



Quick reference guide

MBS Review recommendations: Ultrasound - Group I01

Date of change: 1 May 2020

Amended items: 55032* 55033* 55036 55037 55065 55068 55076 55079
55238 55244 55276 55280 55294 55296 55700 55703
55704 55705 55718 55723 55812 55814 55848 55850

New items: 55066 55071 55856-55895

Deleted items: 55800-55810 55811 55813 55815-55843

*Amendment to explanatory note only

Revised structure

- All ultrasound items annotated with 'NK' will be deleted. The annotation 'K' will be deleted from the remaining items (see the capital sensitivity fact sheet).
- Two new items for ultrasound of the breast in conjunction with a surgical procedure will be created. The new items are 55066 (both breasts) and 55071 (one breast). The relevant surgical procedure item in the General Medical Services Table is able to be claimed in conjunction with these items. The new items will allow a diagnostic ultrasound of the breast and an ultrasound guided intervention (for example, a breast biopsy) conducted at the same attendance to attract a Medicare benefit.
- Items covering musculo-skeletal ultrasound scans of the various extremities will be deleted and replaced with items covering unilateral and bilateral scans. The unilateral scans will retain the same schedule fee as the items being deleted. The bilateral scan fees will be approximately 11% higher than the unilateral scan fees. The rationale for the new items is that patients will receive a Medicare benefit for bilateral ultrasound scans at the same attendance.
- Item descriptors for general ultrasound, obstetric and gynaecological ultrasound and musculoskeletal ultrasound will be amended to remove any co-claiming restrictions with cardiac or vascular ultrasound. A restriction will still apply for vascular ultrasound of the lower leg and musculo-skeletal ultrasound of the lower leg. The reason for the removal of the restrictions is to allow patients to receive a benefit for multiple ultrasound scans of different parts of the body at the same attendance. Items which have no other changes



other than the removal of the co-claiming restrictions have not been included in the list of amended items in this guide for brevity purposes.

- The general pelvic ultrasound items 55065 and 55068 will no longer be able to be claimed where a pregnancy ultrasound item (items 55700 to 55774) would apply. The reason for this restriction is that the data presented to the Diagnostic Imaging Clinical Committee showed that general pelvic ultrasound items were often being claimed for early pregnancy scans instead of the relevant pregnancy ultrasound item.
- The descriptor for breast ultrasound items 55076 and 55079 will be amended so that they also apply to post mastectomy surveillance. The chest or abdominal wall items 55812 and 55814 will no longer be able to be co-claimed with the breast ultrasound items (items 55070, 55073, 55076 and 55079).
- The schedule fees for the interventional musculo-skeletal ultrasound items 55848 and 55850 will be increased. The increase recognises specialist radiologists will no longer be able to claim a consultation in conjunction with these services (see the radiologist co-claiming consultations quick reference guide). The increased fees were calculated on the basis of the fee for the joint injection item (50124) that was removed from the MBS in 2009, indexed to what the fee for that item would have been in 2018.
- The list of conditions in the obstetric ultrasound items will be deleted. For the less than 12 week scan items (item 55700 and 55703), the items apply where the scan is for 'determining the gestation, location, viability or number of fetuses'. For the 12 to 16 week scan, the items (55704 and 55705) apply for 'determining the structure, gestation, viability or number of fetuses'. The later obstetric scans apply where clinically appropriate. The rationale for these changes is that all pregnancies are able to meet at least one of conditions being deleted and removing them would serve to considerably simplify the obstetric section of the MBS.
- The descriptors for abdominal ultrasound items 55036 and 55037 will be amended to include the term 'morphological assessment' so that the items should only be used for imaging purposes, not for non-imaging techniques such as transient elastography.
- Items annotated (NR) will no longer contain the phrases 'the service is not requested by medical practitioner' or 'the service is not requested by a medical practitioner or nurse practitioner'. The corresponding (R) items will no longer contain any of the following phrases:
 - > 'the service is requested by a medical practitioner'
 - > 'the service is requested by a medical practitioner or nurse practitioner'
 - > 'the medical practitioner is not member of a group of practitioners of which the providing practitioner is a member'
 - > 'if the service is requested by a medical practitioner, the medical practitioner is not member of a group of practitioners of which the providing practitioner is a member'
 - > 'if the service is requested by a participating nurse practitioner—the nurse practitioner does not have a business or financial arrangement with the providing practitioner'
- The changes to the (NR) items and their (R) equivalents for ultrasound were not MBS Review Taskforce recommendations. They are being made to ensure consistency with the overarching requesting provisions in section 16B of the *Health Insurance Act 1973* and to provide clarity to specialists as to which item can be claimed. The changes also align the (NR) and (R) ultrasound items. Unless otherwise specified in the item



descriptor (R) items can be requested by any medical practitioner. Certain (R) ultrasound items must be requested by specialists or consultant physicians as shown in the relevant item descriptors. Specified allied health practitioners may request prescribed ultrasound items as outlined in the MBS explanatory notes.

