

6 Series (Nervous System)

Chemodenervation:

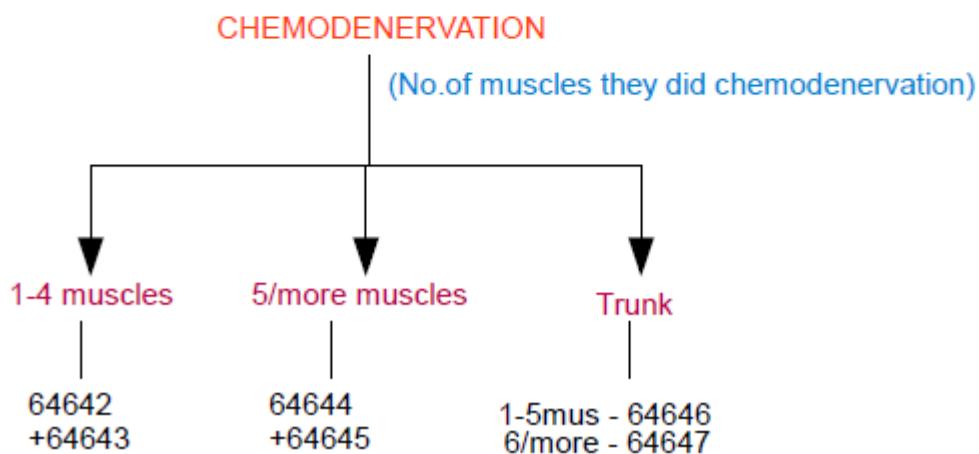
- Certain movement disorders such as dystonia and hemi facial spasm benefit from botulinum toxin injections selectively targeting the muscles that are affected

CHEMODENERVATION

(Destruction of nerve)

GUIDELINES:

- 1.Code for each extremity
- 2.No.of muscles
- 3.One base code & remaining are add on codes
- 4.First select highest level muscle,then one base &all are add on codes.

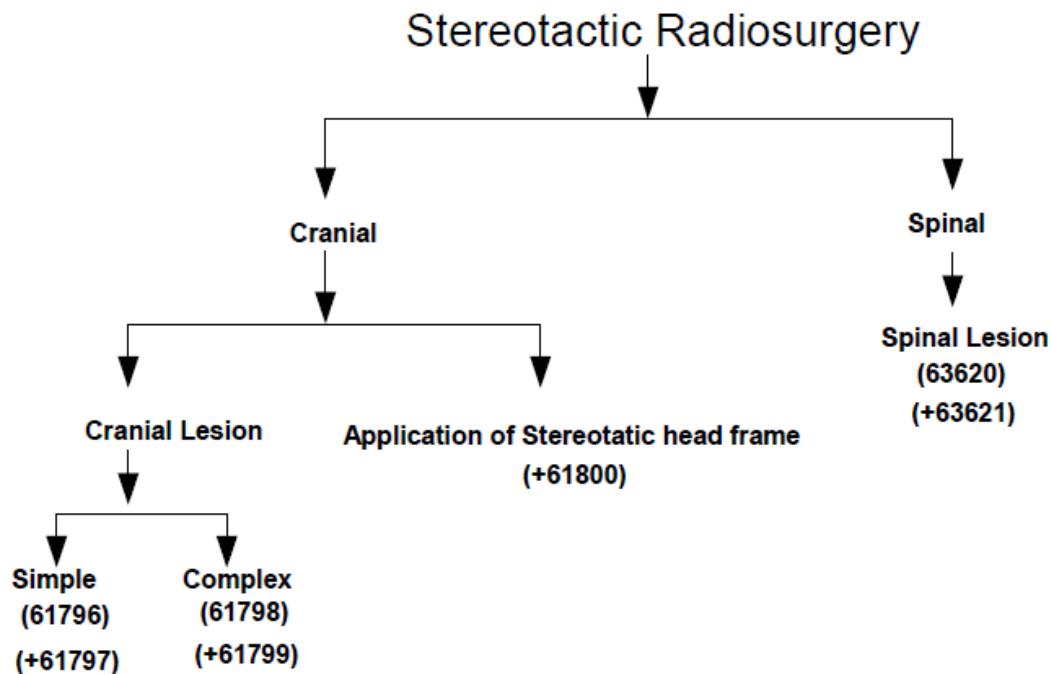


Example

1. Chemodenervation of both Axilla?
2. Chemodenervation of both hands?
3. Chemodenervation performed to
 - Right Upper Extremity -> 4
 - Right Lower Extremity -> 6
 - Left Upper Extremity -> 2
 - Left Lower Extremity -> 8
 - Trunk-8muscle

