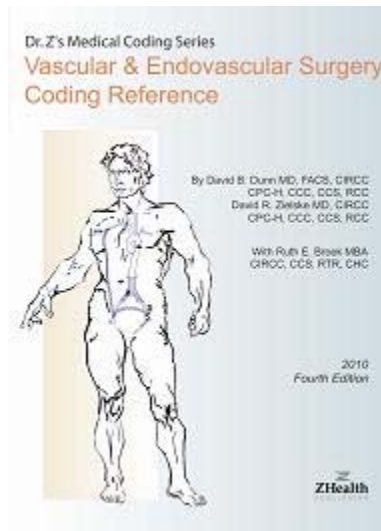


Dr Z's Medical Coding Series:
Vascular & Endovascular Surgery Coding Reference: 2010 Edition

2010 Book Errata



Text to be deleted has been crossed out and new text noted in blue font.

Page 131

In the anatomical drawing depicting a normal AV shunt, delete code 36145 listed below "Venous Limb".

Page 137

CLINICAL INDICATIONS:

Upper and lower extremity swelling, superior vena cava syndrome, non-functioning central venous catheter, **and** congenital anomalies, ~~and vena cava filter placement evaluation (to see if blood clot is in the cava, which may change deployment to the supra-renal location).~~

Revision is to remove a planned IVC filter placement as providing medical necessity for a diagnostic inferior vena cavagram.

CODING INSTRUCTIONS:

3. Do code for a cavogram (75825-59) **only** when performed with IVC filter placement ~~if~~ **and the cavogram is truly diagnostic in nature (e.g., imaging that determines the need to place a filter)**. **This is distinctly uncommon.**

4. **Do not** code a **an inferior vena cavogram when performed in conjunction with placing a filter that has already been determined as medically necessary to place**. **It is also inappropriate to code for a cavogram when** ~~if~~ performed ~~only~~ to measure the caval size, locate the renal veins, or evaluate for variant anatomy. These evaluations are considered guiding shots and are not separately coded.

Revisions are to indicate it is inappropriate to report an inferior vena cavogram when performed during routine IVC filter placement.

EXAMPLES:

1) Patient with shortness of breath and suspected pulmonary embolus undergoes selective bilateral pulmonary angiography (36014-50, 75743). Because of clot in the left lower lobe, the catheter is placed in the IVC and inferior vena cavogram is performed (36010-59, 75825-59). This shows the vena cava to be patent (no clot) and of normal size, so a temporary IVC filter is placed (37620, 75940).

CODES:

Delete 3rd row

Additional selective renal venography after the basic procedure	36012	★75774
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Code 75774 should not be utilized with venography procedures. See AMA Knowledge Base for reference. Contact the AMA for subscription information.

Delete Coding Instruction number 5 and renumber the subsequent instructions:

~~5. Use code 75774 after initial complete venography is done if additional selective catheter placement and imaging is done after the basic venogram.~~

Code 75774 should not be utilized with venography procedures. See AMA Knowledge Base for reference. Contact the AMA for subscription information.

GREY ZONE DISCUSSION

Delete number 1 and remove the number from the second entry

1. ~~Use of CPT code 75774 for additional selective angiography beyond basic. Angiography includes and refers to imaging of both arteries and veins. Additional selective imaging of venous structures requires additionally selective catheter positioning (e.g., code 36012). Code 75774 may be used to describe these additional selective venous imaging procedures.~~
2. Gonadal venography refers to ovarian venography in women and testicular venography in men. The left gonadal vein arises off the left renal vein, and the right arises off the IVC. Catheter selection is 1st order selective on the right and 2nd order selective on the left. Current imaging code recommendations are 75833 for bilateral ovarian venography and 75822 for bilateral testicular venography.

Code 75774 should not be utilized with venography procedures. See AMA Knowledge Base for reference. Contact the AMA for subscription information.

CODES:

Delete last row

Additional vessel, selective, after the basic exam	36012	☆75774
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Code 75774 should not be utilized with venography procedures. See AMA Knowledge Base for reference. Contact the AMA for subscription information.

EXAMPLES:

- 1) *Patient with shortness of breath presents for evaluation for pulmonary embolism. Via a transfemoral venous access, a catheter is placed in the left and right pulmonary arteries with injection of contrast and imaging (75743). A catheter is advanced into both lower lobe pulmonary arteries with additional imaging (36015-50, 75774 x 2). Clot is seen, so the catheter is retracted into the inferior vena cava and imaging of the inferior vena cava is done (36010-59, ~~75825-59~~). There is no thrombus in the cava. A vena cava filter is placed without difficulty (37620, 75940).*

Note: The catheter placements in both central pulmonary arteries (36014-50) are bundled into the more selective bilateral lower lobe pulmonary artery catheter placements (36015-50).