- The ultrasound items that have no other changes apart from the removal of the references to 'not requested' or 'requested' as noted above also have not been included in this guide.

Patient impacts

- The changes will provide greater access for patients, leading to improved health outcomes.
- Patients should not be negatively affected by the changes and will have continued access to clinically relevant services.

Amended items 55032(R) and 55033 NR – Ultrasound of the neck

A new MBS note has been added (reference to be provided when finalised) to help ensure that neck ultrasound scanning is undertaken in clinically appropriate circumstance. The note will read:

'Thyroid ultrasound is indicated for the (i) evaluation of a palpable thyroid nodule or neck mass; (ii) evaluation of abnormalities detected on other imaging studies regarding the thyroid, parathyroid or neck masses; (iii) follow up of known thyroid nodules; (iv) evaluation of presence, size and location of the thyroid; (v) screening of high risk patients for occult thyroid malignancy; (vi) localisation of parathyroids in patients with hyperparathyroidism; (vii) perioperative staging of thyroid cancer; (viii) surveillance for recurrent disease for a patient with a history of thyroid cancer; (ix) ultrasound guided fine needle biopsy of a thyroid lymph node or neck mass.

Neck ultrasound is not indicated for amongst others (i) abnormalities in thyroid function tests; (ii) abnormalities in thyroid antibodies; (iii) ultrasounds of the thyroid performed for symptoms such as sore throat, neck pain and globus pharyngeus-type symptoms, in the absence of any indication of thyroid disease.'

Amended item 55036(R) – Ultrasound of the abdomen

Overview: The descriptor has been amended to:

- remove the 24 hour restriction with the item 55065 (pelvic ultrasound).
- include the term 'morphological assessment' so that the item should only be used for imaging purposes, not for non-imaging techniques such as transient elastography. This change was recommended by the MSAC to clarify the appropriate use of the item.

Service/Descriptor: Abdomen, ultrasound scan of (including scan of urinary tract when performed), for morphological assessment, if the service is not solely a transrectal ultrasonic examination of any of the following:

- (a) prostate gland;
- (b) bladder base;
- (c) urethra (R)



Indication: This item can be claimed on the same day as a pelvic ultrasound. The item cannot be claimed for non-imaging techniques such as transient elastography.

MBS fee: \$111.30 (no change)

Benefit: No change.

Amended item 55037(NR) – Ultrasound of the abdomen

Overview: The descriptor has been amended to include the term ‘morphological assessment’ so that the item should only be used for imaging purposes, not for non-imaging techniques such as transient elastography. This change was recommended by MSAC to clarify the appropriate use of the item.

Service/Descriptor: Abdomen, ultrasound scan of (including scan of urinary tract when performed), for morphological assessment, if the service is not solely a transrectal ultrasonic examination of any of the following:

- (a) prostate gland;
- (b) bladder base;
- (c) urethra (NR)

Indication: This item cannot be claimed for non-imaging techniques such as transient elastography.

MBS fee: \$37.85 (no change)

Benefit: No change.

Amended item 55065(R) – Ultrasound of the pelvis

Overview: Amended descriptor so that the item cannot be claimed where an obstetric ultrasound item applies to the service. The item is also no longer restricted with:

- item 55036 - abdominal ultrasound
- a cardiac or vascular ultrasound item.

Service/Descriptor:

Pelvis, ultrasound scan of, by any or all approaches, if:

- (a) the service is not solely:
 - (i) a service to which an item in Subgroup 5 of this Group applies, or
 - (ii) a transrectal ultrasonic examination of the prostate gland, bladder base and urethra, or any of those organs; and
- (b) within 24 hours of the service, a service mentioned in item 55038 is not performed on the same patient by the providing practitioner (R)

Indication: This item can be now claimed with item 55036 (abdominal ultrasound) on the same day. This item should not be claimed in place of an obstetric ultrasound service.



MBS fee: \$98.25 (no change)

Benefit: No change.

Amended item 55068 – Pelvic ultrasound (NR)

Item: Pelvis, ultrasound scan (NR)

Overview: Amended descriptor so that the item cannot be claimed where an obstetric ultrasound item applies to the service. The item is also no longer restricted with a cardiac or vascular ultrasound item.

