateral; by injection(s), including imaging guidance, when performed
- 64467 Thoracic fascial plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed
- 64468 Thoracic fascial plane block, bilateral; by injection(s), including imaging guidance, when performed
- 64469 Thoracic fascial plane block, bilateral; by continuous infusion(s), including imaging guidance, when performed
- 64473 Lower extremity fascial plane block, unilateral; by injection(s), including imaging guidance, when performed
- 64474 Lower extremity fascial plane block, unilateral; by continuous infusion(s), including imaging guidance, when performed
- 76014 MR safety implant and/or foreign body assessment by trained clinical staff, including identification and verification of implant components from appropriate sources (eg, surgical reports, imaging reports, medical device databases, device vendors, review of prior imaging), analyzing current MR conditional status of individual components and systems, and consulting published professional guidance with



written report; initial 15 minutes

- 76015 MR safety implant and/or foreign body assessment by trained clinical staff, including identification and verification of implant components from appropriate sources (eg, surgical reports, imaging reports, medical device databases, device vendors, review of prior imaging), analyzing current MR conditional status of individual components and systems, and consulting published professional guidance with written report; each additional 30 minutes (List separately in addition to code for primary procedure)
- 76016 MR safety determination by a physician or other qualified health care professional responsible for the safety of the MR procedure, including review of implant MR conditions for indicated MR examination, analysis of risk vs clinical benefit of performing MR examination, and determination of MR equipment, accessory equipment, and expertise required to perform examination, with written report
- 76017 MR safety medical physics examination customization, planning and performance monitoring by medical physicist or MR safety expert, with review and analysis by physician or other qualified health care professional to prioritize and select views and imaging sequences, to tailor MR acquisition specific to restrictive requirements or artifacts associated with MR conditional implants or to mitigate risk of non-conditional implants or foreign bodies, with written report
- 76018 MR safety implant electronics preparation under supervision of physician or other qualified health care professional, including MR-specific programming of pulse generator and/or transmitter to verify device integrity, protection of device internal circuitry from MR electromagnetic fields, and protection of patient from risks of unintended stimulation or heating while in the MR room, with written report
- 76019 MR safety implant positioning and/or immobilization under supervision of physician or other qualified health care professional, including application of physical protections to secure implanted medical device from MR-induced translational or vibrational forces, magnetically induced functional changes, and/or prevention of radiofrequency burns from inadvertent tissue contact while in the MR room, with written report

No revised codes for 2025

No deleted codes for 2025

The following resources were used in the preparation of this document: AMA Current Procedural Terminology (CPT) 2025.