

Urology/ Nephrology

A comprehensive illustrated guide to coding
and reimbursement

2022

optum360coding.com

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SAMPLE

Getting Started with Coding Companion

Coding Companion for Urology/Nephrology is designed to be a guide to the specialty procedures classified in the CPT® book. It is structured to help coders understand procedures and translate physician narrative into correct CPT codes by combining many clinical resources into one, easy-to-use source book.

The book also allows coders to validate the intended code selection by providing an easy-to-understand explanation of the procedure and associated conditions or indications for performing the various procedures. As a result, data quality and reimbursement will be improved by providing code-specific clinical information and helpful tips regarding the coding of procedures.

CPT Codes

For ease of use, evaluation and management codes related to Urology/Nephrology are listed first in the *Coding Companion*. All other CPT codes in *Coding Companion* are listed in ascending numeric order. Included in the code set are all surgery, radiology, laboratory, and medicine codes pertinent to the specialty. Each CPT code is followed by its official CPT code description.

Resequencing of CPT Codes

The American Medical Association (AMA) employs a resequenced numbering methodology. According to the AMA, there are instances where a new code is needed within an existing grouping of codes, but an unused code number is not available to keep the range sequential. In the instance where the existing codes were not changed or had only minimal changes, the AMA assigned a code out of numeric sequence with the other related codes being grouped together. The resequenced codes and their descriptions have been placed with their related codes, out of numeric sequence.

CPT codes within the Optum360 *Coding Companion* series display in their resequenced order. Resequenced codes are enclosed in brackets for easy identification.

ICD-10-CM

Overall, the 10th revision goes into greater clinical detail than did ICD-9-CM and addresses information about previously classified diseases, as well as those diseases discovered since the last revision. Conditions are grouped with general epidemiological purposes and the evaluation of health care in mind. New features have been added, and conditions have been reorganized, although the format and conventions of the classification remain unchanged for the most part.

Detailed Code Information

One or more columns are dedicated to each procedure or service or to a series of similar procedures/services. Following the specific CPT code and its narrative, is a combination of features. A sample is shown on page ii. The black boxes with numbers in them correspond to the information on the pages following the sample.

Appendix Codes and Descriptions

Some CPT codes are presented in a less comprehensive format in the appendix. The CPT codes appropriate to the specialty are included in the appendix with the official CPT code description. The codes are presented in numeric order, and each code is followed by an easy-to-understand lay description of the procedure.

The codes in the appendix are presented in the following order:

- HCPCS
- Pathology and Laboratory
- Surgery
- Medicine Services
- Radiology
- Category III

Category II codes are not published in this book. Refer to the CPT book for code descriptions.

CCI Edit Updates

The *Coding Companion* series includes the list of codes from the official Centers for Medicare and Medicaid Services' National Correct Coding Policy Manual for Part B Medicare Contractors that are considered to be an integral part of the comprehensive code or mutually exclusive of it and should not be reported separately. The codes in the Correct Coding Initiative (CCI) section are from version XX.X, the most current version available at press time. The CCI edits are located in a section at the back of the book. Optum360 maintains a website to accompany the Coding Companions series and posts updated CCI edits on this website so that current information is available before the next edition. The website address is <http://www.optum360coding.com/ProductUpdates/>. The 2022 edition password is: XXXXXX22. Log in each quarter to ensure you receive the most current updates. An email reminder will also be sent to you to let you know when the updates are available.

Index

A comprehensive index is provided for easy access to the codes. The index entries have several axes. A code can be looked up by its procedural name or by the diagnoses commonly associated with it. Codes are also indexed anatomically. For example:

69501 Transmastoid antrotomy (simple mastoidectomy)
could be found in the index under the following main terms:

Antrotomy

Transmastoid, 69501

OR

Excision

Mastoid
Simple, 69501

General Guidelines

Providers

The AMA advises coders that while a particular service or procedure may be assigned to a specific section, it is not limited to use only by that specialty group (see paragraphs two and three under "Instructions for Use of the CPT Codebook" on page xiv of the CPT Book). Additionally, the procedures and services listed throughout the book are for use by any qualified physician or other qualified health care professional or entity (e.g., hospitals, laboratories, or home health agencies). Keep in mind that there may be other policies or guidance that can affect who may report a specific service.

