Radiology Documentation Guidelines

Attention: Office and Billing Managers

All radiology services performed must be documented following the American College of Radiology (ACR) documentation guidelines. The radiological report is considered an official interpretation regardless of the service site where the procedure was performed or type of physician performing the procedure. All physicians are held to the same documentation standards as a radiologist.

### REQUIRED COMPONENTS
OF THE RADIOLOGY REPORT

Omission of required components could result in a denial of payment:

<table>
<thead>
<tr>
<th>EA:</th>
<th>(SERVICE REPORTED NOT IN CHART OR OP REPORT – REBILL)</th>
</tr>
</thead>
</table>

### DEMOGRAPHICS

<table>
<thead>
<tr>
<th>REQUIRED</th>
<th>OPTIONAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Name</td>
<td>Date of Dictation</td>
</tr>
<tr>
<td>Provider Name</td>
<td>Date of Transcription</td>
</tr>
<tr>
<td>Referring Provider</td>
<td>Gender</td>
</tr>
<tr>
<td>Place of Service</td>
<td>Patient Age</td>
</tr>
<tr>
<td>Name / Type of Examination</td>
<td></td>
</tr>
<tr>
<td>Date and Time of Examination</td>
<td></td>
</tr>
</tbody>
</table>

### CLINICAL INFORMATION

Relevant Clinical Information and ICD 9 code as available

### BODY OF REPORT

- Procedure Performed
  - Number of Views
  - Anatomical Site
- Description of Study
- Materials Used Including Amounts and Types of Medications
- Significant Patient Reaction
- Findings
- Potential Limitations
- Clinical Issues
- Comparison Studies if Applicable

### IMPRESSION

- A Precise Diagnosis and/or Differential Diagnosis
- Follow-up Studies Recommended

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**AUDIENCE: PCPS / SPECIALISTS**

Contact PROVIDER RELATIONS: (419) 887-2535 or (800) 891-2542

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