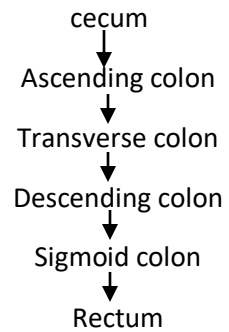


## 4 series (Digestive system)

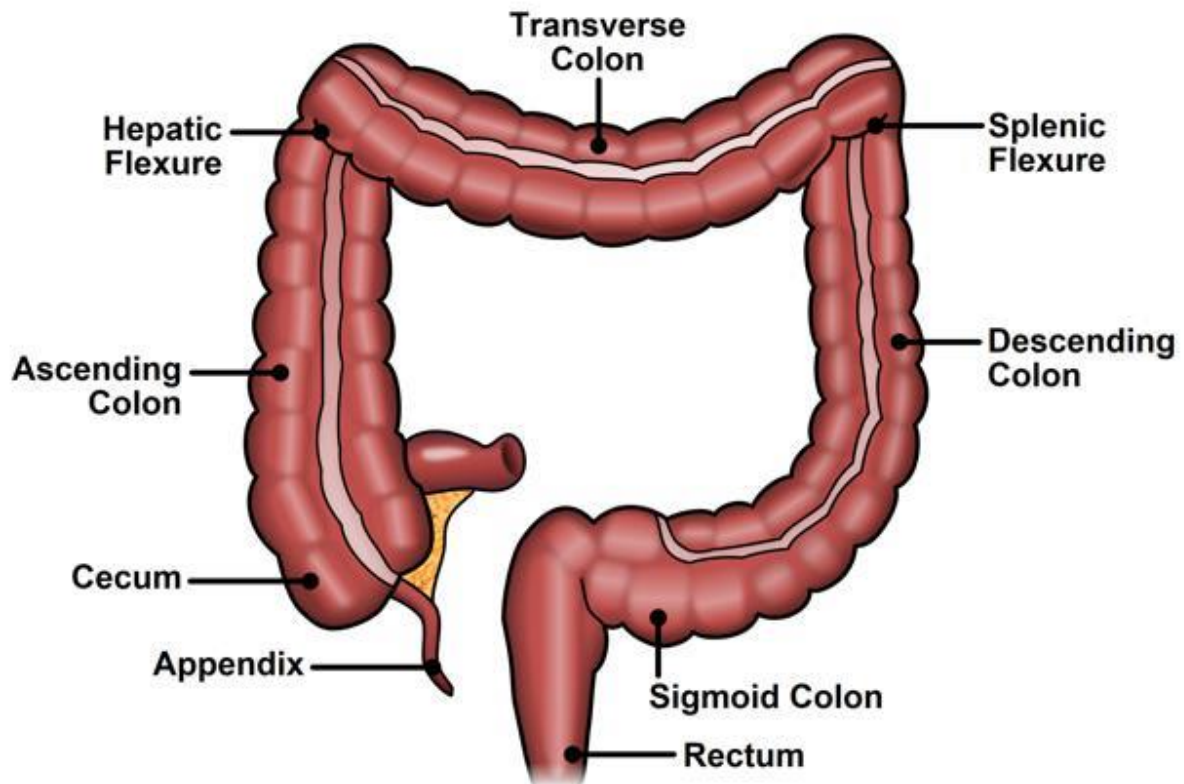
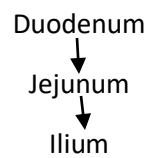
Colon parts & sequence