Supplies

Some payers may allow physicians to separately report drugs and other supplies when reporting the place of service as office or other nonfacility setting. Drugs and supplies are to be reported by the facility only when performed in a facility setting.

Professional and Technical Component

Radiology and some pathology codes often have a technical and a professional component. When physicians do not own their own equipment and send their patients to outside testing facilities, they should append modifier 26 to the procedural code to indicate they performed only the professional component.

- C62.12 Malignant neoplasm of descended left testis ♂ ✓
- C63.01 Malignant neoplasm of right epididymis ♂ ✓
- C63.02 Malignant neoplasm of left epididymis ♂ ✓
- C63.11 Malignant neoplasm of right spermatic cord ♂ ✓
- C63.12 Malignant neoplasm of left spermatic cord ♂ ✓
- C63.2 Malignant neoplasm of scrotum ♂
- C63.7 Malignant neoplasm of other specified male genital organs ♂
- C63.8 Malignant neoplasm of overlapping sites of male genital organs ♂
- C66.1 Malignant neoplasm of right ureter ✓
- C66.2 Malignant neoplasm of left ureter ✓
- C67.0 Malignant neoplasm of trigone of bladder
- C67.1 Malignant neoplasm of dome of bladder
- C67.2 Malignant neoplasm of lateral wall of bladder
- C67.3 Malignant neoplasm of anterior wall of bladder
- C67.4 Malignant neoplasm of posterior wall of bladder
- C67.5 Malignant neoplasm of bladder neck
- C67.6 Malignant neoplasm of ureteric orifice
- C67.7 Malignant neoplasm of urachus
- C67.8 Malignant neoplasm of overlapping sites of bladder
- C68.0 Malignant neoplasm of urethra
- C68.1 Malignant neoplasm of paraurethral glands
- C77.5 Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes
- C79.89 Secondary malignant neoplasm of other specified sites
- C7A.093 Malignant carcinoid tumor of the kidney
- C7A.098 Malignant carcinoid tumors of other sites
- C7B.01 Secondary carcinoid tumors of distant lymph nodes
- C7B.09 Secondary carcinoid tumors of other sites
- D48.7 Neoplasm of uncertain behavior of other specified sites

AMA: 38770 2019, Feb, 8; 2014, Jan, 11

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
38770	14.06	7.21	1.95	23.22
Facility RVU	Work	PE	MP	Total
38770	14.06	7.21	1.95	23.22

	FUD	Status	MUE	Modifiers				IOM Reference
38770	90	A	1(2)	51	50	62*	80	None

* with documentation

Terms To Know

dissection. Separating by cutting tissue or body structures apart.

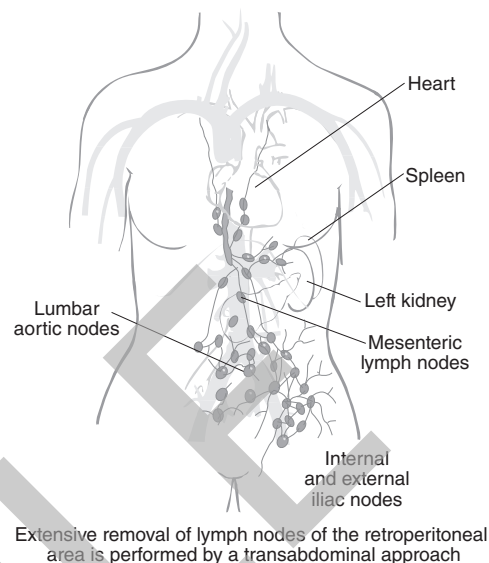
lymph nodes. Bean-shaped structures along the lymphatic vessels that intercept and destroy foreign materials in the tissue and bloodstream.

lymphadenectomy. Dissection of lymph nodes free from the vessels and removal for examination by frozen section in a separate procedure to detect early-stage metastases.

tissue. Group of similar cells with a similar function that form definite structures and organs. Tissue types include epithelial tissue, muscle tissue, connective tissue, and nervous tissue.

