



APP Opportunities



# APP WEBINAR SERIES

## BREAST IMAGING

## Moderators



**Niki Demos, PA-C**

Memorial Sloan Kettering  
Cancer Center, New York, NY



**Beth Rudge, MSN, CRNP,**

**WHNP-BC, CBCN**

UPMC Hillman Cancer Center  
Carlisle, PA

# Chat

Please introduce yourself in the chat. We'd love to hear where you're from and what type of practice you work in.

# Questions

Please submit your questions using Q&A.

Questions will be answered at the end of the presentations.

This lecture is being recorded and will be available in 48 hours.

# APP Breast Certification Program

- The APP Breast Certification Program enrollment for the 2025-2026 cohort is open.
- Visit <https://www.breastsurgeons.org/certification/app/> to apply or scan the QR code to begin your application.
- Group discounts are available. Please contact Debra Sudol at [dsudol@breastsurgeons.org](mailto:dsudol@breastsurgeons.org) for more information.



# APP Focused Webinars

Quarterly basis

Second webinar coming September 2025

## Speakers



**Ashley Dowdy, PA-C**

West Cancer Center,  
Germantown, TN



**Katey Chappell, PA-C**

Baptist Medical Group – Memphis  
Breast Care, Memphis, TN



**Michael Berry, MD**

Margaret West Cancer Center,  
Germantown, TN  
President, American Society of Breast  
Surgeons

How It Works:  
APP/Physician Integration  
of Ultrasound in a Surgical Practice





# Tonight's Speakers

**Ashley Dowdy, PA-C**

West Cancer Center, Germantown, TN

**Katey Chappell, PA-C**

Baptist Medical Group – Memphis Breast Care, Memphis, TN

**Michael Berry, MD**

West Cancer Center, Germantown, TN

President, American Society of Breast Surgeons

# We will cover one model that works for our practice

- Clinic setting - Ashley
  - New patients
  - Established patients
  - Charting/billing
- Operating room setting - Katey
  - Role in OR
  - Role in hospital
  - Charting/billing

