

## MRI Peripheral Venogram With and Without Contrast Guideline

**CPT Code:** 74185

**Indications:** Occlusive disease or aneurysm

**Contrast:** Yes (see MRG MRI Contrast Administration Policy)

### Non Contrast:

**\*Flash Localizer Feet**

**\*Flash Localizer Legs**

**\*Vessel Scout Legs**

Sequence	Plane	Slice Thickness	Gap	FOV	Notes
FI 3D CE	Coronal	1.2mm	0	500	Lower Legs/Feet
FI 3D CE	Coronal	1.2mm	0	500	Hips Legs

### CONTRAST DURING CARE BOLUS:

Sequence	Plane	Slice Thickness	Gap	FOV	Notes
Care Bolus	Coronal	20mm	0	400	
FI 3D CE	Coronal	1.2mm	0	500	Hips Legs
FI 3D CE	Coronal	1.2mm	0	500	Lower Legs/Feet
FI 3D CE	Coronal	1.2mm	0	500	Hips Legs
FI 3D CE	Coronal	1.2mm	0	500	Lower Legs/Feet
FI 3D CE	Coronal	1.2mm	0	500	Hips Legs
FI 3D CE	Coronal	1.2mm	0	500	Lower Legs/Feet

### Optional for 3T:

Sequence	Plane	Slice Thickness	Gap	FOV	Notes
3D TWIST	Coronal	1.3mm	0	320-360	