38780

38780 Retroperitoneal transabdominal lymphadenectomy, extensive, including pelvic, aortic, and renal nodes (separate procedure)



Explanation

The physician makes a large midline abdominal incision. The surrounding tissue, nerves, and blood vessels are dissected away, and the lymph nodes are visualized. The nodes are removed by group. Some surrounding tissues may also be removed. The wound is closed with sutures or staples.

Coding Tips

This separate procedure by definition is usually a component of a more complex service and is not identified separately. When performed alone or with other unrelated procedures/services it may be reported. If performed alone, list the code; if performed with other procedures/services, list the code and append modifier 59 or an X{EPSU} modifier. For open limited pelvic and retroperitoneal lymphadenectomy staging procedures, see 38562 and 38564. For laparoscopic lymphadenectomy, see 38571–38572.

ICD-10-CM Diagnostic Codes

- C48.0 Malignant neoplasm of retroperitoneum
- C48.1 Malignant neoplasm of specified parts of peritoneum
- C48.8 Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum
- C61 Malignant neoplasm of prostate ♂
- C62.11 Malignant neoplasm of descended right testis ♂ ✓
- C62.12 Malignant neoplasm of descended left testis ♂ ✓
- C64.1 Malignant neoplasm of right kidney, except renal pelvis ✓
- C64.2 Malignant neoplasm of left kidney, except renal pelvis ✓
- C65.1 Malignant neoplasm of right renal pelvis ✓
- C65.2 Malignant neoplasm of left renal pelvis ✓
- C66.1 Malignant neoplasm of right ureter ✓
- C66.2 Malignant neoplasm of left ureter ✓
- C67.0 Malignant neoplasm of trigone of bladder
- C67.1 Malignant neoplasm of dome of bladder
- C67.2 Malignant neoplasm of lateral wall of bladder
- C67.3 Malignant neoplasm of anterior wall of bladder

Q62.32 Cecoureterocele
 Q62.39 Other obstructive defects of renal pelvis and ureter

AMA: 50570 2018,Jan,8; 2017,Jan,8; 2016,Jan,13; 2015,Jan,16; 2014,Jan,11
 50572 2018,Jan,8; 2017,Jan,8; 2016,Jan,3; 2016,Jan,13; 2015,Jan,16; 2014,Jan,11
 50574 2018,Jan,8; 2017,Jan,8; 2016,Jan,3; 2016,Jan,13; 2015,Jan,16; 2014,Jan,11

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
50570	9.53	3.56	1.09	14.18
50572	10.33	3.83	1.18	15.34
50574	11.0	4.06	1.25	16.31
Facility RVU	Work	PE	MP	Total
50570	9.53	3.56	1.09	14.18
50572	10.33	3.83	1.18	15.34
50574	11.0	4.06	1.25	16.31

	FUD	Status	MUE	Modifiers				IOM Reference
50570	0	A	1(3)	51	50	N/A	80*	None
50572	0	A	1(3)	51	50	N/A	80*	
50574	0	A	1(2)	51	50	N/A	80*	

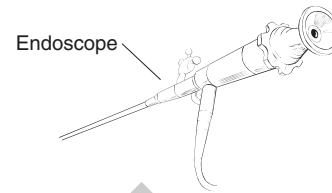
* with documentation

Terms To Know

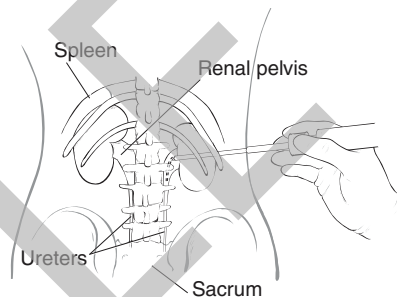
- balloon catheter.** Any catheter equipped with an inflatable balloon at the end to hold it in place in a body cavity or to be used for dilation of a vessel lumen.
- biopsy.** Tissue or fluid removed for diagnostic purposes through analysis of the cells in the biopsy material.
- catheterization.** Use or insertion of a tubular device into a duct, blood vessel, hollow organ, or body cavity for injecting or withdrawing fluids for diagnostic or therapeutic purposes.
- dilation.** Artificial increase in the diameter of an opening or lumen made by medication or by instrumentation.
- endoscopy.** Visual inspection of the body using a fiberoptic scope.
- flank.** Part of the body found between the posterior ribs and the uppermost crest of the ilium, or the lateral side of the hip, thigh, and buttock.
- irrigation.** To wash out or cleanse a body cavity, wound, or tissue with water or other fluid.
- nephrotomy.** Incision into the body of the kidney.
- pyelotomy.** Incision or opening made into the renal pelvis.