Service/Descriptor:

Pelvis, ultrasound scan of, by any or all approaches, if the service is not solely a service to which an item in Subgroup 5 of this Group applies or a transrectal ultrasonic examination of any of the following:

- (a) prostate gland;
- (b) bladder base;
- (c) urethra (NR)

Indication: This item should not be claimed in place of an obstetric ultrasound service.

MBS fee: \$35.00 (no change)

Benefit: No change

Amended item 55076 – Ultrasound of breasts (R)

Overview: The item descriptor has been amended to include post mastectomy surveillance.

Service/Descriptor: Breasts, both, ultrasound scan of (including an ultrasound scan for post mastectomy surveillance) (R)

Indication: The item can be used where the patient has had a unilateral or bilateral mastectomy as well as other breast conditions.

MBS fee: \$109.10 (no change)

Benefit: No change.

Amended item 55079– Ultrasound of breasts (NR)

Overview: The item descriptor has been amended to include post mastectomy surveillance.

Service/Descriptor: Breasts, both, ultrasound scan of (including an ultrasound scan for post mastectomy surveillance) (R)

Indication: The item can be used where the patient has had a unilateral or bilateral mastectomy as well as other breast conditions.



MBS fee: \$34.05 (no change)

Benefit: No change.

Amended items 55238, 55244, 55276, 55280, 55294, 55296 – Vascular ultrasound lower limb

These items are vascular items of the lower limb. The descriptors have been amended to remove the restrictions with general ultrasound (subroup 1) and apply a restriction with musculo-skeletal items 55880, 55881, 55882, 55883, 55884, 55885, 55886, 55887, 55888, 55889, 55890, 55891, 55892, 55893, 55894 and 55895, which are items covering the lower limb.

There are no changes to the other requirements for the items.

Amended item 55700– Pregnancy ultrasound (R)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation (R)

Indication: The item can be used for the purpose of determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation.

MBS fee: \$60 (no change)

Benefit: No change.

Amended item 55703– Pregnancy ultrasound (NR)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation (R)

Indication: The item can be used for the purpose of determining the gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is less than 12 weeks of gestation.

MBS fee: \$60.00 (no change)

Benefit: No change.



Amended item 55704– Pregnancy ultrasound (R)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 to 16 weeks of gestation (R)

Indication: The item can be used for the purpose of determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 week to 16 weeks of gestation.

MBS fee: \$70.00 (no change)

Benefit: No change.

Amended item 55705– Pregnancy ultrasound (NR)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, ultrasound scan of, by any or all approaches, for determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 to 16 weeks of gestation (R)

Indication: The item can be used for the purpose of determining the structure, gestation, location, viability or number of foetuses, if the dating of the pregnancy (as confirmed by ultrasound) is 12 week to 16 weeks of gestation.

MBS fee: \$35.00 (no change)

Benefit: No change.

Amended item 55718 – Pregnancy ultrasound (R)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:

- (a) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and
- (b) the service is not performed in the same pregnancy as item 55723 (R)

Indication: The item can be used where, in the clinical judgment of the requesting practitioner, the service is necessary for the management of the pregnancy.



MBS fee: \$100.00 (no change)

Benefit: No change.

Amended item 55723 – Pregnancy ultrasound (NR)

Overview: The item descriptor has been amended exclude the conditions that currently must be met before the items applies. The conditions have been removed as all pregnancies are at risk of foetal abnormality or miscarriage, the list of clinical indications is not required.

Service/Descriptor: Pelvis or abdomen, pregnancy-related or pregnancy complication, fetal development and anatomy, ultrasound scan of, by any or all approaches, if:

- (a) the dating of the pregnancy (as confirmed by ultrasound) is after 22 weeks of gestation; and
- (b) the service is not performed in the same pregnancy as item 55718 (NR)

Indication: The item can be used where, in the clinical judgment of the providing practitioner, the service is necessary for the management of the pregnancy.

MBS fee: \$38.00 (no change)

Benefit: No change.

Amended item 55812 – Chest or abdominal wall ultrasound (R)

Overview: The item descriptor has been amended to prevent co-claiming in conjunction with the breast ultrasound items 55070, 55073, 55076, 55079. This is because the bilateral breast ultrasound items now include an ultrasound scan for the purposes of post-mastectomy surveillance.

Service/Descriptor: Chest or abdominal wall, one or more areas, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55070, 55073, 55076 or 55079 (R)

Indication: The item cannot be claimed in conjunction with the breast ultrasound items.

MBS fee: \$109.10 (no change)

Benefit: No change.

