

PET/CT PROCEDURE QUICK GUIDE

PROCEDURE/CPT CODE	PATIENT PREP/DURATION	COMMON INDICATIONS
<p>SKULL BASE TO MID-THIGH PET/CT -78815 PET CT fusion skull to thigh -A9552 Injection radiopharm F-18</p> <p style="text-align: center;">LIMITED PET/CT -78814 PET CT limited -A9552 Injection radiopharm F-18</p> <p>QUESTIONS OR CONCERNS AFTER 4 PM? CALL 574-364-2604 AND THE PET TECHNOLOGIST CAN BE PAGED AT HOME TO ANSWER YOUR QUESTIONS.</p>	<ul style="list-style-type: none"> - PLEASE EAT A LOW CARBOHYDRATE MEAL THE NIGHT PRIOR TO THE EXAM. STAY AWAY FROM: <ul style="list-style-type: none"> ○ DESSERTS/SWEETS ○ SODAS ○ PASTAS ○ BREADS ○ POTATOES - NPO AFTER MIDNIGHT, OTHER THAN H2O (this includes mints, gum, coffee, etc.) - NO INSULIN OR ORAL DIABETES MEDS AFTER MIDNIGHT - MORNING MEDS THAT DO NOT REQUIRE FOOD, AND ARE NOT FOR DIABETES, MAY BE TAKEN WITH WATER ONLY - NO STRENUOUS EXERCISE 24 HRS. PRIOR - WEAR WARM CLOTHING WITHOUT METAL SNAPS, ZIPPERS, OR BUTTONS - NO ENSURE, ENSURE PLUS, ENSURE CLEAR, GLUCERNA, BOOST, SLIM-FAST OR ANY OTHER MEAL REPLACEMENT /PROTEIN SHAKE AT LEAST 12 HOURS PRIOR TO EXAM. - NOTHING PER FEEDING TUBE AT LEAST 12 HOURS PRIOR TO EXAM. FEEDING TUBE SHOULD ALSO BE RINSED. - PROCEDURE TIME: 1.5-2 HOURS <p style="text-align: center;">**USE PET/CT QUESTIONNAIRE AND CANCER HISTORY FORM**</p>	<ul style="list-style-type: none"> - BREAST CA - CERVICAL CA - COLORECTAL CA - ESOPHAGEAL CA - LUNG CA - OVARIAN CA - TESTICULAR CA - HEAD/NECK CA - LYMPHOMA <p style="text-align: center;">- INFLAMMATION/INFECTION OF LIMITED AREA</p>

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<p>WHOLE BODY PET/CT -78816 PET CT fusion whole body -A9552 Injection radiopharm F-18</p> <p>QUESTIONS OR CONCERNS AFTER 4 PM? CALL 574-364-2604 AND THE PET TECHNOLOGIST CAN BE PAGED AT HOME TO ANSWER YOUR QUESTIONS.</p>	<ul style="list-style-type: none"> - PLEASE EAT A LOW CARBOHYDRATE MEAL THE NIGHT PRIOR TO THE EXAM. STAY AWAY FROM: <ul style="list-style-type: none"> ○ DESSERTS/SWEETS ○ SODAS ○ PASTAS ○ BREADS ○ POTATOES - NPO AFTER MIDNIGHT, OTHER THAN H2O (this includes mints, gum, coffee, etc.) - NO INSULIN OR ORAL DIABETES MEDS AFTER MIDNIGHT - MORNING MEDS THAT DO NOT REQUIRE FOOD, AND ARE NOT FOR DIABETES, MAY BE TAKEN WITH WATER ONLY - NO STRENUOUS EXERCISE 24 HRS. PRIOR - WEAR WARM CLOTHING WITHOUT METAL SNAPS, ZIPPERS, OR BUTTONS - NO ENSURE, ENSURE PLUS, ENSURE CLEAR, GLUCERNA, BOOST, SLIM-FAST OR ANY OTHER MEAL REPLACEMENT /PROTEIN SHAKE AT LEAST 12 HOURS PRIOR TO EXAM. - NOTHING PER FEEDING TUBE AT LEAST 12 HOURS PRIOR TO EXAM. FEEDING TUBE SHOULD ALSO BE RINSED. - PROCEDURE TIME: 1.5-2 HOURS <p>**USE PET/CT QUESTIONNAIRE AND CANCER HISTORY FORM**</p>	<ul style="list-style-type: none"> - MELANOMA - SARCOMA - LYMPHOMA (IF LOWER EXTREMITIES ARE INVOLVED) - MULTIPLE MYELOMA - INFECTION/INFLAMMATION