50575

50575 Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with endopyelotomy (includes cystoscopy, ureteroscopy, dilation of ureter and ureteral pelvic junction, incision of ureteral pelvic junction and insertion of endopyelotomy stent)



A variety of procedures are performed endoscopically through an incision into the kidney or renal pelvis



Explanation

The physician examines the kidney and ureter with an endoscope passed through an incision in the kidney (nephrotomy) or renal pelvis (pyelotomy), and dilates ureter and ureteropelvic junction. After accessing the renal and ureteric structures with an incision in the skin of the flank, the physician incises the kidney or renal pelvis and guides the endoscope through the incision. To better view renal and ureteric structures, the physician may flush (irrigate) or introduce by drops (instillate) a saline solution. The physician may introduce contrast medium for radiologic study of the renal pelvis and ureter (ureteropyelogram). For endopyelotomy, the physician places endoscope through the ureter and/or the pelvis, incises the pelvis, enlarges the ureteropelvic junction, and sutures the junction as in a Y-V pyeloplasty. The physician inserts the stent through the renal pelvis into the junction, sutures the incisions, inserts a drain tube, and performs a layered closure.

Coding Tips

Other open renal endoscopy procedures include examination (50570), ureteral catheterization (50572), biopsy (50574), fulguration/incision (50576), and removal of a foreign body or calculus (50580). If the nephrotomy or pyelotomy is done for an additional, significantly identifiable endoscopic service, report both the appropriate endoscopic procedure code (50570–50580) and 50045 or 50120. For percutaneous renal endoscopic procedures (through established nephrostomy/pyelostomy), see 50551–50562.

ICD-10-CM Diagnostic Codes

- C64.1 Malignant neoplasm of right kidney, except renal pelvis
- C64.2 Malignant neoplasm of left kidney, except renal pelvis
- C65.1 Malignant neoplasm of right renal pelvis
- C65.2 Malignant neoplasm of left renal pelvis
- C79.01 Secondary malignant neoplasm of right kidney and renal pelvis
- C79.02 Secondary malignant neoplasm of left kidney and renal pelvis
- C7A.093 Malignant carcinoid tumor of the kidney

C67.6	Malignant neoplasm of ureteric orifice
C67.8	Malignant neoplasm of overlapping sites of bladder
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes
C79.11	Secondary malignant neoplasm of bladder
D09.0	Carcinoma in situ of bladder
D30.3	Benign neoplasm of bladder
D41.4	Neoplasm of uncertain behavior of bladder
D49.4	Neoplasm of unspecified behavior of bladder
N30.10	Interstitial cystitis (chronic) without hematuria
N30.11	Interstitial cystitis (chronic) with hematuria

AMA: 51580 2014,Jan,11 51585 2014,Jan,11

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
51580	35.37	15.35	4.04	54.76
51585	39.64	16.79	4.53	60.96
Facility RVU	Work	PE	MP	Total
51580	35.37	15.35	4.04	54.76
51585	39.64	16.79	4.53	60.96

	FUD	Status	MUE	Modifiers				IOM Reference
51580	90	A	1(2)	51	N/A	62*	80	None
51585	90	A	1(2)	51	N/A	62*	80	

* with documentation

Terms To Know

chronic. Persistent, continuing, or recurring.

cystitis. Inflammation of the urinary bladder. Symptoms include dysuria, frequency of urination, urgency, and hematuria.

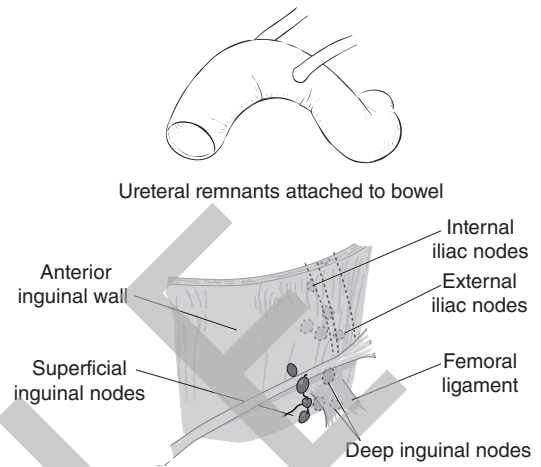
malignant. Any condition tending to progress toward death, specifically an invasive tumor with a loss of cellular differentiation that has the ability to spread or metastasize to other body areas.

secondary. Second in order of occurrence or importance, or appearing during the course of another disease or condition.