Small intestine & sequence

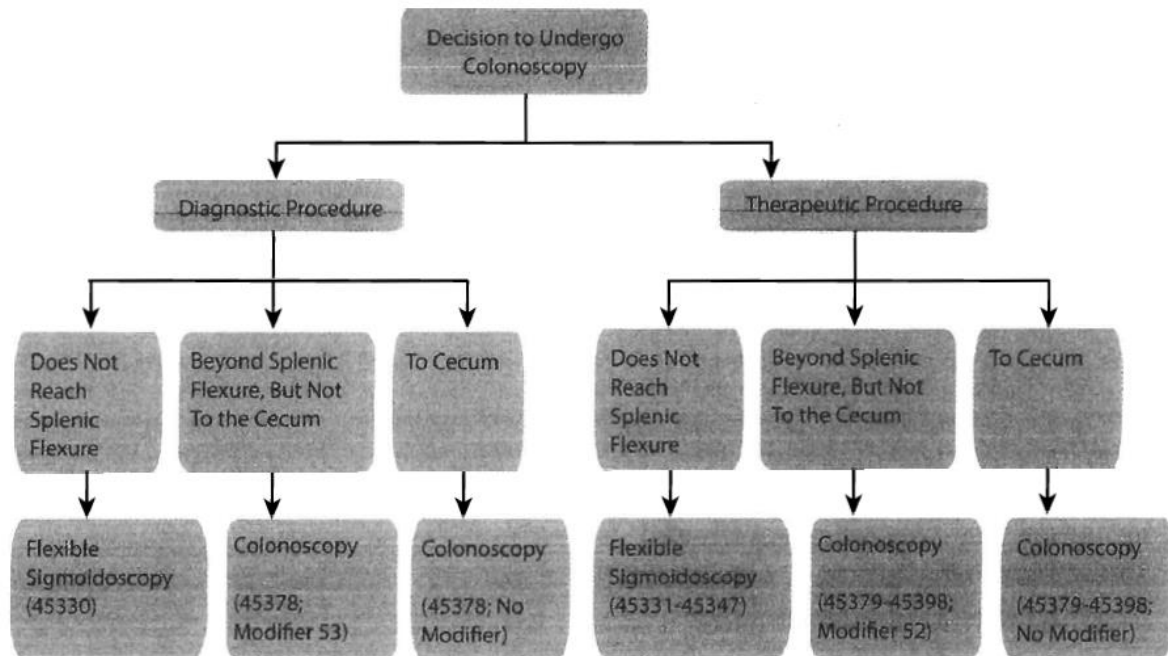
Colon parts started with



Small Intestine



## Colonoscopy Decision Tree



### Colonoscopy

#### Definition of Colonoscopy

Colonoscopy is the examination of the entire colon, from the rectum to the cecum, and may include the examination of the terminal ileum or small intestine proximal to an anastomosis. When performing a diagnostic or screening endoscopic procedure on a patient who is scheduled and prepared for a total colonoscopy, if the physician is unable to advance the colonoscope to the cecum or colon-small intestine anastomosis due to unforeseen circumstances, report 45378 (colonoscopy) or 44388 (colonoscopy through stoma) with modifier 53 and provide appropriate documentation.

1. Scope inserted rectum before reaching splenic flexure scope was cancelled or discontinued: then we have to give flexible sigmoidoscopy
2. Scope was inserted through rectum and it crossed splenic flexure after that in transverse or ascending colon scope was cancelled or discontinued
3. Scope was inserted rectum it finally reached cecum

### **Colonoscopic surgical**

- ➔ Colonoscopic with biopsy (some time they mention cold biopsy) -> 45380
- ➔ Colonoscopic with removal of foreign body-> 45379
- ➔ Colonoscopic with submucosal insertion -> 45381