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<p>PSMA (PYLARIFY) F-18 SKULL BASE TO MID-THIGH PET/CT -78815 PET CT fusion skull to thigh -A9595 F-18 PSMA OR -A9596 Illucix Gallium-68 PSMA-1 (Either are used depending on availability)</p> <p>**ONCE SCHEDULED, EMAIL BRYAN SO THAT A DOSE GETS ORDERED**</p> <p>QUESTIONS OR CONCERNS AFTER 4 PM? CALL 574-364-2604 AND THE PET TECHNOLOGIST CAN BE PAGED AT HOME TO ANSWER YOUR QUESTIONS.</p>	<ul style="list-style-type: none"> - NO PREP REQUIRED - WEAR WARM, COMFORTABLE CLOTHING, PREFERABLY WITHOUT METAL SNAPS, BUTTONS, BELTS, ETC. - PROCEDURE TIME: 1.5-2 HOURS <p>** USE PSMA QUESTIONNAIRE AND CANCER HISTORY FORM**</p> <p>**MUST HAVE PSA, CLINIC NOTES, AND GLEASON SCORE**</p>	<ul style="list-style-type: none"> - PROSTATE CANCER
<p style="text-align: center;">PET/CT CU-64 DOTATATE SCAN</p> <p>-78815 PET CT fusion skull to thigh -A9592 Injection Cu 64 Detectnet</p> <p>**THIS PROCEDURE MUST BE SCHEDULED WITH PET/CT TECHNOLOGIST**</p> <p>QUESTIONS OR CONCERNS AFTER 4 PM? CALL 574-364-2604 AND THE PET TECHNOLOGIST CAN BE PAGED AT HOME TO ANSWER YOUR QUESTIONS.</p>	<ul style="list-style-type: none"> - NPO AFTER MIDNIGHT, OTHER THAN WATER - HYDRATE WITH 24-32 OZ. WATER THE EVENING BEFORE THE EXAM - WEAR COMFORTABLE CLOTHING, PREFERABLY WITHOUT METAL SNAPS, BUTTONS, BELTS, ETC. - PROCEDURE TIME: 1.5-2 HOURS 	<ul style="list-style-type: none"> - NEUROENDOCRINE TUMORS
<p style="text-align: center;">PET/CT VIABILITY</p> <p>-78459 PET CT viability study -A9552 Injection radiopharm F-18 -78451 NM rest or str myo perf SPECT -A9502 Isotope Diagnostic Myoview</p> <p>**THIS PROCEDURE MUST BE SCHEDULED WITH PET/CT**</p> <p>QUESTIONS OR CONCERNS? CALL 574-364-2604 AND THE TECHNOLOGIST CAN BE PAGED</p>	<ul style="list-style-type: none"> - INSTRUCT PATIENT THAT PET TECHNOLOGIST WILL CALL AHEAD WITH DETAILED PREP INSTRUCTIONS. IT IS A MULTI-DAY PREP AND IMAGING IN TWO MODALITIES 	<ul style="list-style-type: none"> - SARCOIDOSIS

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SPECIAL CONSIDERATIONS

****CHECK SCHEDULE AFTER 12PM. ALL NEXT DAY ADD-ONS, CANCELLATIONS, OR TIME CHANGES MUST BE CONVEYED TO PET/CT TECHNOLOGIST, SO THAT ISOTOPES MAY BE ORDERED OR CANCELLED, AS APPROPRIATE.**

****CLINIC NOTES MUST BE PULLED ON ALL PET/CT PATIENTS**

****CONTACT PET/CT TO SCHEDULE SEDATIONS**

SCHEDULING FOR PET/CT

5:45 SKULLBASE TO THIGH ONLY, CPT CODE #78815

6:30 SKULLBASE TO THIGH **OR** PET DOTATATE SCAN FOR NEUROENDORINE TUMORS, CPT CODE #78815. IF PET DOTATATE IS SCHEDULED, EMAIL BRYAN TO ORDER DOSE.

7:15 SKULLBASE TO THIGH **OR** PET DOTATATE SCAN FOR NEUROENDORINE TUMORS, CPT CODE #78815. IF PET DOTATATE IS SCHEDULED, EMAIL BRYAN TO ORDER DOSE.

8:00 WHOLE BODY(MELANOMA) #78816, **OR** PET/CT W/SIM, **OR** PET/CT WITH DIAGNOSTIC CT, **OR** ANY EXAM REQUIRING SEDATION.

8:45 PSMA PET/CT. WHEN SCHEDULED, EMAIL BRYAN TO ORDER DOSE.

9:30 PSMA PET/CT. WHEN SCHEDULED, EMAIL BRYAN TO ORDER DOSE.

10:15 PSMA, SKULLBASE TO THIGH, WHOLE BODY, **OR** PET DOTATATE PET/CT SCAN

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