51590-51595

51590 Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including intestine anastomosis;

51595 with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes



Explanation

In 51590, the physician removes the bladder (cystectomy) and diverts urine by connecting the ureters to a ureteroileal conduit or sigmoid bladder with an opening into the skin. To access the bladder and ureters, the physician makes a midline incision in the skin of the abdomen and cuts the corresponding muscles, fat, and fibrous membranes (fascia). The physician dissects and ligates the hypogastric and vesical vessels, and severs the bladder from the ureters and urethra. Blunt dissection from adherent rectum, surrounding peritoneum, and vas deferens and prostate may be needed. After controlling bleeding, the physician diverts urine by connecting the ureters to a segment of ileal or sigmoid colon fashioned into a conduit or bladder, respectively, with an opening into the skin. To provide support during healing, the physician inserts a slender tube into each ureter. After completing the urinary diversion procedure, the physician inserts drain tubes and performs a layered closure. In 51595, the physician removes the bladder (cystectomy) and pelvic lymph nodes, and diverts urine by connecting the ureters to a ureteroileal conduit or sigmoid bladder with an opening into the skin and anastomoses the bowel as described above. The physician also removes external iliac, hypogastric, and obturator lymph nodes. After completing the urinary diversion procedure, the physician inserts drain tubes and performs a layered closure.

Coding Tips

For cystectomy, complete, with ureterosigmoidostomy or ureterocutaneous transplantations, see 51580; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes, see 51585. For ureteroileal or ureterocolon conduit alone (without cystectomy), see 50815 and 50820.

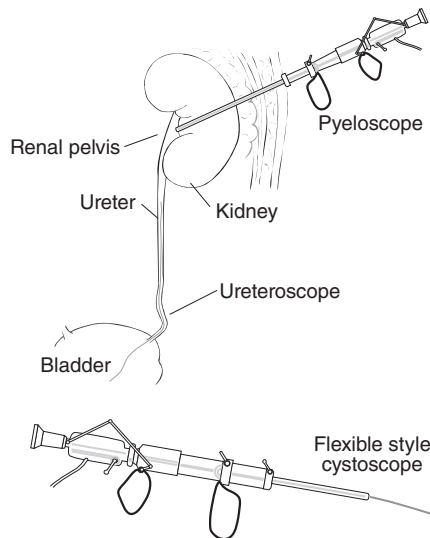
ICD-10-CM Diagnostic Codes

C67.0	Malignant neoplasm of trigone of bladder
C67.1	Malignant neoplasm of dome of bladder
C67.2	Malignant neoplasm of lateral wall of bladder
C67.3	Malignant neoplasm of anterior wall of bladder
C67.4	Malignant neoplasm of posterior wall of bladder
C67.5	Malignant neoplasm of bladder neck
C67.6	Malignant neoplasm of ureteric orifice

52351

52351 Cystourethroscopy, with ureteroscopy and/or pyeloscopy; diagnostic

Instrumentation is inserted first into the urethra and bladder and then deep into the ureter



A cystourethroscopy with ureteroscopy and/or pyeloscopy is performed for diagnostic purposes

Explanation

The physician examines the urinary collecting system for diagnostic purposes with endoscopes passed through the urethra into the bladder (cystourethroscope), ureter (ureteroscope), and renal pelvis (pyeloscope). After examination, the physician removes the endoscopes.

Coding Tips

Surgical cystourethroscopy always includes a diagnostic cystourethroscopy. To report imaging done in combination with this service, see 74485. Do not report 52351 with 52341–52346 or 52352–52356. For insertion of a self-retaining, indwelling stent performed during cystourethroscopic procedures, report 52332 in addition to the primary procedure performed (52320–52330, 52334–52352, 52354, 52355) and append modifier 51.