Colonoscopy with removal of tumors, polyps or other lesions **45379-45398**

### **They are using 2 techniques**

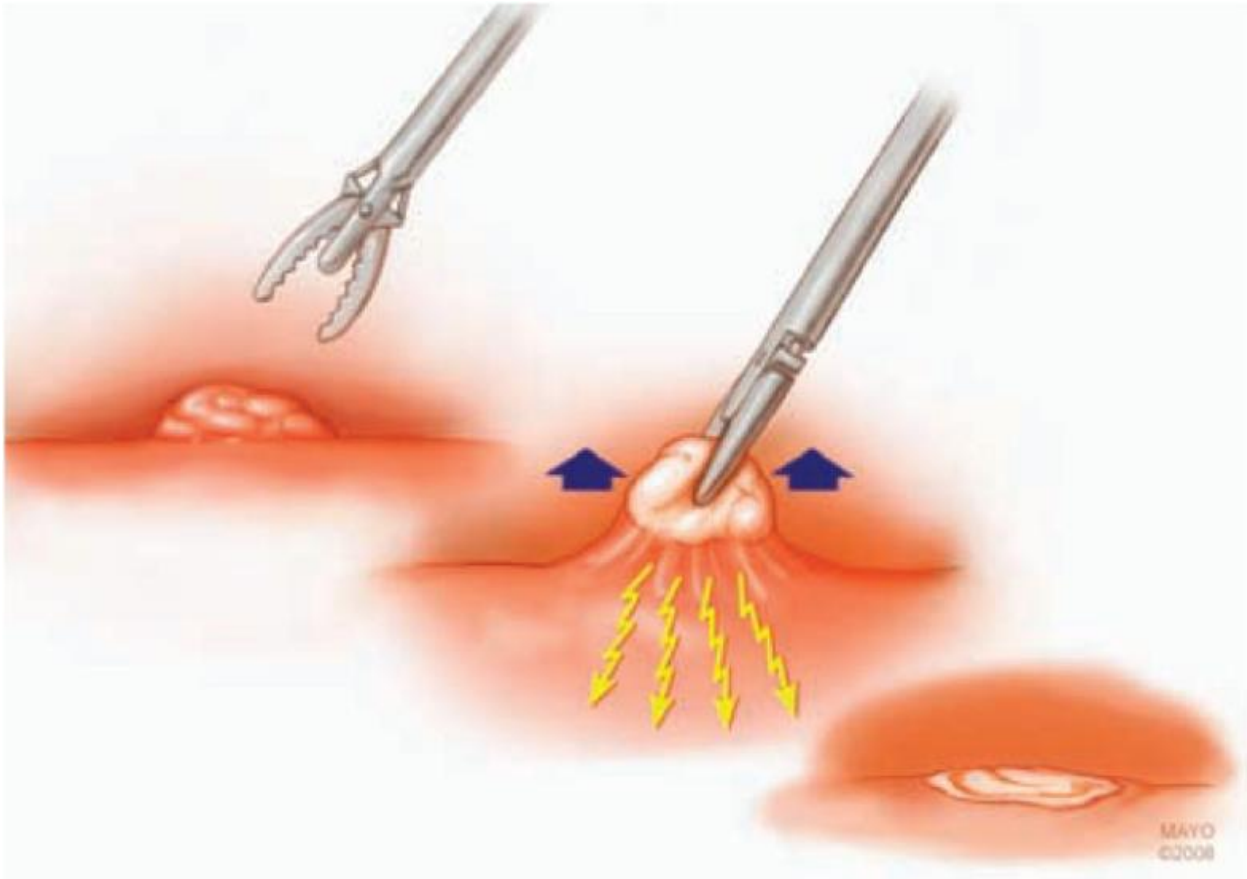
1. Hot biopsy forceps
2. Snare technique

### **Hot biopsy Forceps: 45384**

Uses mono polar current requiring grounding pad paste somewhere on the patient. The use hot forceps enables the provider to simultaneously excise the lesion and control bleeding.

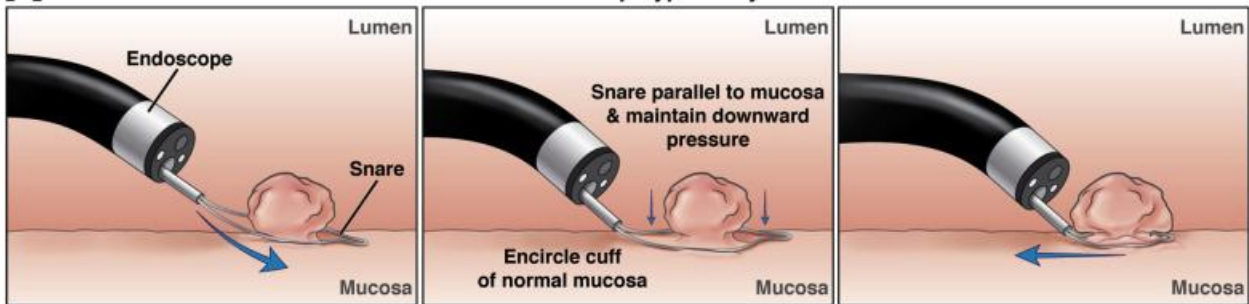
### **Snare technique: 45385**

A snare is a wire loop used to encircle tissue for removal rather than grasp tissue