Stereotactic Radio Surgery

Definition: Stereotactic radiosurgery (SRS) treats brain disorders with a precise delivery of a single, high dose of radiation in a one-day session. Focused radiation beams are delivered to a specific area of the brain to treat abnormalities, tumors or functional disorders



GuideLines:

1, Simple:Less than 3.5cm

2, Complex:Greater than 3.5cm,Tumor expect otherwise specified like

Below mention Tumors are consider complex any size
 Lesions that are within 5 mm of the optic nerve, chiasm, or tract
 Brainstem lesions
 Schwannomas,
 Arteriovenous malformations
 Glomus tumors, also called paragangliomas,
 Pineal region tumors
 Cavernous sinus tumors in the area behind the eye
 Pituitary, parasellar,
 Petroclival tumors

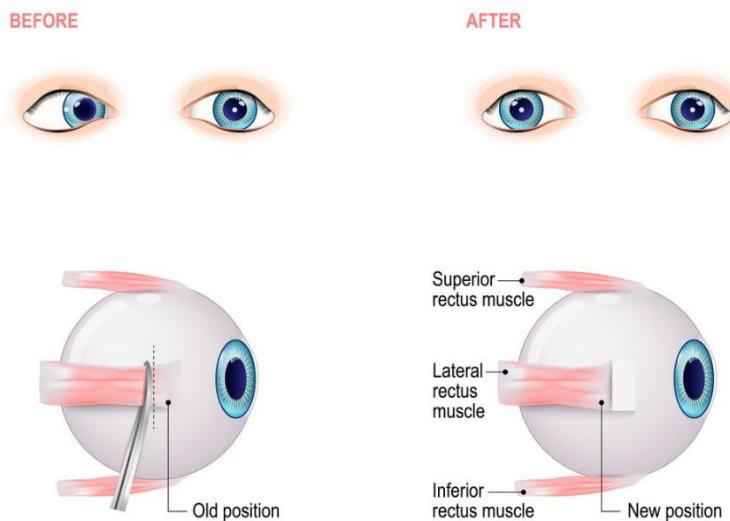
3, Maximum Lesion only coded 5

4, Only one base code

Example

- Q1. 8 simple cranial lesion treated by SRS
- Q2. 5 complex lesion treated by SRS
- Q3. 3 complex, 3 simple
- Q4. 4 complex, 4 simple

Strabismus surgery



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Strabismus surgery:

Strabismus surgery is surgery on the extra ocular muscles to correct strabismus, the misalignment of the eyes

67311 -> strabismus surgery, recession or resection procedure, 1 horizontal muscle

67312 -> 2 horizontal muscle

67314 -> 1 vertical muscle (excluding superior oblique)

67316 -> 2 or more vertical muscles (excluding oblique)

+ 67336 -> placement of adjustable suture (s) during strabismus surgery, including postoperative adjustment(s) of sutures

+ 67334 -> strabismus surgery by posterior fixation suture technique, when or without muscle recession

Example

Q1. Superior rectus muscle and inferior rectus muscle in this place physician performed strabismus surgery with scarring of extra ocular muscle?

Q2. 1 lateral rectus muscle and 1 medial rectus muscle with adjustable sutures placed?