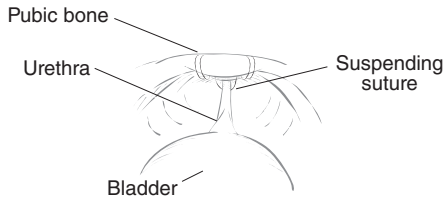
ICD-10-CM Diagnostic Codes

- C65.1 Malignant neoplasm of right renal pelvis ✓
- C65.2 Malignant neoplasm of left renal pelvis ✓
- C66.1 Malignant neoplasm of right ureter ✓
- C66.2 Malignant neoplasm of left ureter ✓
- C67.0 Malignant neoplasm of trigone of bladder
- C67.1 Malignant neoplasm of dome of bladder
- C67.2 Malignant neoplasm of lateral wall of bladder
- C67.3 Malignant neoplasm of anterior wall of bladder
- C67.4 Malignant neoplasm of posterior wall of bladder
- C67.5 Malignant neoplasm of bladder neck
- C67.6 Malignant neoplasm of ureteric orifice
- C67.7 Malignant neoplasm of urachus
- C67.8 Malignant neoplasm of overlapping sites of bladder
- C79.01 Secondary malignant neoplasm of right kidney and renal pelvis ✓
- C79.02 Secondary malignant neoplasm of left kidney and renal pelvis ✓

- C79.11 Secondary malignant neoplasm of bladder
- C79.19 Secondary malignant neoplasm of other urinary organs
- D09.0 Carcinoma in situ of bladder
- D09.19 Carcinoma in situ of other urinary organs
- D30.11 Benign neoplasm of right renal pelvis ✓
- D30.12 Benign neoplasm of left renal pelvis ✓
- D30.21 Benign neoplasm of right ureter ✓
- D30.22 Benign neoplasm of left ureter ✓
- D30.3 Benign neoplasm of bladder
- D41.11 Neoplasm of uncertain behavior of right renal pelvis ✓
- D41.12 Neoplasm of uncertain behavior of left renal pelvis ✓
- D41.21 Neoplasm of uncertain behavior of right ureter ✓
- D41.22 Neoplasm of uncertain behavior of left ureter ✓
- D41.4 Neoplasm of uncertain behavior of bladder
- D49.4 Neoplasm of unspecified behavior of bladder
- N11.0 Nonobstructive reflux-associated chronic pyelonephritis
- N11.1 Chronic obstructive pyelonephritis
- N11.8 Other chronic tubulo-interstitial nephritis
- N13.0 Hydronephrosis with ureteropelvic junction obstruction
- N13.1 Hydronephrosis with ureteral stricture, not elsewhere classified
- N13.2 Hydronephrosis with renal and ureteral calculous obstruction
- N13.39 Other hydronephrosis
- N13.4 Hydroureter
- N13.5 Crossing vessel and stricture of ureter without hydronephrosis
- N13.8 Other obstructive and reflux uropathy
- N20.0 Calculus of kidney
- N20.1 Calculus of ureter
- N20.2 Calculus of kidney with calculus of ureter
- N21.0 Calculus in bladder
- N22 Calculus of urinary tract in diseases classified elsewhere
- N28.82 Megaloureter
- N28.89 Other specified disorders of kidney and ureter
- N30.10 Interstitial cystitis (chronic) without hematuria
- N30.11 Interstitial cystitis (chronic) with hematuria
- N30.20 Other chronic cystitis without hematuria
- N30.21 Other chronic cystitis with hematuria
- N30.30 Trigonitis without hematuria
- N30.31 Trigonitis with hematuria
- N30.40 Irradiation cystitis without hematuria
- N30.41 Irradiation cystitis with hematuria
- N30.80 Other cystitis without hematuria
- N30.81 Other cystitis with hematuria
- N31.0 Uninhibited neuropathic bladder, not elsewhere classified
- N31.1 Reflex neuropathic bladder, not elsewhere classified
- N31.2 Flaccid neuropathic bladder, not elsewhere classified
- N31.8 Other neuromuscular dysfunction of bladder
- N32.0 Bladder-neck obstruction
- N32.1 Vesicointestinal fistula
- N32.2 Vesical fistula, not elsewhere classified
- N32.3 Diverticulum of bladder
- N32.81 Overactive bladder
- N32.89 Other specified disorders of bladder
- N33 Bladder disorders in diseases classified elsewhere