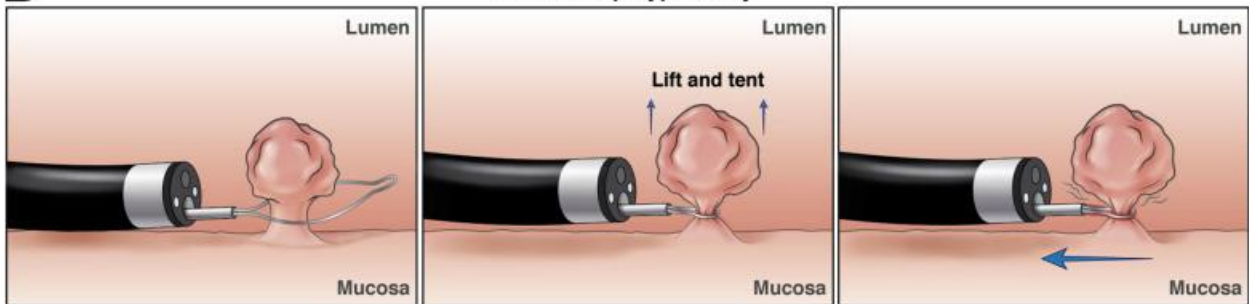
**A**

**Cold snare polypectomy**



**B**

**Hot snare polypectomy**



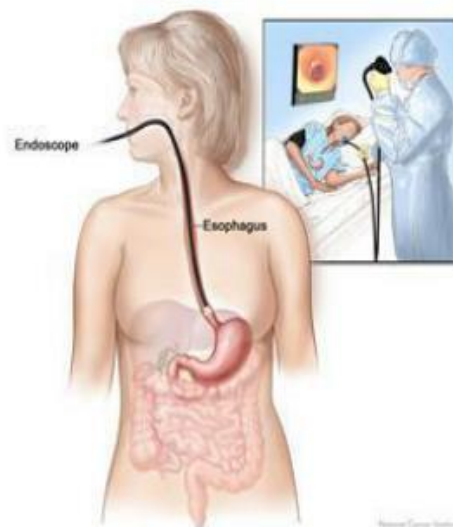
Example:

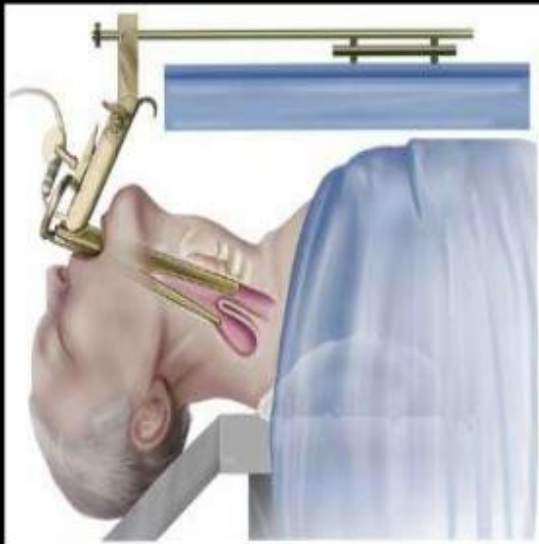
1. Patient is having 3 colon polyps in ascending colon. Colon polyps removed by colonoscopy with hot biopsy forceps?
  2. Patient is having 5 colon polyps in transverse colon. First 3 colon polyps removed by hot biopsy forceps and another 2 removed by snare tech?
  3. Colonoscopy with cold biopsy?
- ➔ Esophagoscopy:
  - ➔ Esophago gastroscopy:
  - ➔ Esophagogastroduodenoscopy

**Esophagoscopy:**

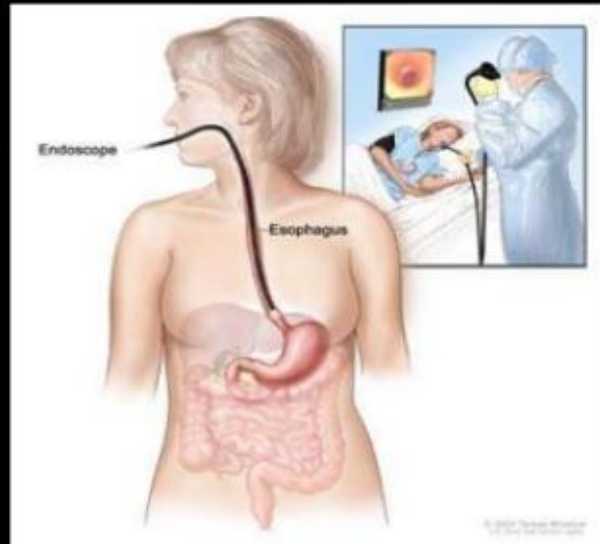
## Esophagoscopy

- direct visual examination of the esophagus with an esophagoscope. Esophagoscopy usually is done as a diagnostic procedure for the purpose of locating and inspecting a disorder of the esophagus





- **Rigid esophagoscopy**
- Transoral
- GA
- Instrumentation +



- **Flexible esophagoscopy**
- Transoral
- Topical /IV sedation
- Biopsy only

- Trans oral rigid 43180-43196
- Trans oral flexible 43200-43232
- Trans nasal Esophagoscopy flexible 43197-43198

Example:

1. Esophagoscopy Trans oral rigid with balloon dilation 20 mm diameter?
2. Esophagoscopy Trans oral flexible with balloon dilation 30 mm diameter?
3. Esophagoscopy, flexible, transoral with removal of tumor/polyps, or other lesion(s) by hot biopsy forceps

