ERRATA for

Diagnostic & Interventional Cardiovascular Coding Reference 2014 Edition

Text deletions are crossed out. New text is **blue and bolded**. Ordered by appearance in text.

Page 94, Coding Instructions

9. For "base" vessel intervention codes, the hierarchy is as follows: CTO = acute MI = stent with atherectomy > atherectomy > graft intervention > stent placement > graft intervention > angioplasty (92943 = 92941 = 92933 > 92924 > 92937 > 92928 > 92937 > 92920).

Note: Code 92941 (acute MI) is equal to 92933 (stent with atherectomy), <u>not</u> greater than as noted in the book. In addition, code 92937 (graft intervention) is a higher intensity procedure than code 92928 (stent placement).

Pages 247 & 670, Anatomy Picture "Lower Extremity Arterial Anatomy"

The artery identified as "Femoral" should be labeled as "Superficial Femoral". This applies to both the left and right sides.

Page 318, Codes

The following should be added to the top of the code table:

Introduction of needle or intracatheter, vein	36000	N/A	0.28	N/A	N/A	N/A	
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Page 322, Coding Instructions

29. Use codes 36000 and 37241 to report alcohol or other embolization of a superficial venous malformation of the face direct access (usually by needle) injection. Report unlisted diagnostic radiology code 76499 for any diagnostic imaging performed prior to the embolization.

Page 325, References

Society of Interventional Radiology, Questions Log – 2014 SIR Coding Update Webinar, page 3

Page 373, Coding Instructions

8. Code 95958 describes a WADA Wada test. This involves infusion of a drug into a portion of the brain via catheter. This includes EEG monitoring. The selective catheter placements and cerebral imaging procedures are separately billable (e.g., code 36224-50 for bilateral carotid cerebrals). Do not use code 37202 for injection of the sodium amytal or other drug into the cerebral arteries for Wada testing.

Page 396, Example(s)

2) Patient with clotted left leg dialysis graft undergoes cross catheter technique (36147, 36148) with shuntogram (included) and declot utilizing a thrombectomy catheter (36870). An arterial inflow stenosis in the native iliac artery 8 cm proximal to the arterial anastomosis is ballooned (36245, 37220), as is a common iliac vein stenosis (35476, 75978).

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3. Codes 33212, 33213, and 33221 are for insertion of a generator <u>only</u> when there are existing leads in place or at time of epicardial lead placement. These codes are also used when a defibrillator generator is removed and replaced with a pacemaker generator with no new leads placed. The removal of the defibrillator generator

is reported separately with code 33241. These codes will be used infrequently.

- 4. This range of codes uses the following nomenclature: single lead system equates to lead(s) in one chamber only atrial or **right** ventricular, dual lead system equates to leads in two chambers the atrium and right ventricle, and multiple lead system equates to leads in three or more chambers a device that includes a lead in the left ventricle, usually for resynchronization therapy and biventricular pacing.
- 5. For elective replacement indicator status where an existing pacemaker generator is removed and a <u>new</u> generator only is placed, use code 33227 for a single lead system, code 33228 for a dual lead system, and code 33229 for a multiple lead system. Do not use these codes if the generator removed was not a pacemaker generator (e.g., defibrillator generator removed and replaced with a pacemaker generator). These codes describe a replacement with the same type of device.

Page 452, Coding Instructions

- 4. This range of codes uses the following nomenclature: single lead system equates to lead(s) in one chamber only atrial or **right** ventricular, dual lead system equates to leads in two chambers the atrium and right ventricle, and multiple lead system equates to leads in three or more chambers a device that includes a lead in the left ventricle, usually for resynchronization therapy and biventricular pacing.
- 5. For elective replacement indicator status where an existing defibrillator generator is removed and a <u>new</u> generator only is placed, use code 33262 for existing single lead system, 33263 with existing dual leads, or 33264 with existing multiple leads. Do not use these codes if the generator removed was not a defibrillator generator (e.g., pacemaker generator removed and replaced with a defibrillator generator). These codes describe a replacement with the same type of device.
- 6. For placement of a defibrillator generator when an existing generator is NOT in place but only existing leads, report code 33240 for existing single lead, code 33230 for existing dual leads, and code 33231 for existing multiple leads. These codes are also used when a pacemaker generator is removed and replaced with a defibrillator generator with no new leads placed. The removal of the pacemaker generator is reported separately with code 33233. These codes will be used infrequently.

Page 456, Example(s)

1) Patient for upgrade from dual chamber biventricular pacemaker to a dual chamber biventricular ICD, requiring replacement of the right ventricular lead and repair of the left ventricular lead. The chronic right atrial lead was satisfactory. The removal of the pacemaker generator (33233 no code, as removal of pacemaker generator is a "0" NCCI edit with the subsequent lead repair since the generator has to be removed to repair the lead), capping of the old right ventricular lead (no code), and placement of a new defibrillator generator and right ventricular lead (33249-59) are followed by repair of the existing left ventricular lead (33218).

Page 615, Coding Instructions

5. Venous duplex requires the use of spectral Doppler. If not performed or documented, do not report code 93970 or 93971. Report code 76880 76881 or 76882.