# Clinic Setting

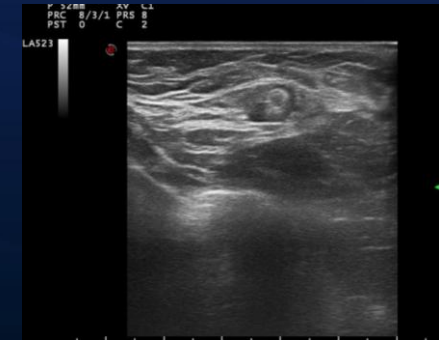
**NEW  
PATIENTS**

EXISTING  
PATIENTS

CHARTING /  
BILLING

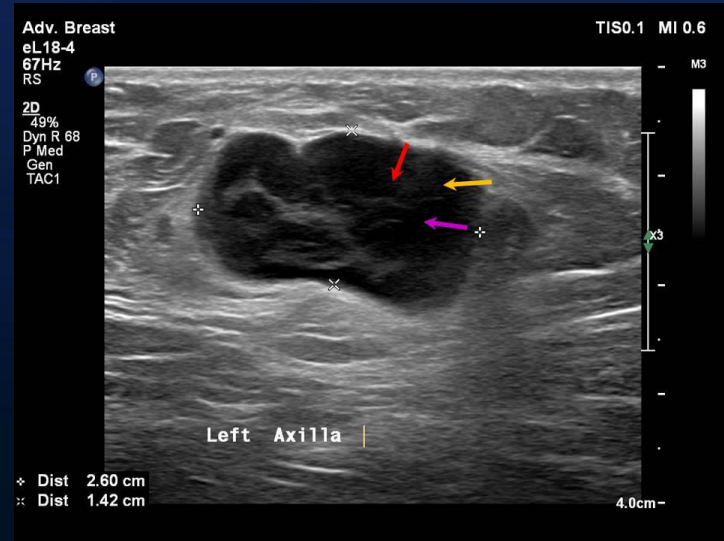
# New Cancer Discussion

Pre-op Ultrasound  
Evaluation for  
localization planning



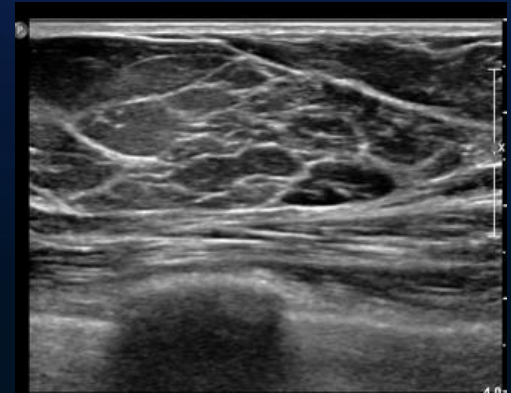
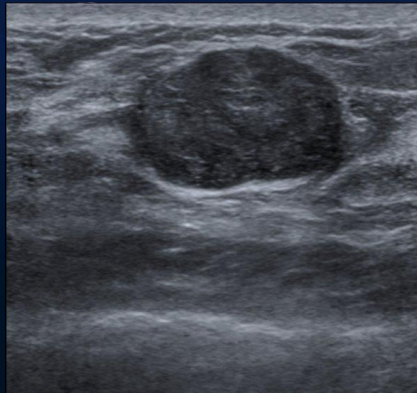
# New Cancer Discussion