**Esophagogastroduodenoscopy**

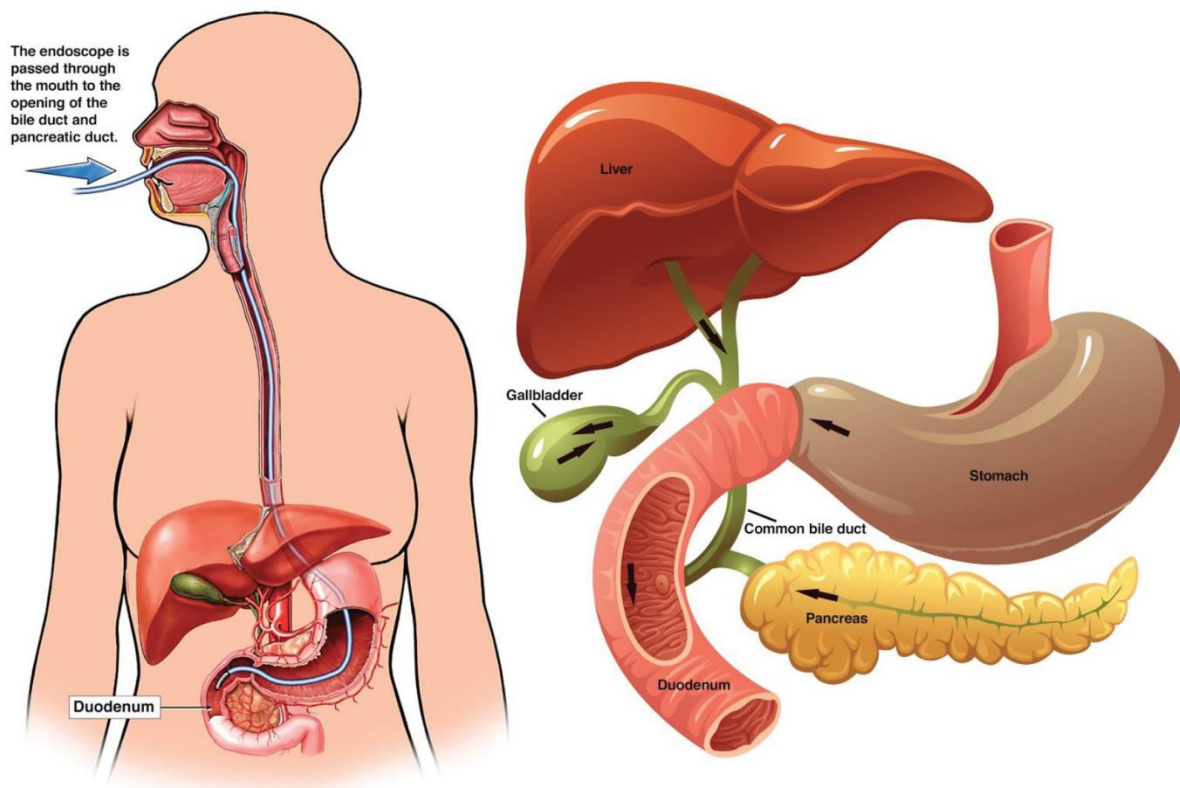


To report esophagogastrosocopy where the duodenum is deliberately not examined (eg, judged clinically not pertinent), or because the clinical situation precludes such exam (eg, significant gastric retention precludes safe exam of duodenum), append modifier 52 if repeat examination is not planned, or modifier 53 if repeat examination is planned.

- ➔ Repeat examination planned means: 53
- ➔ Repeat examination not planned: 52

1. EGD diagnostic with repeat exam planned?
2. EGD diagnostic with repeat exam not planned?
3. EGD transoral with dilation of esophagus with balloon DILATION (30 mm) diameter?
4. Esophagogastroduodenoscopy, flexible, transoral with removal of tumor(s)/polyps (or other lesion(s) by snare technique?

ERCP:



## **Endoscopic Retrograde Cholangiopancreatography (ERCP)**

Examination of the hepato biliary system (pancreatic ducts, hepatic ducts, common bile ducts, duodenal papilla (Ampulla of Vater) and gall bladder (if present) is performed through a side-viewing flexible fiberoptic endoscope

### **ERCP with stent**

1. ERCP with stent placement
2. ERCP with stent removal
3. ERCP with stent exchange (replacement)
4. ERCP with 3 stent placement?
5. ERCP with 3 stent removal
6. ERCP with 3 stent exchange (Replacement)?