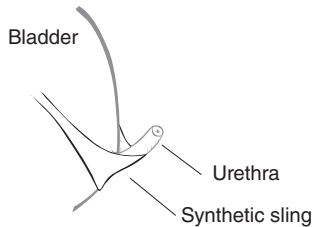
57287

57287 Removal or revision of sling for stress incontinence (eg, fascia or synthetic)



Overhead schematic showing suspension sutures (fascial suspension may also be found)

A synthetic or fascial sling for stress incontinence is revisited and revised or removed



Explanation

The physician removes or revises a fascial or synthetic sling previously placed to correct urinary stress incontinence. To remove a sling, the physician makes a small abdominal skin incision to the level of the rectus fascia and releases the arm of the sling from the rectus abdominis. The physician releases the sling's attachment to the junction of the urethra via canals or tunnels formed by an instrument or a finger placed through a vertical or flap incision in the vaginal wall. In revision of a sling the physician may remove and partially or completely replace the sling using fascia or a synthetic graft through an abdominal and vaginal approach. The sling may be revised by increasing the tension on the sling using suture at one or both of the attachment sites at the junction of the urethra and/or to the rectus abdominis muscle. At the end of the procedure the area is irrigated, and hemostasis is achieved. The abdominal and/or vaginal incisions are closed with layered suture.

Coding Tips

When 57287 is performed with another separately identifiable procedure, the highest dollar value code is listed as the primary procedure and subsequent procedures are appended with modifier 51. For initial sling operation, see 57288. For laparoscopic sling operation for stress incontinence, see 51992.

ICD-10-CM Diagnostic Codes

- N39.3 Stress incontinence (female) (male)
- T83.118A Breakdown (mechanical) of other urinary devices and implants, initial encounter
- T83.128A Displacement of other urinary devices and implants, initial encounter
- T83.198A Other mechanical complication of other urinary devices and implants, initial encounter
- T83.21XA Breakdown (mechanical) of graft of urinary organ, initial encounter
- T83.22XA Displacement of graft of urinary organ, initial encounter
- T83.23XA Leakage of graft of urinary organ, initial encounter

- T83.24XA Erosion of graft of urinary organ, initial encounter
- T83.25XA Exposure of graft of urinary organ, initial encounter
- T83.29XA Other mechanical complication of graft of urinary organ, initial encounter
- T83.81XA Embolism due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.82XA Fibrosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.83XA Hemorrhage due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.84XA Pain due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.85XA Stenosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.86XA Thrombosis due to genitourinary prosthetic devices, implants and grafts, initial encounter
- T83.89XA Other specified complication of genitourinary prosthetic devices, implants and grafts, initial encounter
- Z46.6 Encounter for fitting and adjustment of urinary device

AMA: 57287 2019,Jul,6; 2018,Jan,8; 2017,Jan,8; 2016,Jan,13; 2015,Jan,16; 2014,Jan,11

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
57287	11.15	8.02	1.51	20.68
Facility RVU	Work	PE	MP	Total
57287	11.15	8.02	1.51	20.68

	FUD	Status	MUE	Modifiers			IOM Reference	
57287	90	A	1(2)	51	N/A	62*	80	100-03,230.10

* with documentation

Terms To Know

approach. Method or anatomical location used to gain access to a body organ or specific area for procedures.

fascia. Fibrous sheet or band of tissue that envelops organs, muscles, and groupings of muscles.

flap. Mass of flesh and skin partially excised from its location but retaining its blood supply that is moved to another site to repair adjacent or distant defects.

graft. Tissue implant from another part of the body or another person.

hemostasis. Interruption of blood flow or the cessation or arrest of bleeding.

irrigate. Washing out, lavage.

sling operation. Procedure to correct urinary incontinence. A sling of fascia or synthetic material is placed under the junction of the urethra and bladder in females, or across the muscles surrounding the urethra in males.

stress incontinence. Involuntary escape of urine at times of minor stress against the bladder, such as coughing, sneezing, or laughing.