## Axillary ultrasound for staging



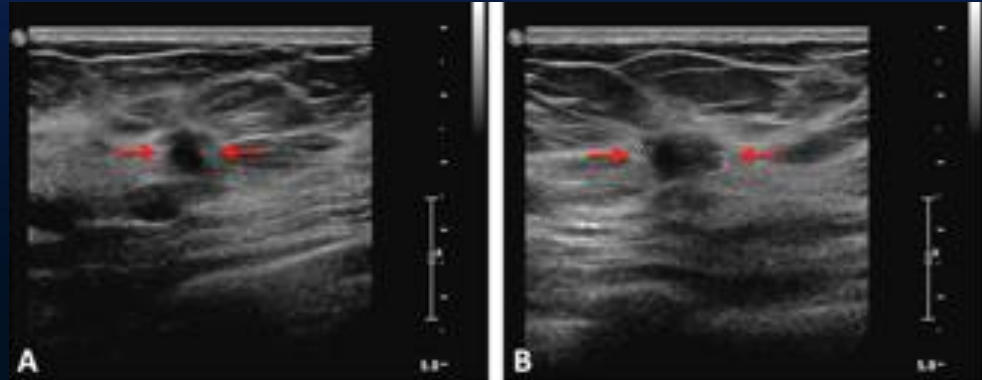
# New Patient c/o Lump

Cystic vs. Solid vs. Benign fibroglandular tissue



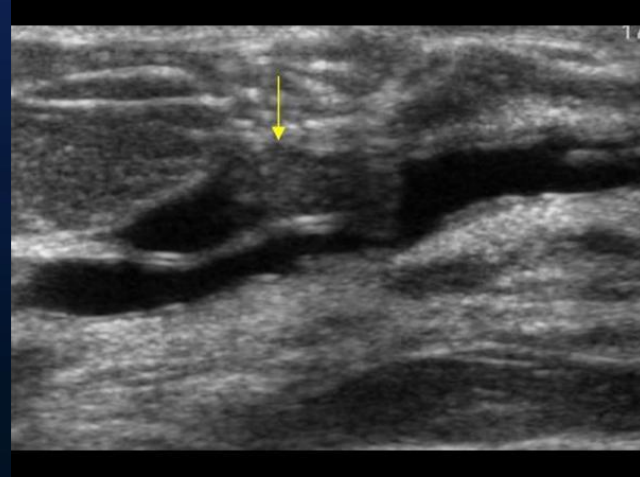
# Abnormal Outside Imaging

Ensure target can be re-identified for biopsy



# Pathologic Nipple Discharge

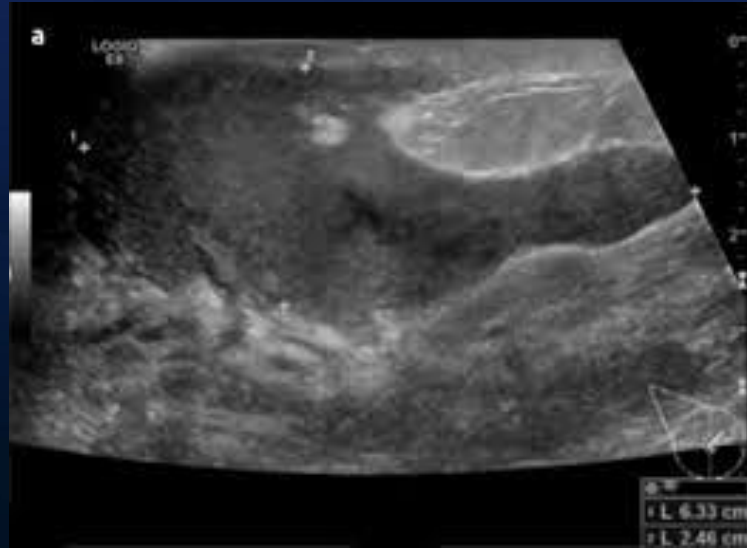
Is there an  
intraductal mass?





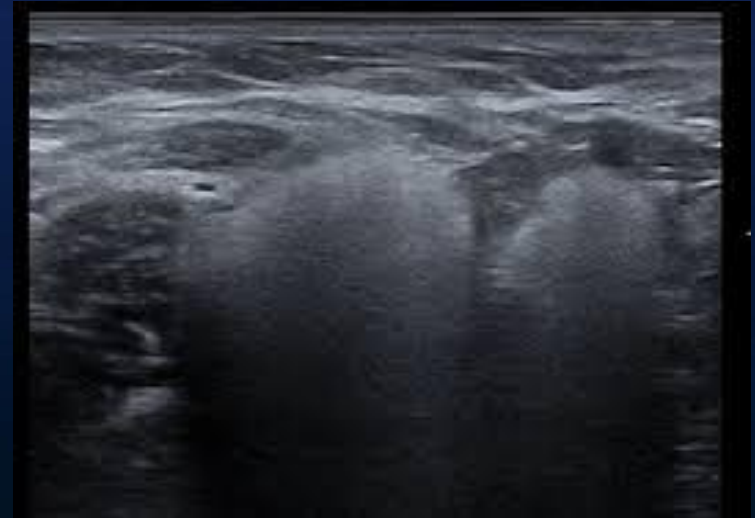
# Mastitis

Is there an  
abscess?