## **Tonsillectomy & adenoidectomy?**

### **Coding points:**

- ➔ First we have to look for what procedure MD performed
- ➔ Primary or secondary
- ➔ Age

### **Tonsillectomy & Adenoidectomy Both codes?**

42820 -> Tonsillectomy & Adenoidectomy; younger than age 12

42821 -> age 12 or over

42825 -> Tonsillectomy, primary or secondary; younger than age 12

42826 -> age 12 or over

42830 -> Adenoidectomy, primary, younger than age 12

42831 -> age 12 or over

42835 -> Adenoidectomy, secondary, younger than age 12

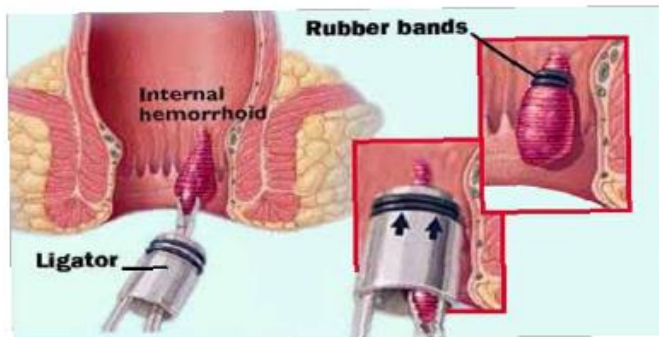
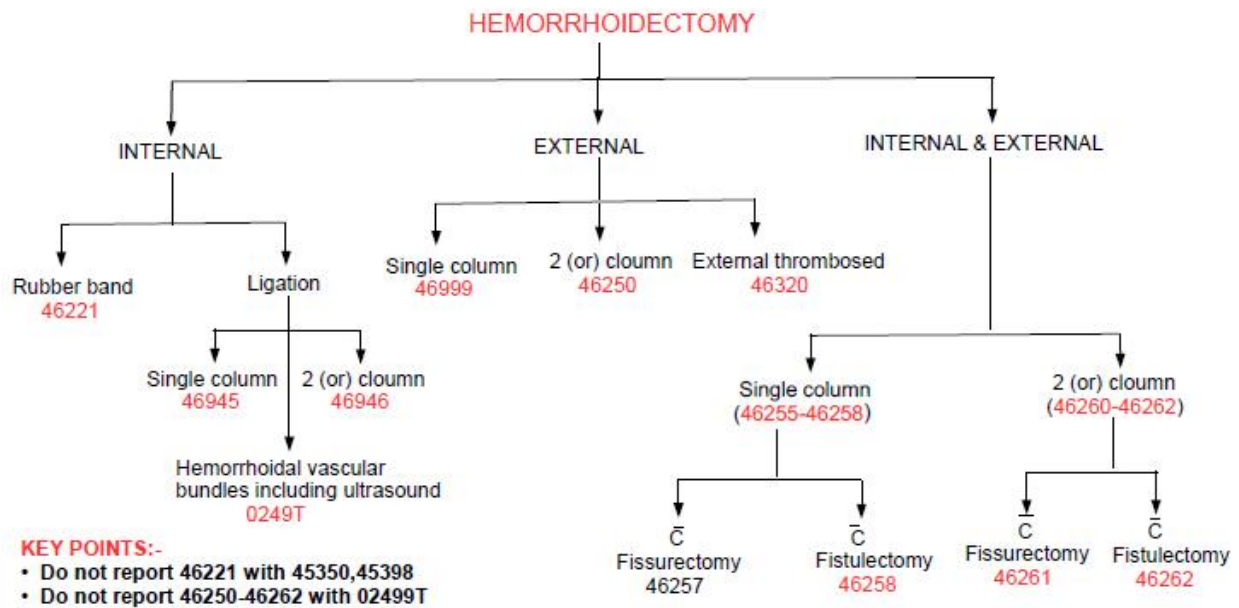
42836 -> age 12 or over