Amended item 55814 – Chest or abdominal wall ultrasound (NR)

Overview: The item descriptor has been amended to prevent co-claiming in conjunction with the breast ultrasound items 55070, 55073, 55076, 55079. This is because the bilateral breast ultrasound items now include an ultrasound scan for the purposes of post-mastectomy surveillance.

Service/Descriptor: Chest or abdominal wall, one or more areas, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55070, 55073, 55076 or 55079 (NR)

Indication: The item cannot be claimed in conjunction with the breast ultrasound items.

MBS fee: \$37.85 (no change)



Benefit: No change.

Amended item 55848 – Musculo-skeletal interventional ultrasound

Overview: The fee for this item has been increased. The descriptor has been amended to prevent co-claiming the item with the general ultrasound interventional item – item 55054. There has also been a slight change to the descriptor to replace the term ‘echography’ with ‘ultrasound’.

Service/Descriptor: Musculoskeletal ultrasound, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service to which any other item in this group applies, and not performed in conjunction with a service mentioned in item 55054 (R)

Indication: The item cannot be claimed in conjunction with the general ultrasound interventional item 55054.

MBS fee: \$136.60

Benefit: 85% = \$116.15 Bulk billed benefit = \$129.80

Amended item 55850 – Musculo-skeletal interventional ultrasound - diagnostic

Overview: The fee this item has been increased. The descriptor has been amended to prevent co-claiming the item with the general ultrasound interventional item – item 55054. There has also been a slight change to the descriptor to replace the term ‘echography’ with ‘ultrasound’.

Service/Descriptor: Musculoskeletal ultrasound, in conjunction with a surgical procedure using interventional techniques, inclusive of a diagnostic musculoskeletal ultrasound service, if:

- (a) a medical practitioner or nurse practitioner has indicated on a referral for a musculoskeletal ultrasound that an ultrasound guided intervention be performed if clinically indicated; and
- (b) the service is not performed in conjunction with a service mentioned in item 55054 or any other item in this Subgroup (R)

Indication: The item includes a diagnostic ultrasound of the area in respect the ultrasound-guided interventional procedure is being undertaken. A separate diagnostic scan of the area cannot be claimed. The item cannot co-claimed with the general ultrasound interventional item 55054.

MBS fee: \$180.35

Benefit: 85% = \$153.30 Bulk billed benefit = \$171.35

New item – 55066 Breast diagnostic and interventional ultrasound – bilateral

Overview: This item has been created to provide benefits for both a diagnostic breast scan and an image guided interventional scan to be undertaken at the same attendance.

Service/Descriptor: Breasts, both, ultrasound scan of, in conjunction with a surgical procedure using interventional techniques, if:

- (a) the request for the scan indicates that an ultrasound-guided breast intervention be performed; and



(b) the service is not performed in conjunction with any other item in this Group (R)

Indication: This item should be used where a diagnostic scan of both breasts and an ultrasound-guided breast intervention (either on one or both breasts) is performed at the same attendance. Where only one breast is scanned, the unilateral item is to be claimed.

Other requirements: The item needs to be requested by a medical practitioner who has indicated in the request that an ultrasound-guided intervention be performed. The item cannot be co-claimed with any other ultrasound item.

MBS fee: \$218.20

Benefit: 85% = \$185.50 Bulk billed benefit = \$207.30

New item – 55071 Breast diagnostic and interventional ultrasound – unilateral

Overview: This item has been created to provide benefits for both a diagnostic breast scan and an image guided interventional scan to be undertaken at the same attendance.

Service/Descriptor: Breast, one, ultrasound scan of, in conjunction with a surgical procedure using interventional techniques, if:

- (a) the request for the scan indicates that an ultrasound-guided breast intervention be performed; and
- (b) the service is not performed in conjunction with any other item in this group (R)

Indication: This item should be used where a diagnostic scan of one breasts and an ultrasound-guided breast intervention is performed at the same attendance.

Other requirements: The item needs to be requested by a medical practitioner who has indicated in the request that an ultrasound-guided intervention be performed. The item cannot be claimed twice where both breasts are scanned. The item cannot be co-claimed with any other ultrasound item.

MBS fee: \$207.35

Benefit: 85% = \$176.25 Bulk billed benefit = \$197.00

New item – 55856 Musculo-skeletal ultrasound hand/wrist – unilateral (R)

Overview: This item replaces item 55800, which has been deleted.

Service/Descriptor: Hand or wrist or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55858 (R)

Indication: This item should be used for ultrasound scans of the hand or wrist or both the hand and wrist where either the left or right hand/wrist is being scanned. Item 55858 should be used where both the left and right wrists/hands are scanned.