# New lump w/ history of Implants

Classic snowstorm  
appearance  
indicates rupture



# Clinic Setting

NEW  
PATIENTS

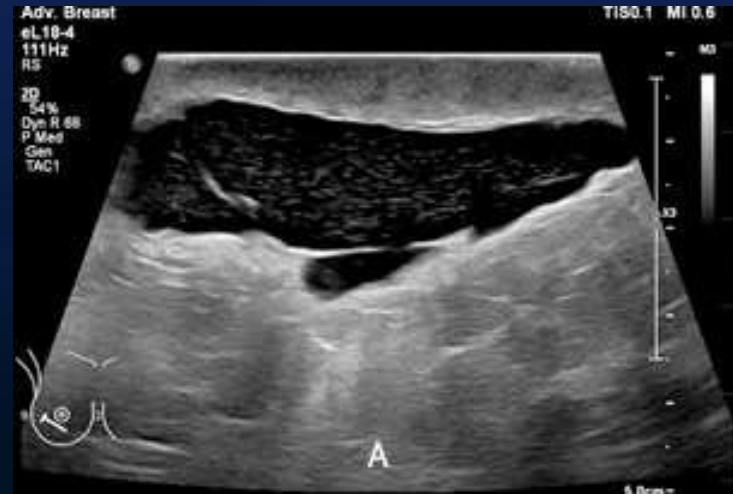
**EXISTING  
PATIENTS**

CHARTING /  
BILLING

# Postop

Seroma / Hematoma  
Evaluation and  
aspiration

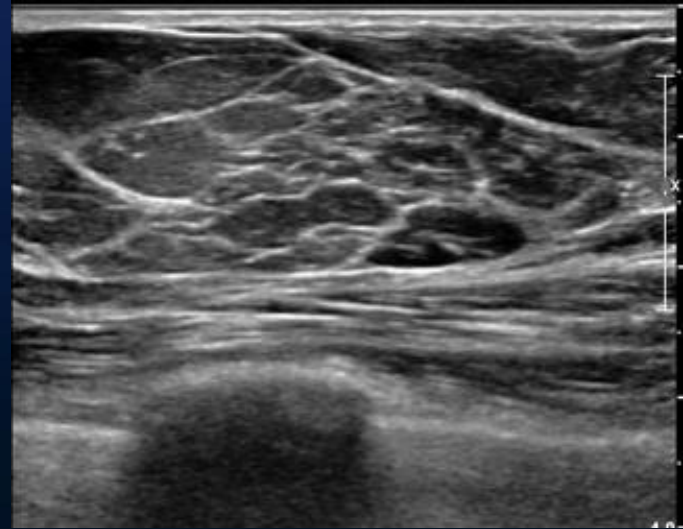
Lumpectomy Cavity  
evaluation for APBI -  
SAVI catheter



# Patient w/ new lump or pain

New Lump or Pain

Avoid formal imaging  
when normal



# Clinic Setting

NEW  
PATIENTS

EXISTING  
PATIENTS

**CHARTING /  
BILLING**

# Billing General Overview

## 1. CPT Codes for Breast Ultrasound:

- **CPT 76641:** Unilateral, complete breast ultrasound, including axilla.
- **CPT 76642:** Unilateral, limited breast ultrasound, including axilla.

## 2. Documentation Requirements:

- Ensure thorough documentation of the ultrasound procedure, including images and a written report detailing findings and impressions.
- Accurate coding and the use of appropriate modifiers are essential.

## 3. Reimbursement Policies:

- **Medicare:** APP's are reimbursed at 85% of the physician fee schedule for services provided.
- **Commercial Insurers:** Policies may vary; it's crucial to verify each payer's specific payment and coverage policy

# Ultrasound Codes

CPT Code

**76641**

Breast ultrasound,  
unilateral,  
complete

CPT Code

**76642**

Breast ultrasound,  
unilateral,  
limited

CPT Code

**76645**

Breast ultrasound,  
bilateral,  
complete

CPT Code

**76646**

Breast ultrasound,  
bilateral,  
limited

CPT Code

**76942**

Ultrasound  
guidance for  
biopsy or  
aspiration

CPT Code

**19000**

Aspiration of  
cyst of breast



# Modifiers: Technical vs. Profession Component

	<b>Technical Component (TC)</b> This refers to the performance of the ultrasound	<b>Professional Component (PC)</b> This is the interpretation and report of the imaging	<b>Global Billing</b>
<b>Who can bill for it?</b>	<i>A facility, imaging center, or provider who performs the scan but does not interpret it</i>	<i>Only a provider licensed to interpret diagnostic imaging (usually a radiologist or physician trained and credentialed for imaging )</i>	<i>If the same provider or practice performs both the scan and the interpretation</i>
<b>What is the billing example?</b>	<i>Use modifier -TC when billing only for the technical component.  Example CPT code: 76642-TC</i>	<i>Use modifier -26 for the professional component.  Example: 76642-26.</i>	<i>Bill the global code without modifiers  Example: 76642 (no modifiers)</i>