1. Patient is having Adenoiditis MD performed removal of remaining portion of the adenoids age is 10?

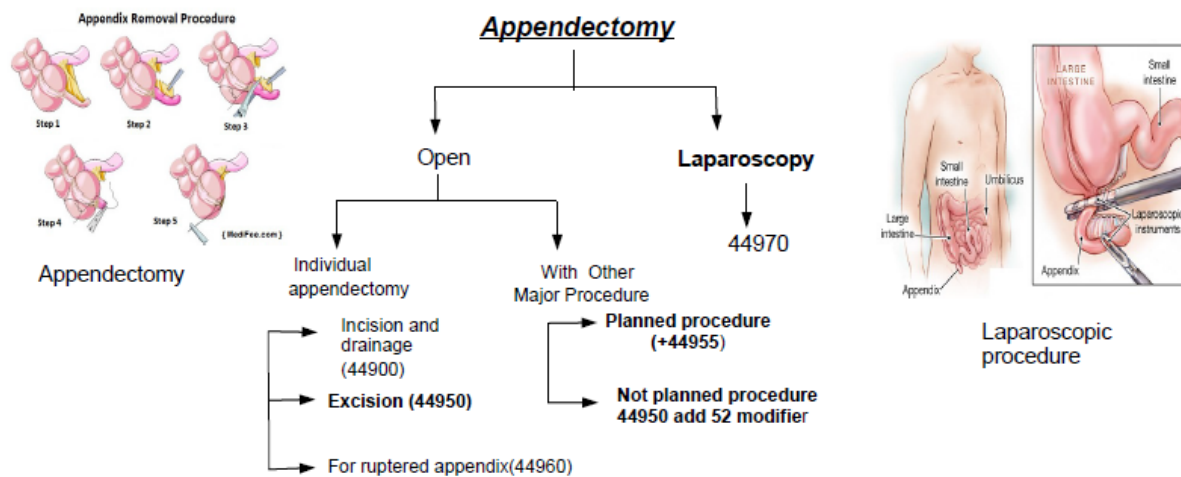


## Hemorrhoid:

Swollen or infected veins in the rectum and anus that cause discomfort and bleeding



1. Hemorrhoidectomy, internal by ligation other than rubber band; single hemorrhoid column
2. Hemorrhoidectomy, external, 3 columns
3. Hemorrhoidectomy, external, single columns
4. Hemorrhoidectomy, internal and external 2 column with fistulectomy along with fissurectomy