G0420-G0421

G0420 Face-to-face educational services related to the care of chronic kidney disease; individual, per session, per 1 hour

G0421 Face-to-face educational services related to the care of chronic kidney disease; group, per session, per 1 hour

Explanation

Face-to-face kidney disease education services provide patients with chronic kidney disease the information they need to manage concurrent health issues and to prevent complications. These services also include an explanation of the need to delay dialysis, as well as the treatment options available for renal replacement. These educational services may be done on an individual basis or in a group setting.

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
G0420	2.12	0.93	0.12	3.17
G0421	0.5	0.21	0.03	0.74
Facility RVU	Work	PE	MP	Total
G0420	2.12	0.93	0.12	3.17
G0421	0.5	0.21	0.03	0.74

76700-76705

76700 Ultrasound, abdominal, real time with image documentation; complete
76705 limited (eg, single organ, quadrant, follow-up)

Explanation

Diagnostic ultrasound is an imaging technique bouncing sound waves far above the level of human perception through interior body structures. The sound waves pass through different densities of tissue and reflect back to a receiving unit at varying speeds. The unit converts the waves to electrical pulses that are immediately displayed in picture form on screen. Real time scanning displays structure images and movement with time. Report 76700 for ultrasound and real time of the entire abdomen and 76705 for a single quadrant or organ of the abdomen.

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
76700	0.81	2.6	0.06	3.47
76705	0.59	1.94	0.04	2.57
Facility RVU	Work	PE	MP	Total
76700	0.81	2.6	0.06	3.47
76705	0.59	1.94	0.04	2.57

76770-76775

76770 Ultrasound, retroperitoneal (eg, renal, aorta, nodes), real time with image documentation; complete
76775 limited

Explanation

Diagnostic ultrasound is an imaging technique bouncing sound waves far above the level of human perception through interior body structures. The sound waves pass through different densities of tissue and reflect back to a receiving unit at varying speeds. The unit converts the waves to electrical pulses that are immediately displayed in picture form on screen. Real time scanning displays structure images and movement with time. Report 76770 for ultrasound and real time for a complete retroperitoneal exam that includes renal, aortic, and lymphatic structures and 76775 for a limited retroperitoneal exam.

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
76770	0.74	2.41	0.04	3.19
76775	0.58	1.04	0.04	1.66
Facility RVU	Work	PE	MP	Total
76770	0.74	2.41	0.04	3.19
76775	0.58	1.04	0.04	1.66

76776

76776 Ultrasound, transplanted kidney, real time and duplex Doppler with image documentation

Explanation

This code reports ultrasound of a transplanted kidney, with duplex Doppler studies. Diagnostic ultrasound is an imaging technique bouncing sound waves far above the level of human perception through interior body structures. The sound waves pass through different densities of tissue and reflect back to a receiving unit at varying speeds. The unit converts the waves to electrical pulses that are immediately displayed in picture form on screen. Duplex studies combine real time with Doppler, which uses the frequency shifts of the emitted waves against their echoes to measure velocity, such as for blood flow.

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
76776	0.76	3.58	0.07	4.41
Facility RVU	Work	PE	MP	Total
76776	0.76	3.58	0.07	4.41

76870

76870 Ultrasound, scrotum and contents

Explanation

Diagnostic ultrasound is an imaging technique bouncing sound waves far above the level of human perception through interior body structures. The sound waves pass through different densities of tissue and reflect back to a receiving unit at varying speeds. The unit converts the waves to electrical pulses that are immediately displayed in picture form on screen. This code reports ultrasonography of the scrotum and scrotal contents.

Relative Value Units/Medicare Edits

Non-Facility RVU	Work	PE	MP	Total
76870	0.64	2.28	0.04	2.96
Facility RVU	Work	PE	MP	Total
76870	0.64	2.28	0.04	2.96

76872-76873

76872 Ultrasound, transrectal;

76873 prostate volume study for brachytherapy treatment planning (separate procedure)

Explanation

Diagnostic ultrasound is an imaging technique bouncing sound waves far above the level of human perception through interior body structures. The sound waves pass through different densities of tissue and reflect back to a receiving unit at varying speeds. The unit converts the waves to electrical pulses that are immediately displayed in picture form on screen. Report 76872 for transrectal ultrasound or echography for either sex; Report 76873 for a prostate volume

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