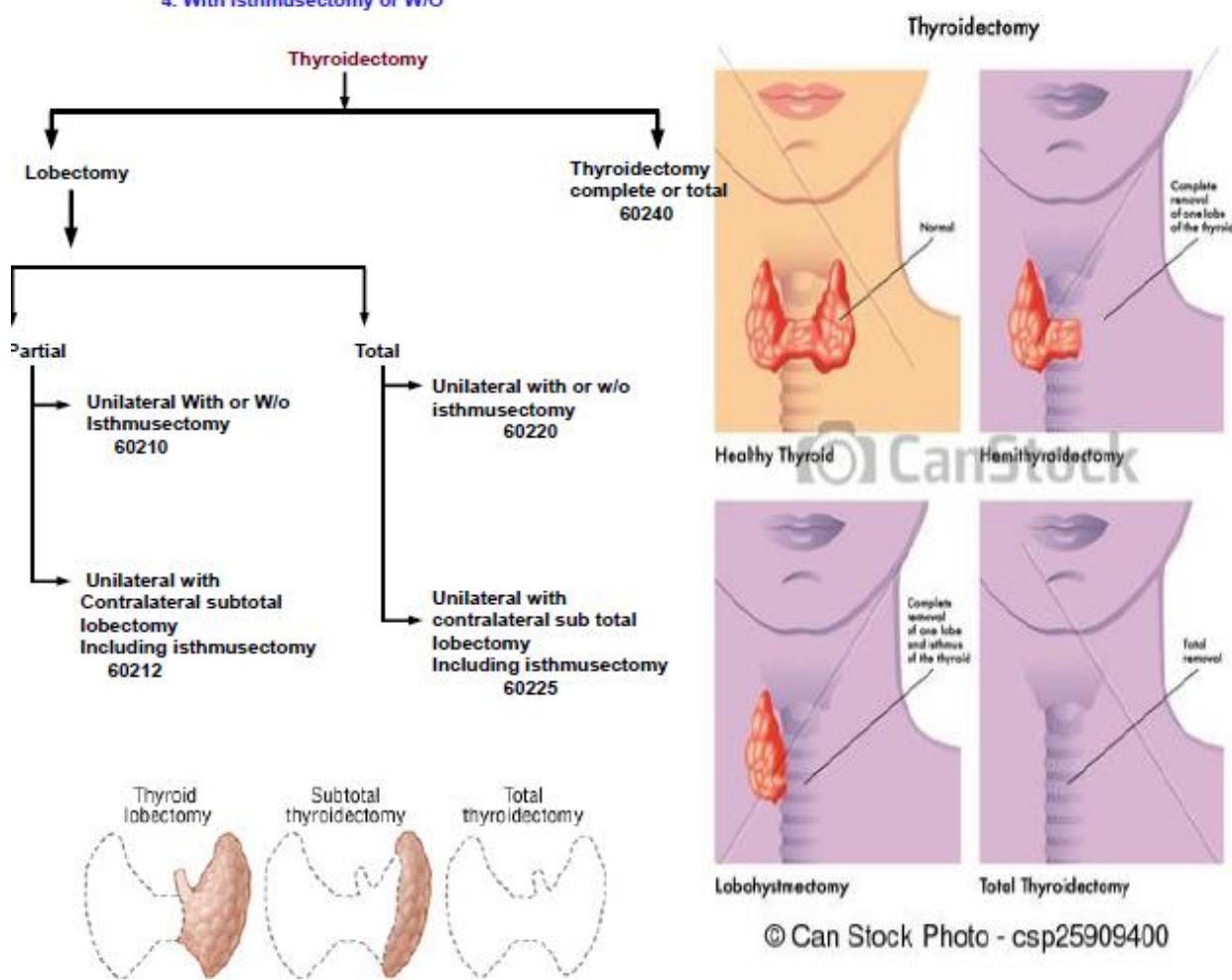
Q3. 1 superior rectus muscle and 1 inferior rectus muscle with posterior fixation suture?

Thyroidectomy – Endocrine System

Thyroidectomy - Endocrine system

Look for:-

1. Lobectomy / thyroidectomy
2. Partial/ Subtotal/Total
3. Unilateral/Contralateral
4. With isthmusectomy or W/O





Example

1. Partial thyroid lobectomy?
2. Total thyroid lobectomy?
3. Total thyroidectomy?
4. Removal of all thyroid tissue from previous surgery?
5. 53 years patient have thyroid cancer MD performed complete thyroidectomy with LIMITED neck dissection
6. Exploration of parathyroid gland

Nervous System

Injection, drainage or Aspiration

1. Ventricular puncture through previous burr hole for implanted ventricular catheter
2. Puncture of shunt tubing with radiological supervision and interpretation

Burr Hole:

Is not a surgery itself basically a hole in a skull or cranium to brain surgery for the treatment of injury / surgical hole made in skull (code ranges: 61120 – 61253) (except code 61215)

Twist drill -> code ranges (61105 – 61108)

1. Ventricular puncture by twist drill hole?
2. Burr hole with evacuation of hematoma?
3. Ventricular puncture by burr hole?
4. Twist drill for evacuation and drainage of subdural hematoma?

Craniectomy or craniotomy 61304-61576

We have to check procedure involved in infratentorial or supratentorial

Supratentorial

- ➔ Frontal
- ➔ Parietal
- ➔ Temporal
- ➔ Occipital
- ➔ Cerebrum

Infratentorial

- ➔ cerebellum
- ➔ brain stem
- ➔ posterior fossa
- ➔ medulla
- ➔ spinal cord



If MD performing craniectomy or craniotomy with twist drill, burr hole code only craniectomy or craniotomy

Subdural hematoma:

Blood clot happen in subdural space

1. Patient have temporal brain tumor MD performed craniectomy for tumor removal?

Ans:

2. Patient have Cerebellopontine angle tumor in posterior fossa MD performed craniectomy for excision of brain tumor?

Ans:

Surgery of Skull Base

1. Approach procedure
2. Definitive procedure
3. Repair/ re construction procedure

Approach Procedure:

The approach procedure is described according to anatomical area involved, ie, anterior cranial fossa, middle cranial fossa, posterior cranial fossa, and brain stem or upper spinal cord.

Definitive Procedure:

Describes the repair, biopsy, resection, or excision of various lesions of the skull base and, when appropriate, primary closure of the dura, mucous membranes, and skin.

The repair/ reconstruction procedure:

Is reported separately if extensive dural grafting, cranioplasty, local or regional myocutaneous pedicle flaps, or extensive skin grafts are required.

Notes:

- ➔ If approach procedure and definitive procedure are done by the same physician add modifier 51 to approach procedure
- ➔ Do not append modifier 62 along with skull based surgery codes
- ➔ Approach procedure and definitive procedure are same side (e.g.) if approach procedure anterior means definitive procedure also anterior

Approach Procedures:

Anterior cranial fossa – 61580 – 61586

Middle cranial fossa – 61590 – 61592

Posterior cranial fossa – 61595 – 61598

Definitive procedure



Base of Anterior cranial fossa – 61600 – 61601

Base of Middle cranial fossa – 61605 – 61613

Base of Posterior cranial fossa – 61615 – 61616

1. Dr. Martin performed an excision at middle cranial fossa for a vascular lesion the procedure was completed in intra dural with dura repair and graft. His partner Dr. sudhir performed an infratemporal approach with decompression of the auditory canal. How do should report Dr.martin service?
a. 61590, 61606-51 B. 61606-62 C. 61606 D. 61601

EPSI: Epidural Steroid Injections:

62320 -> EPSI without image guidance Cervical / Thoracic

62321 -> EPSI with image guidance Cervical / Thoracic

62322 -> EPSI without image guidance Lumbar / Sacrum

62323 -> EPSI with image guidance Lumbar / Sacrum

62324 -> EPSI without image guidance C/T-continuous catheter

62325 -> EPSI with image guidance C/T-continuous catheter

62326 -> EPSI without image guidance L/S-continuous catheter

62327 -> EPSI with image guidance L/S-continuous catheter

Coding points

- ➔ First we have to check levels
- ➔ Then we have to check site
- ➔ Single or continuous
- ➔ With or without imaging guidance

Example:

Patient is having lumbar stenosis with low back pain MD performed epidural steroid injection?

Answer:

Transforaminal epidural Steroid Injection

64479 - TSI – C or T = single level with image guidance

+64480 - Each additional level with image guidance

64483 - TSI – L or S = single level CT or fluoroscopy guidance



+64484 - Each additional level with image guidance

1. TSI with fluoroscopy – L1, L2, L3

2. TSI with fluoroscopy – C1-C2, C3-C4, C5-C6

Para Vertebral Facet Joint Injection:

64490 -> PVB + FI -> C or T single level with image guidance

+64491 -> PVB + FI -> C or T second level with image guidance

+64492 -> PVB + FI -> C or T 3rd or more level with image guidance

64493 -> PVB + FI -> L or S single level with image guidance

+64494 -> PVB + FI -> L or S second level with image guidance

+64495 -> PVB + FI -> L or S 3rd or more level with image guidance

{If imaging not used for this service use codes 20552 - 20553}

{If ultra sound guidance is used, report 0213T – 0218T}

{If bilateral para vertebral facet injection use modifier - 50}

Example:

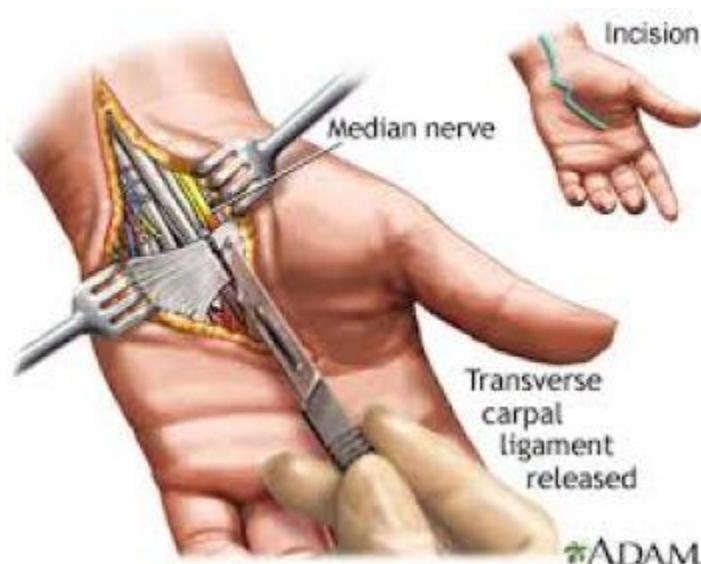
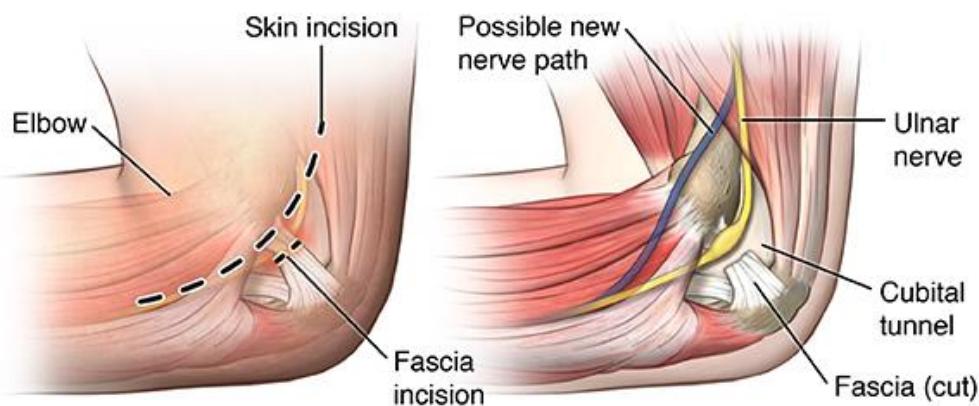
1. PVB Facet injection in L1, L2, L3, L4, With CT guidance

2. PVB Facet injection in L1, L2, L3, L4, With US guidance

3. PVB Facet injections to L1, L2, L3?

Direct questions from Index:

Cubital tunnel release



1. Patient come to office with an obstructed ventricle peritoneal shunt the procedure performed to be a revision of shunt after inserting shunt system entire cerebro spinal system removed and similar shunt replaced or replacement was performed?
 - a. 62180
 - b. 62258
 - c. 62256
 - d. 62190
2. Removal of CSF shunt?
3. Neuroplasty of carpal tunnel release?
4. Neuroplasty of cubital tunnel release?
5. Removal and replacement of electromagnetic hearing conduction device?
6. Reprogramming of programmable CSF shunt ->