# Considerations for billing

Scope of practice: NP vs. PA

State differences

Payer differences

Institutional/Breast Center dependent

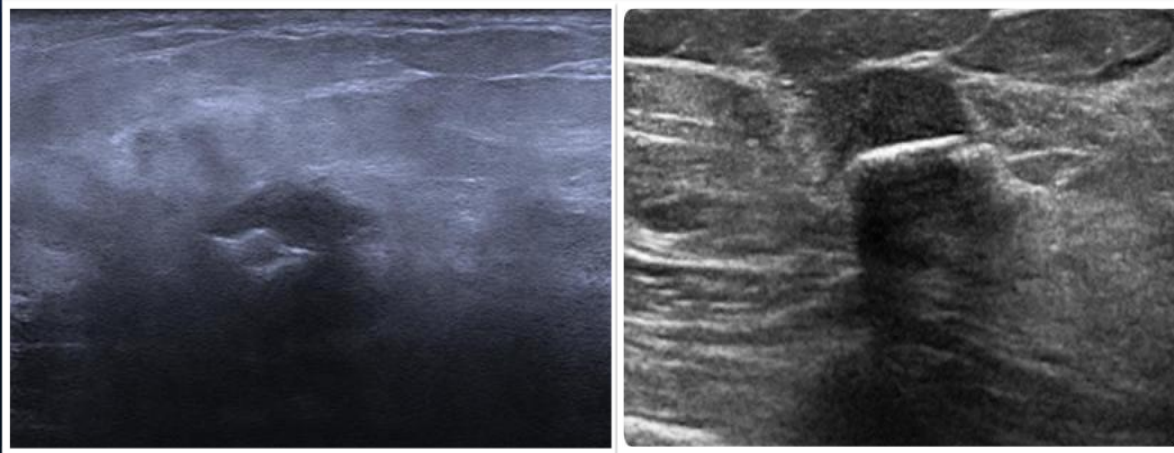
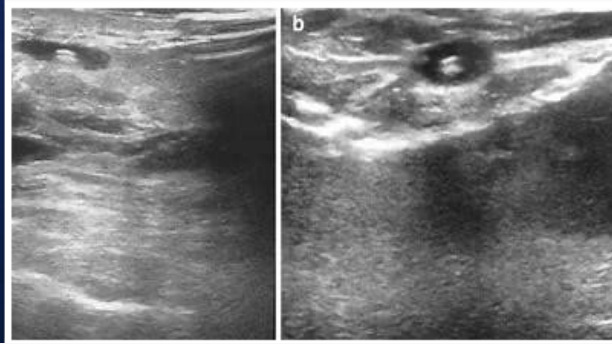
# APP Utilization of Ultrasound



# Utilization of Ultrasound in the OR

- Pre and intraoperative localization
- Intraoperative margin assessment
- Locating seroma cavity prior to re-excision of margins

# Sonographic Appearance of Clips



# Intraoperative Wire Placement: How It's Done



# Intraoperative Margin Assessment





# Seroma Cavity Identification





# APP Role in the OR - Billing

- Breast-specific CPT codes that will reimburse for FA
  - 19301 – partial mastectomy
  - 19302 – partial mastectomy with ALND
  - 19303 – mastectomy
  - 19307 – modified radical mastectomy
  - 36561 – port-a-cath placement
- \*\*Use Modifier AS (to bill for APP FA)

# APP Role in the OR - Billing

- Reimbursement
  - MD must include in the operative note the specific tasks the APP performed during the procedure

# Physician point of view

- Clinic
- OR

# Benefits of APP Clinical Involvement

- Improved efficiency
  - “Divide and conquer” initial patient evaluation or simulations clinics
    - Enhanced time management for surgeons
- Better patient experience and education
  - Comprehensive pre- and post-op care
    - Consistency in patient care delivery
- APPs as coordinators in multidisciplinary care

# Other APP opportunities within our clinic

- High Risk Clinic
- Long term surveillance/survivorship

# Benefits of APP Surgical Involvement

- Improved efficiency
  - Streamlined workflow in the OR
  - Enhanced time management for surgeons
- Better patient experience and education
  - Comprehensive pre- and post-op care
- Team collaboration
  - Consistency in patient care delivery with communication between surgical teams and nursing staff
  - APPs as key coordinators in multidisciplinary care

# Questions?