Other requirements: The item cannot be claimed twice where the left and right hands/wrists are scanned.



MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55857 Musculo-skeletal ultrasound hand/wrist - unilateral (NR)

Overview: This item replaces item 55802, which has been deleted.

Service/Descriptor: Hand or wrist or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55859 (NR)

Indication: This item should be used for ultrasound scans of the hand or wrist or both the hand and wrist where either the left or right hand/wrist is being scanned. The bilateral item 55859 should be used where both the left and right wrists/hands are scanned.

Other requirements: The item cannot be claimed twice where the left and right hands/wrists are scanned.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55858 Musculo-skeletal ultrasound hand/wrist - bilateral(R)

Overview: This item replaces item 55800, which has been deleted.

Service/Descriptor: Hand or wrist or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55856 (R)

Indication: This item should be used for ultrasound scans of the hand or wrist or both the hand and wrist where both the left and right hands/wrists are scanned, that is, a bilateral scan.

Other requirements: The unilateral item 55856 cannot be claimed twice in place of this item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55859 Musculo-skeletal ultrasound hand/wrist - bilateral (NR)

Overview: This item replaces item 55802, which has been deleted.

Service/Descriptor: Hand or wrist or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55857 (NR)

Indication: This item should be used for ultrasound scans of the hand or wrist or both the hand and wrist where both the left and right hands/wrists are scanned, that is, a bilateral scan.

Other requirements: The unilateral item 55857 cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90



New item – 55860 Musculo-skeletal ultrasound forearm/elbow – unilateral (R)

Overview: This item replaces item 55804, which has been deleted.

Service/Descriptor: Forearm or elbow, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55862 (R)

Indication: This item should be used for ultrasound scans of the forearm or elbow or both the forearm and elbow where either the left or right forearm/elbow is scanned. The bilateral scan item 55862 should be used where both the left and right wrists/hands are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55861 Musculo-skeletal ultrasound forearm/elbow - unilateral (NR)

Overview: This item replaces item 55806, which has been deleted.

Service/Descriptor: Forearm or elbow, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55863 (NR)

Indication: This item should be used for ultrasound scans of the forearm or elbow or both the forearm and elbow where either the left or right forearm/elbow is scanned. The bilateral scan item 55863 should be used where both the left and right forearms/elbows are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$39.90

New item – 55862 Musculo-skeletal ultrasound forearm/elbow – bilateral (R)

Overview: This item replaces item 55804, which has been deleted.

Service/Descriptor: Forearm or elbow, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55860 (R)

Indication: This item should be used for ultrasound scans of the forearm or elbow or both the forearm and elbow where both the left and right forearms/elbows are scanned, that is, a bilateral scan.

Other requirements: The unilateral item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05



New item – 55863 Musculo-skeletal ultrasound forearm/elbow - bilateral (NR)

Overview: This item replaces item 55806, which has been deleted.

Service/Descriptor: Forearm or elbow, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55861 (NR)

Indication: This item should be used for ultrasound scans of the forearm or elbow or both the forearm and elbow where either the left or right forearm/elbow is scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55864 Musculo-skeletal ultrasound shoulder/upper arm – unilateral (R)

Overview: This item replaces item 55808, which has been deleted.

Service/Descriptor: Shoulder or upper arm, or both, left or right, ultrasound scan of, if

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
- (i) an injury to a muscle, tendon or muscle/tendon junction;
 - (ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);
 - (iii) biceps subluxation;
 - (iv) capsulitis and bursitis;
 - (v) a mass, including a ganglion;
 - (vi) an occult fracture;
 - (vii) acromioclavicular joint pathology; and
- (b) the service is not performed in conjunction with a service mentioned in item 55866 (R)

Indication: This item should be used for ultrasound scans of the shoulder or upper or both the shoulder and upper arm where either the left or right shoulder/upper arm is scanned. The bilateral item 55866 should be used where both the left and right shoulders/upper arms are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65



New item – 55865 Musculo-skeletal ultrasound shoulder/upper arm – unilateral (NR)

Overview: This item replaces item 55810, which has been deleted.

Service/Descriptor: Shoulder or upper arm, or both, left or right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) an injury to a muscle, tendon or muscle/tendon junction;
 - (ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);
 - (iii) biceps subluxation;
 - (iv) capsulitis and bursitis;
 - (v) a mass, including a ganglion;
 - (vi) an occult fracture;
 - (vii) acromioclavicular joint pathology; and
- (b) the service is not performed in conjunction with a service mentioned in item 55867 (NR)

Indication: This item should be used for ultrasound scans of the shoulder or upper arm or both the shoulder and upper arm where either the left or right shoulder/upper arm is scanned. The bilateral item 55867 should be used where both the left and right shoulders/upper arms are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 \$36.00

New item – 55866 Musculo-skeletal ultrasound shoulder/upper arm – bilateral (R)

Overview: This item replaces item 55808, which has been deleted.