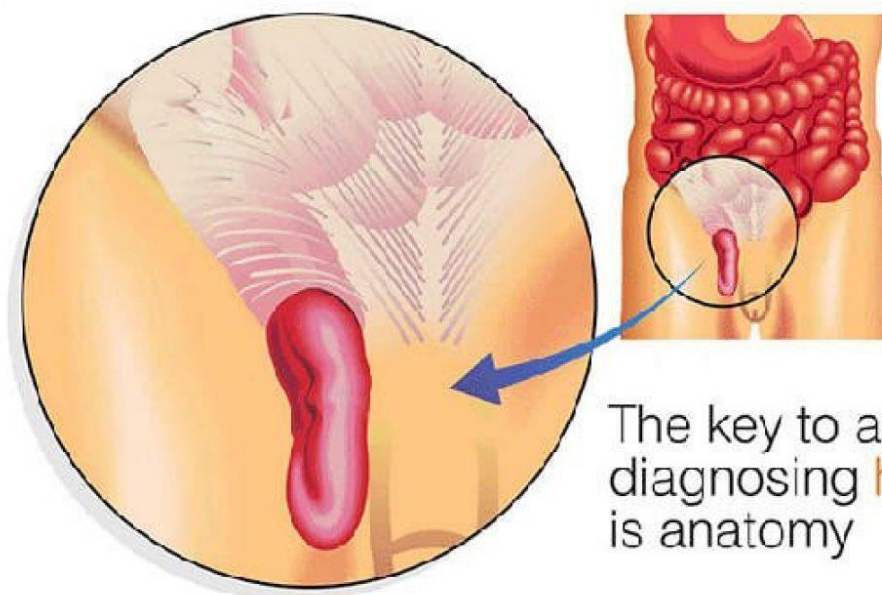


## Hernia:

Protrusion (prolapse) of organ from its origin

## Hernia repair:

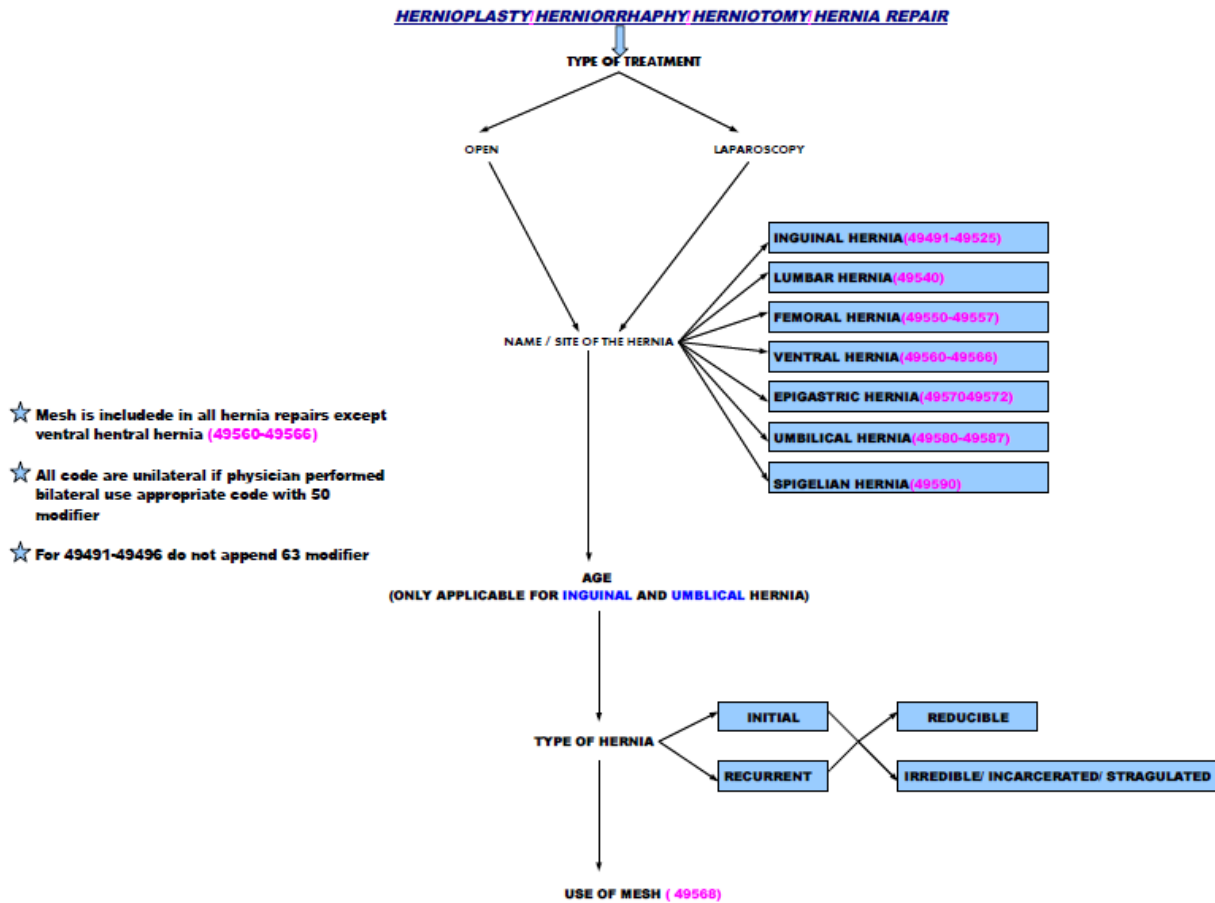
Physician will replace that to its original place and physician will place mesh under that hernia part to prevent recurrent hernia.



The key to accurately diagnosing **hernia** is anatomy

OPEN: 49491-49611,

LAP: 49650-49659

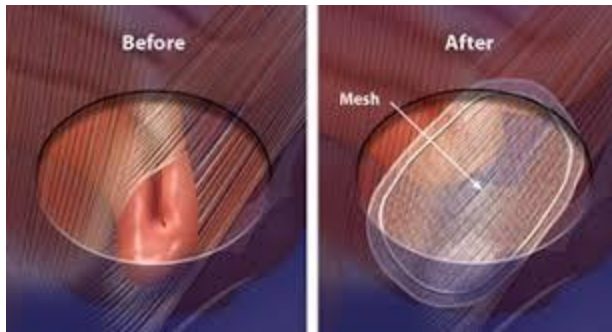


### Non – Reducible/Incarcerated/Strangulated

- ➔ Hernia with Obstruction
- ➔ Hernia with adhesion
- ➔ Hernia with omentum

### Mesh:

- ➔ Mesh is included in all procedures of hernia except open Incisional or ventral hernia
- ➔ 49560, 49561, 49565, 49566 = +49568



	Open code	Laparoscopic code
Femoral Initial reducible		
Ventral Initial reducible		
Incisional Initial reducible		
Inguinal Initial reducible 6yrs		
Epigastric Initial reducible		

1. Lumbar hernia with mesh initial reducible:
2. Spigelian hernia with mesh initial reducible:
3. Incisional hernia WITH ADHESION PRESENT with mesh PLACEMETN initial
4. Paraesophageal hernia with mesh by laparotomy:
5. Paraesophageal hernia with mesh by thoracotomy:
6. Paraesophageal hernia with mesh by thoracoabdominal:

#### General Questions:

1. Superficial abscess of anal region md performed I&D:
2. Inguinal strangulated hernia initial with mesh implantation? Pt. age is 7years:
3. Palatoplasty with cleft palate repair:
4. Biopsy of pancreas open: