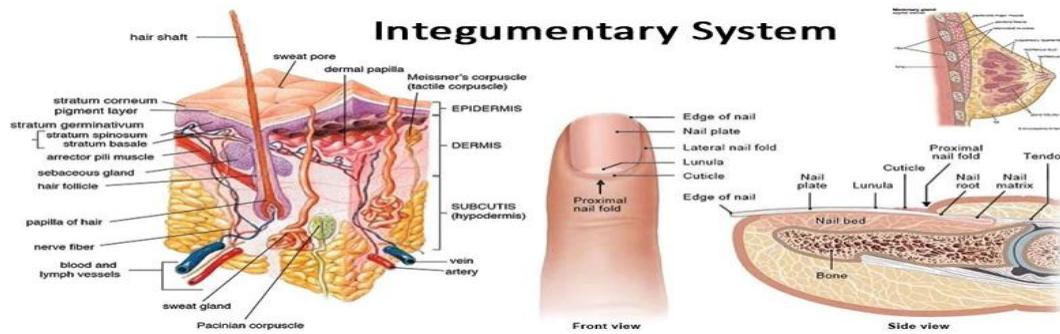


INTEGUMENTARY SYSTEM (10004-19499)



Skin : cutaneo/Dermo 3 layers : epidermis

Dermis

Subcutaneous tissue

Nail: unguo

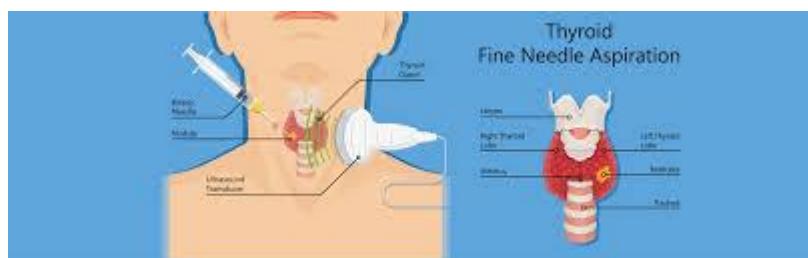
Hair: Tricho

Guidelines:

Lesion : Any affected site is called lesion.

FINE NEEDLE ASPIRATION (FNA) BIOPSY : A small amount of tissue or fluid is removed from a suspicious area with a thin, hollow needle and checked.

Example : Breast biopsy



To code FNA :

- 1- No of lesions.
- 2- Type of guidance

Ultrasound

Fluroscopic

CT-Guidance

MR-imaging

10021- Fine neddle aspiration,without imaging, first lesion.

#+10004 – each additional lesion.

10005 – FNA biopsy, including ultrasound guidance : first lesion

+10006 – each additional lesion.

Example:- physician performed FNA with 5 lesions with ultrasound guidance.

10005

+10006×4

2) INCISION AND DRIANAGE : I&D – is a surgery used to remove abscess from the skin and subcutaneous tissue. 10060 –I&D of abscess simple or single.

3) DEBRIDEMENT – Removal of the dead or infected skin tissue.



4 – types

1- 11000 - Debridement of extensive eczematous or infected skin: up to 10%of body surface.

+11001 – each additional 10% of the body surface, or part thereof.

2- 11004 – Debridment of skin, subcutaneous tissue, Muscle and fascia for necrotizing soft tissue infection : external Genetalia and perineum.

11005 – 11008

3 – 11010 – Debridement of open fracture/or open dislocation : skin and subcutaneous tissue.

11011 - skin, subcutaneous tissue, muscle fascia , and muscle

11012 - skin, subcutaneous tissue, muscle, and bone.

4 –11042 - Debridement, subcutaneous tissue (includes epidermis and dermis, if performed) : first 20 sq cm or less

11045 – each additional 20 sq cm, part there of

11043 – Debridement, muscle and /or fascia

11044 – debridement of bone.

Q1) debridement of 22% of infected skin .

11000

+11001× 2

Q2) debridement of bone 30 sq centimeter

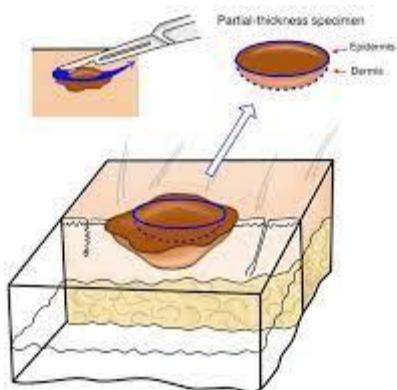
11044

+ 11047.

4) BIOPSY : Examination of living tissue.

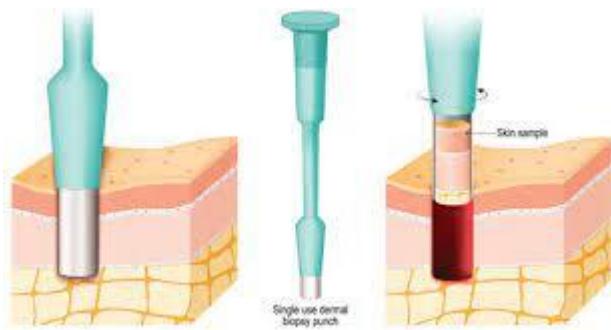
1) TANGENTIAL BIOPSY : Removal of tissue with a sharp blade , curette in epidermal tissue.

11102



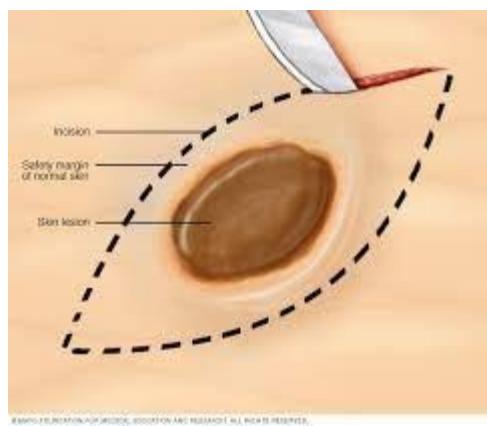
2) PUNCH BIOPSY : Requires a punch tool to remove a full thickness cylindrical sample of skin.

11104



- 3) INCISIONAL BIOPSY : Requires the use of a sharp blade (not punch tool) to remove a full thickness sample of tissue.

11106



GUIDELINES:

Always we should follow sequence

Incisional (I)

Tangential (T)

Punch (p)

Q1) 2 tangenital biopsies

Q2) 3 punch biopsies

Q3) 1 incisional biopsy, 1 tangenital, 1 punch biopsy :

11106

11102

11105

- 5) REMOVAL OF SKIN TAGS : A common skin growth in which a short, narrow stalk sticks out. Skin tags are usually harmless and pain less.



11200 – removal of skin tags, up to 15 lesions

+11201- each additional 10 lesions or part thereof.

6) SHAVING OF EPIDERMAL OR DERMAL LESIONS :

11300

11305

7) EXCISION OF LESION : excision is defined as full-thickness (through the dermis) removal of a lesion ,including margins, and includes simple (non- layered) closure when performed.

For excision first we should see the type of lesion

BENIGN OR MALIGNANT.

FOR BENIGN LESION :Eg (neoplasm, cicatrical , fibrous, inflammatory, congenital, cystic lesions)

FOR MALIGNANT LESIONS : Eg (basal cell carcinoma, squamous cell carcinoma , melanoma, malignant, cancer)

TO CODE EXCISION OF LESIONS:

- 1) SEE THE ANATOMICAL SITE EX (Arms, legs, neck, scalp etc)
- 2) SEE THE TYPE OF LESION EX(Benign or malignant)
- 3) LENGTH OF THE LESION EX (Including margin) ex (lesion diameter 0.6 – 1 cm)
- 4) TYPEOF REPAIR EX (simple(non layered), intermediate repair, complex repair)

Q) physician performed excision of cystic lesion on arms with excised diameter 3 cm closed with simple layered closure.

SITE – ARMS

LESION – BENIGN



DIAMTRE – 3 CM

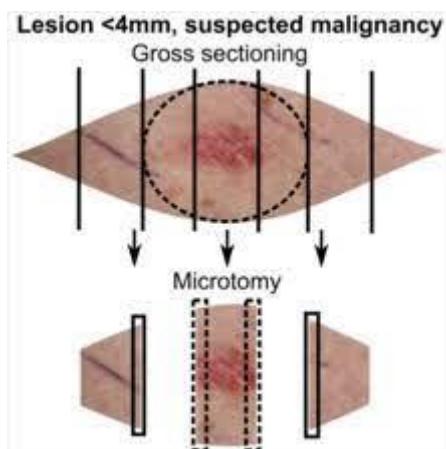
REPAIR – SIMPLE LAYER

CODE : 11403

Q2) physician performed excision of malignant lesion on neck 2cm including simple layered closure.

SITE – NECK

LESION – MALIGNANT



DIAMTRE – 3CM

REPAIR – SIMPLE REPAIR

CODE : 11622

8) NAILS :

11720 – Debridement of nails by any methods : 1 to 5

11720 - 6 or more

9) REPAIR (CLOSURE): suturing of wounds , there are three types of closure.



Simple repair : It involves in superficial eg (epidermis or dermis or subcutaneous tissue without involvement of deeper structures) and require simple one layered closure.

Intermediate repair : it involves superficial + fascia (non muscle) required more then one layer closure 2

Simple repair with extensive coding or single layered closure of heavily contaminated wounds that require extensive cleaning or removal of particles matter also code intermediate repair only.

Complex repair : involves exposure of muscle , bone , tendon , cartilage and extensive debridement ex (Traumatic lacerations)

TO CODE REPAIRS FIRST WE NEED TO SEE:

- 1) ANATOMICAL SITE EX (NECK,FACE, EARS)
 - A group of anatomical sites forms anatomical group.
- 2) ANATOMICAL GROUP EX (scalp,neck, axillae, external genitalia , trunk, and extremities (including hands and feet), (face, ears, eyelids,nose lips , and mucous membranes)
- 3) LENGTH OF THE WOUND EX (2.5CM, 2.6- 7.5 CM)
- 4) TYPE OF LACERATION REPAIR (SIMPLE, INTERMEDIATE , COMPLEX)
- 5) SPECIFICATIONS (single layered closure of heavily contaminated wounds that require extensive cleaning or removal of particles matter also code intermediate repair only.)

GUIDELINE:

When the physician performed same type of laceration repair in multiple sites of same group we should add all the anatomical sites centi metres and we should only code one code.

Q1) physician performed simple laceration repair on scalp 2cm, axillae 2cm, neck 1 cm.

These three sites are on same anatomical site so we can add all the centimetres of repairs

$$2+2+1=5$$

Code of 5 cm simple laceration repair is = 12002.

When the physician performed two different type of repairs on two different anatomical sites of the same group we should code for both type of repairs, and we should append modifier 59 for lowest procedure.

Q2) if the physician performed 2cm simple repair on left hand and 2cm intermediate repair on right hand.

12041- intermediate repair on trunk

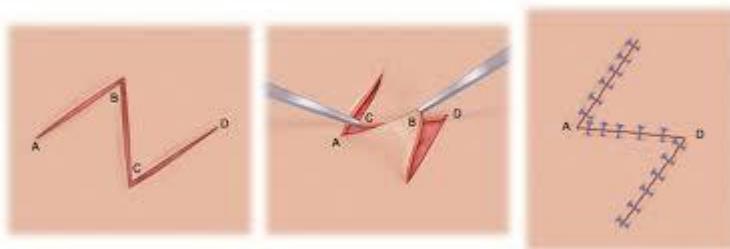
12001 -59 simple repair on hand.

Q3) If the physician perform intermediate laceration repair on scalp & Trunk 2cm and performed repair 1 cm in leg .

12031 – 2cm intermediate repair on scalp & trunk

12001 – simple repair on leg extremity.

10) ADJACENT TISSUE TRANSFER OR REARRANGEMENT (ATT,Z-PLASTY,W-PLASTY,V-Y PLASTY, ROTATIONAL FLAP,RANDOM ISLAND FLAP,ADVANCED FLAP)14000-14302 :



ATT is a type of repair

ATT is included for excision of lesion and any repair by ATT.

Guidline :

Whenever the physician performed ATT we should not code laceration repairs, flaps, grafts, reconstructions, lesion excisions along with ATT.

TO CODE ATT SEE

- ANATOMICAL SITE EX (TRUNK,SCALP,FOREHEAD)
- AREA OF DEFECT IN SQUARE CENTIMETRES.

Q1) physician excised benign lesions from trunk and performed ATT repair 10 sq cm.

14000.

11) skin replacement surgery 15002-15277 :

Grafts : types of skin grafts.

- 1) **AUTO GRAFT** : Graft taken from same person.
- 2) **HOMO GRAFT OR ALLOGRAFT** : Graft taken from different person of same species.
- 3) **XENO GRAFT** : Graft taken from the animal source or through different species.



TO CODE GRAFTS SEE :

- 1) ANATOMICAL SITES
- 2) TYPE OF GRAFT (epidermal autograft, dermal auto graft)
- 3) AREA OF GRAFT CM
- 4) SURGICAL PREPATION. Preparation of site.

Q1) physician performed scalp dermal auto graft 110 sq cm.

15135

+ 15136

12) FLAPS (skin and / or deep tissues – 15570-15731) : flaps are type of graft involving of some muscle with the skin is called flap transfer.



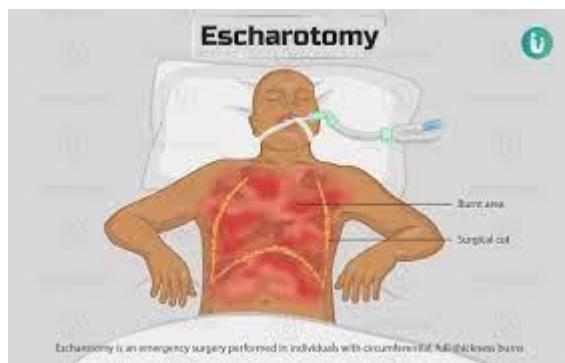
ATT- only the skin transfer

15734 – muscle, myocutaneous, or fasciocutaneous flap : trunk

13) BURN CARE (16000-16036) : Local treatment of burned surface only.

16025 – Dressing and or debridement of partial –thickness burns, initial or subsequent: medium (eg whole face or whole extremity,or 5% to 10% TBSA)

ESCHARATOMY (16035 - +16036) – incision to make to remove hard burned skin.



TO CODE ESCHARATOMY : SEE NO OF INCISONS

Q1) Escharotomy on hand with 5 incisions

16035

+16036 ×4

14) DESTRUCTION(17000-17286) :

Destruction means removal lesion by external force ex benign, pre malignant or malignant lesions by laser surgery electrosurgery, cryosurgery, chemosurgery, surgical curettes.) destruction does not require closure.



TO CODE DESTRUCTIONS WE SHOULD CHECK

- 1) TYPE OF LESION (BENIGN OR MALIGNANT)
- 2) NO OF LESIONS.

KEY WORDS FOR BENIGN LESION ARE ACTINIC KERATOSES.

Q1) physician performed laser surgery on hand for 10 actinic keratoses

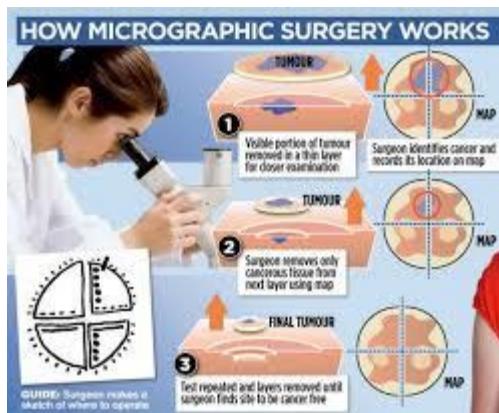
17000

+17003 ×9

Q2) Physician performed electrosurgery on trunk 2cm malignant lesion.

17262.

15) MOHS MICROGRAPHIC SURGERY (17311- +17315) : MMS is a technique for the removal of complex or ill defined skin cancer .



These MMS performs in different stages with different tissue blocks.

TO CODE MMS SEE:

- 1) ANATOMICAL SITE
- 2) NO OF STAGES

3) NO OF TISSUE BLOCKS (5 tissue block are included in the 1 stage)

Q1) physician performed MMS on neck with 2 stages for each stage he removed 5 tissue blocks

17311 – neck

+ 17312

Q2) physician performed MMS on neck with 3 stages each stage has 6 tissue blocks.

17311 – neck , +17312×2 , +17135×3

Q3) physician performed MMS on trunk with 4 stages 1 stage removed 4 tissue blocks 2nd 3rd 4th stage he removed 6 tissue blocks

17313 – site trunk

+ 17314×3

+ 17315×2 (count the no of tissue block and delete with 20)

16) BREAST (19000-19396)

19000 – PUNCTURE AND ASPIRATION OF BREAST.

19081 – BIOPSY OF BREAST

MASTECTOMY : surgical removal of breast.

19300 – mastectomy for gynecomastia

19303 – mastectomy simple complete

MASTOPEXY – surgical fixation of breast – 19316.