Service/Descriptor: Shoulder or upper arm, or both, left and right, ultrasound scan of, if

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) an injury to a muscle, tendon or muscle/tendon junction;
 - (ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);
 - (iii) biceps subluxation;
 - (iv) capsulitis and bursitis;
 - (v) a mass, including a ganglion;
 - (vi) an occult fracture;
 - (vii) acromioclavicular joint pathology; and
- (b) the service is not performed in conjunction with a service mentioned in item 55864 (R)



Indication: This item should be used for ultrasound scans of the shoulder or upper or both the shoulder and upper arm where either both the left and right shoulders/upper arms are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55867 Musculo-skeletal ultrasound shoulder/upper arm – bilateral (NR)

Overview: This item replaces item 55810, which has been deleted.

Service/Descriptor: Shoulder or upper arm, or both, left or right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) an injury to a muscle, tendon or muscle/tendon junction;
 - (ii) rotator cuff tear, calcification or tendinosis (biceps, subscapular, supraspinatus or infraspinatus);
 - (iii) biceps subluxation;
 - (iv) capsulitis and bursitis;
 - (v) a mass, including a ganglion;
 - (vi) an occult fracture;
 - (vii) acromioclavicular joint pathology; and
- (b) the service is not performed in conjunction with a service mentioned in item 55865 (NR)

Indication: This item should be used for ultrasound scans of the shoulder or upper or both the shoulder and upper arm where either the both the left and right shoulders/upper arms are scanned, that is a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55868 Musculo-skeletal ultrasound hip/groin – unilateral (R)

Overview: This item replaces item 55816, which has been deleted.

Service/Descriptor: Hip or groin, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55870 (R)

Indication: This item should be used for ultrasound scans of the hip or groin or both the hip and groin where either the left or right hip/groin is scanned. The bilateral item 55870 should be used where both the left and right hips/groins are scanned.



Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55869 Musculo-skeletal ultrasound hip/groin – unilateral (NR)

Overview: This item replaces item 55818, which has been deleted.

Service/Descriptor: Hip or groin, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55871 (NR)

Indication: This item should be used for ultrasound scans of the hip or groin or both the hip and groin where either the left or right hip/groin is scanned. The bilateral item 55871 should be used where both the left and right hips/groins are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55870 Musculo-skeletal ultrasound hip/groin – bilateral (R)

Overview: This item replaces item 55808, which has been deleted.

Service/Descriptor: Hip or groin, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55868 (R)

Indication: This item should be used for ultrasound scans of the hip or groin or both the hip and groin where both the left and right hips/groins are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55871 Musculo-skeletal ultrasound hip/groin – bilateral (NR)

Overview: This item replaces item 55810, which has been deleted.

Service/Descriptor: Hip or groin, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55869 (NR).

Indication: This item should be used for ultrasound scans of the hip or groin or both the hip and groin where both the left and right hips/groins are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.



MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55872 Musculo-skeletal ultrasound paediatric hip examination – unilateral (R)

Overview: This item replaces item 55820, which has been deleted.

Service/Descriptor: Paediatric hip examination for dysplasia, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55874 (R)

Indication: This item should be used for ultrasound scans of either the left or right hip for dysplasia in paediatric patients. The bilateral item 55874 should be used where both hips are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55873 Musculo-skeletal ultrasound paediatric hip examination – unilateral (NR)

Overview: This item replaces item 55822, which has been deleted.

Service/Descriptor: Paediatric hip examination for dysplasia, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55875 (NR)

Indication: This item should be used for ultrasound scans of either the left or right hip for dysplasia in paediatric patients. The bilateral item 55875 should be used where both hips are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55874 Musculo-skeletal ultrasound paediatric hip examination – bilateral (R)

Overview: This item replaces item 55820, which has been deleted.

Service/Descriptor: Paediatric hip examination for dysplasia, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55872 (R)

Indication: This item should be used for ultrasound scans of both the left and right hips (that is, a bilateral scan) for dysplasia in paediatric patients.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.



MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55875 Musculo-skeletal ultrasound paediatric hip examination – bilateral (NR)

Overview: This item replaces item 55822, which has been deleted.

Service/Descriptor: Paediatric hip examination for dysplasia, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55873 (NR)

Indication: This item should be used for ultrasound scans of both the left and right hips (that is, a bilateral scan) for dysplasia in paediatric patients.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55876 Musculo-skeletal ultrasound buttock/thigh – unilateral (R)

Overview: This item replaces item 55824, which has been deleted.

