Follow Up vs Limited
2nd/3rd Trimester Obstetrical Ultrasounds

Limited - 76815

Medicalis: UOBLTD (OBSTETRICAL ULTRASOUND LIMITED)
EPIC: US OB Limited 1 or More Fetus

Limited ultrasounds may be performed without a prior complete 2nd/3rd trimester ultrasound. The following parameters should be included*:

- Cervix (if <32wks)**, Position, Placenta, AFI (if >25wks or subjectively abnormal), HR, 4-Chamber Heart & Heart cine***

Follow Up - 76816

Medicalis: UOBFU (OBSTETRICAL ULTRASOUND FOLLOWUP SECOND AND THIRD TRIMESTER)
EPIC: US OB Follow Up Transabdominal

Follow up ultrasound may be performed if there has been a prior complete 2nd/3rd trimester ultrasound performed/attempted at Inland Imaging or local OBGYN office. The following parameters should be included*:

- Cervix (if <32wks)**, Position, Placenta, AFI (if >25wks or subjectively abnormal), HR, 4-Chamber Heart & Heart cine***
- Biometry (if >4wks since prior exam)****
- + any additional areas of concern
  - Structures not seen or poorly visualized on prior exam
  - Re-evaluation of known or suspected fetal abnormalities

Hospital Patients (ER/L&D)

- Limited protocol should be performed unless additional concern is specified on order
- Complete 2nd/3rd trimester exams should be rare
  - only through L&D and when specifically requested by provider (usually due to late prenatal care)
- If biometry is requested/performed, but the patient has not had a prior complete 2nd/3rd trimester ultrasound, then an OB limited exam code should be charged in EPIC

*Variations in the protocol requirements listed above may be made on a case-by-case basis and must be approved by a radiologist

**Transabdominal only unless abnormal or high risk, then do transvaginal (see OB 2/3 protocol for details)

*** The fetal heart should be examined during every obstetrical exam. When the heart is not the focus of the exam, only a 4-Chamber view and heart cine should be obtained, and the heart anatomy field in Viewpoint should be left unpopulated. Images of the heart are not required if it is not well visualized; however, a HR should still be obtained. If the heart is the focus of the exam, 3-vessel view and outflow tract images should also be obtained, and the heart anatomy field in Viewpoint should be populated.

**** Fetal growth should not be assessed <2wks after comparison exam. 2-4wks after a comparison exam, fetal growth evaluation may be performed at the provider’s request. If a Follow Up OB 2/3 exam is performed at least 4wks after comparison exam, then fetal growth should be routinely evaluated.