Service/Descriptor: Buttock or thigh, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55878 (R)

Indication: This item should be used for ultrasound scans of the buttock or thigh or both buttock and thigh where either the left or right buttock/thigh is scanned. The bilateral item 55878 should be used where both the left and right buttocks/thighs are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55877 Musculo-skeletal ultrasound buttock/thigh – unilateral (NR)

Overview: This item replaces item 55826, which has been deleted.

Service/Descriptor: Buttock or thigh or both, left or right, one side, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55879 (NR)

Indication: This item should be used for ultrasound scans of the buttock or thigh or both buttock and thigh where either the left or right buttock/thigh is scanned. The bilateral item 55879 should be used where both the left and right buttocks/thighs are scanned.



Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55878 Musculo-skeletal ultrasound buttock/thigh – bilateral (R)

Overview: This item replaces item 55824, which has been deleted.

Service/Descriptor: Buttock or thigh, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55876 (R)

Indication: This item should be used for ultrasound scans of the buttock or thigh or both buttock and thigh where both the left or right buttocks/thighs are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55879 Musculo-skeletal ultrasound buttock/thigh – bilateral (NR)

Overview: This item replaces item 55822, which has been deleted.

Service/Descriptor: Buttock or thigh, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55877 (NR)

Indication: This item should be used for ultrasound scans of the buttock or thigh or both buttock and thigh where both the left or right buttocks/thighs are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55880 Musculo-skeletal ultrasound knee – unilateral (R)

Overview: This item replaces item 55828, which has been deleted.

Service/Descriptor: Knee, left or right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
- (i) abnormality of tendons or bursae about the knee;
 - (ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;
 - (iii) a nerve entrapment or a nerve or nerve sheath tumour;
 - (iv) an injury of collateral ligaments; and



(b) the service is not performed in conjunction with a service mentioned in item 55882 (R)

Indication: This item should be used for ultrasound scans of the knee where either the left or right knee is scanned. The bilateral item 55882 should be used where both the left and right knees are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55881 Musculo-skeletal ultrasound knee – unilateral (NR)

Overview: This item replaces item 55826, which has been deleted.

Service/Descriptor: Knee, left or right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) abnormality of tendons or bursae about the knee;
 - (ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;
 - (iii) a nerve entrapment or a nerve or nerve sheath tumour;
 - (iv) an injury of collateral ligaments; and
- (b) the service is not performed in conjunction with a service mentioned in item 55883 (NR)

Indication: This item should be used for ultrasound scans of the knee where either the left or right knee is scanned. The bilateral item 55883 should be used where both the left and right knees are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55882 Musculo-skeletal ultrasound knee – bilateral (R)

Overview: This item replaces item 55824, which has been deleted.

Service/Descriptor: Knee, left and right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) abnormality of tendons or bursae about the knee;
 - (ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;
 - (iii) a nerve entrapment or a nerve or nerve sheath tumour;
 - (iv) an injury of collateral ligaments; and
- (b) the service is not performed in conjunction with a service mentioned in item 55880 (R)



Indication: This item should be used for where both knees are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55883 Musculo-skeletal ultrasound knee – bilateral (NR)

Overview: This item replaces item 55830, which has been deleted.

Service/Descriptor: Knee, left and right, ultrasound scan of, if:

- (a) the service is used for the assessment of one or more of the following suspected or known conditions:
 - (i) abnormality of tendons or bursae about the knee;
 - (ii) a meniscal cyst, popliteal fossa cyst, mass or pseudomass;
 - (iii) a nerve entrapment or a nerve or nerve sheath tumour;
 - (iv) an injury of collateral ligaments; and
- (b) the service is not performed in conjunction with a service mentioned in item 55881 (NR)

Indication: This item should be used for where both knees are scanned, that is, a bilateral scan. .

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55884 Musculo-skeletal ultrasound lower leg – unilateral (R)

Overview: This item replaces item 55832, which has been deleted.

Service/Descriptor: Lower leg, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55886 (R)

Indication: This item should be used for ultrasound scans of the lower leg where either the left or right lower leg is scanned. The bilateral item 55886 should be used where both the left and right knees are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10.

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55885 Musculo-skeletal ultrasound lower leg – unilateral (NR)

Overview: This item replaces item 55834, which has been deleted.



Service/Descriptor: Lower leg, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55887 (NR)

Indication: This item should be used for ultrasound scans of the lower leg where either the left or right lower leg is scanned. The bilateral item 55887 should be used where both the left and right knees are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55886 Musculo-skeletal ultrasound lower leg – bilateral (R)

Overview: This item replaces item 55832, which has been deleted.

Service/Descriptor: Lower leg, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55884 (R)

Indication: This item should be used for where both the left and right lower legs are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55887 Musculo-skeletal ultrasound lower leg – bilateral (NR)

Overview: This item replaces item 55834, which has been deleted.

Service/Descriptor: Lower leg, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55885 (NR)

Indication: This item should be used for where both knees are scanned, that is, a bilateral scan. .

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55888 Musculo-skeletal ultrasound ankle/hind foot – unilateral (R)

Overview: This item replaces item 55836, which has been deleted.

Service/Descriptor: Ankle or hind foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55890 (R)



Indication: This item should be used for ultrasound scans of the ankle or hind foot or both the ankle and hind foot where either the left or right ankle/hind foot is scanned. The bilateral item 55890 should be used where both the left and right knees are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55889 Musculo-skeletal ultrasound ankle/hind foot – unilateral (NR)

Overview: This item replaces item 55838 which has been deleted.

Service/Descriptor: Ankle or hind foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55891 (NR)

Indication: This item should be used for ultrasound scans of the ankle or hind foot or both the ankle and hind foot where either the left or right ankle/hind foot is scanned. The bilateral item 55891 should be used where both the left and right knees are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00

New item – 55890 Musculo-skeletal ultrasound ankle/hind foot – bilateral (R)

Overview: This item replaces item 55836, which has been deleted.

Service/Descriptor: Ankle or hind foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55888 (R)

Indication: This item should be used for ultrasound scans of the ankle or hind foot or both where both the left and right ankles/feet are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55891 Musculo-skeletal ultrasound ankle/hind foot – bilateral (NR)

Overview: This item replaces item 55838, which has been deleted.



Service/Descriptor: Ankle or hind foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55889 (NR)

Indication: This item should be used for ultrasound scans of the ankle or hind foot or both where both the left and right ankles/feet are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

New item – 55892 Musculo-skeletal ultrasound mid/fore foot – unilateral (R)

Overview: This item replaces item 55840, which has been deleted.

Service/Descriptor: Mid foot or fore foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55894 (R)

Indication: This item should be used for ultrasound scans of the mid foot or fore foot or both the mid foot and fore foot and either the left or right mid foot/fore foot is scanned. The bilateral item 55894 should be used where both the left and right knees are scanned.

Other requirements: This item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$109.10

Benefit: 85% = \$92.75 Bulk billed benefit \$103.65

New item – 55893 Musculo-skeletal ultrasound mid foot/fore foot – unilateral (NR)

Overview: This item replaces item 55842 which has been deleted.

Service/Descriptor: Mid foot or fore foot, or both, left or right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55895 (NR)

Indication: This item should be used for ultrasound scans of the mid foot or fore foot or both the mid foot and fore foot and either the left or right mid foot/fore foot is scanned. The bilateral item 55895 should be used where both the left and right knees are scanned.

Other requirements: The item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$37.85

Benefit: 85% = \$32.20 Bulk billed benefit \$36.00



New item – 55894 Musculo-skeletal ultrasound mid foot/fore foot – bilateral (R)

Overview: This item replaces item 55840, which has been deleted.

Service/Descriptor: Mid foot or fore foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55892 (R)

Indication: This item should be used for ultrasound scans of the mid foot or fore foot of both where both the left and mid feet/fore feet are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$121.10

Benefit: 85% = \$102.95 Bulk billed benefit \$115.05

New item – 55895 Musculo-skeletal ultrasound mid foot/fore foot – bilateral (NR)

Overview: This item replaces item 55842, which has been deleted.

Service/Descriptor: Mid foot or fore foot, or both, left and right, ultrasound scan of, if the service is not performed in conjunction with a service mentioned in item 55893 (NR)

Indication: This item should be used for ultrasound scans of the mid foot or fore foot or both where both the left and mid feet/fore feet are scanned, that is, a bilateral scan.

Other requirements: The unilateral scan item cannot be claimed twice in place of the bilateral scan item.

MBS fee: \$42.00.

Benefit: 85% = \$35.70 Bulk billed benefit \$39.90

Deleted items – items 55800-55810 55816-55842 and all the NK ultrasound items

To view previous item descriptors and deleted items, visit MBS Online at www.mbsonline.gov.au, navigate to 'Downloads' and then select the relevant time period at the bottom of the page. The old items can then be viewed by downloading the MBS files published in the month before implementation of the changes

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the Last updated date shown below, and does not account for MBS changes since that date.