Revision is to remove the recommendation to report an inferior vena cavagram when performed as part of filter placement for pulmonary embolus.

Page 151

CODES:

Delete 9th row

Selective catheterization and imaging of a venous structure off the splenic or portal vein (superior mesenteric vein, inferior mesenteric vein, coronary vein, short gastric veins)	36011 or 36012	☆75774
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Code 75774 should not be utilized with venography procedures. See AMA Knowledge Base for reference. Contact the AMA for subscription information.

Page 152

Delete Coding Instruction number 10:

~~10. Use code 75774 to describe additional selective imaging of the superior or inferior mesenteric veins after a basic portal vein imaging procedure (75885 or 75887) has been performed. Additional angiography code 75774 applies to additional imaging of both arteries and veins.~~

Revision is to remove instruction that 75774 can be reported with venography procedures.

Page 186

CODING INSTRUCTIONS:

~~2. Do code separately for diagnostic imaging.~~

~~3.~~ **2. Do code 75825-59 for only when a truly diagnostic inferior vena cavagram is performed and the decision to place an IVC filter is made based on the IVC findings. This is distinctly uncommon. documenting lack or presence of thrombus within the cava or existing caval filter. This should be documented as medically necessary.**

~~4.~~ **3. Do not code 75825-59 for sizing of the cava, location of locating the renal veins, or definition of defining the venous anatomy, or when the request is made for vena cava filter placement and a vena cavagram is performed at this setting.**

4. Do not code 75825-59 for determining the presence or absence of clot in the cava if the decision to place the filter has already been made.

5. Use unlisted vascular procedure code 37799 for repositioning of a temporary filter, along with catheter placement (36010) and vena cavagram (75825-59) (if diagnostic study performed to evaluate for thrombus within the cava or the filter). **Vena cavagram (75825) may be performed at the same setting for diagnostic purposes.**

9/23/2010

4

Revisions are to indicate it is inappropriate to report an inferior vena cavagram when performed during routine IVC filter placement.

Page 187

EXAMPLES:

1) Sixty year old with indeterminate lung scan and dyspnea presents for pulmonary angiography with filter placement if **pulmonary embolus is identified** ~~needed~~. Via a right transfemoral route, a catheter is selectively placed in both pulmonary arteries (36014-50), and angiography (75743) shows blood clot in the left lung. The catheter is pulled back into the inferior vena cava (36010-59), and venography is performed (**no code**) (~~75825-59~~), showing clot in the lower IVC, mandating higher placement of the filter. A temporary filter is placed (37620, 75940) below the renal veins. Follow-up venography shows good positioning (no codes).

Page 193

Replace instruction 10 with the following:

10. The venous angioplasty code applies to all venous structures including portal and mesenteric venous structures. It now applies to venoplasty within ~~zone 1~~ **the peripheral zone** of an AV dialysis graft, as HCPCS codes G0392 and G0393 were deleted in 2010. Use code 35476 or 35475 for venoplasty or angioplasty within ~~zone 1~~ **the peripheral zone** of an upper extremity AV dialysis graft or at the arterial anastomosis. Codes 35475 and 35476 may be used on the same patient for multiple procedures in the same extremity, but only if the arterial intervention is in a native extremity artery separate from the arterial anastomosis. If both arterial anastomosis and a venous extremity lesion are treated, only submit codes 35475 **35476** and ~~75962~~ **75978**.

The change is to accommodate instructions regarding codes 35475 and 35476 which are contrary to the instructions regarding G0392 and G0393. The coding of the venoplasty takes precedence over the coding of an arterial angioplasty when both are performed in the peripheral zone.

Page 224

In the left hand anatomical drawing depicting a normal shunt, delete code 36145 listed below “Venous Limb”.

Page 226

In “CODES”, the 6th item on page 232 should be as follows:

Venoplasty within AV graft, at venous anastomosis, fistula, and remainder of zone 1 the peripheral zone (use once for zone 1 peripheral zone stenoses)	35476	75978
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The revision is to remove references to numerical zones. Peripheral and central zones will now be the designations.

In “CODES”, the 10th item on page 232 should be as follows:

Venoplasty, percutaneous (for stenoses in zone 2 or 3 the central zone)	35476	75978
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The revision is to change the instruction from indicating there are 3 zones to only 2, peripheral and central.

1. HCPCS codes G0392 and G0393 are deleted in 2010. Use appropriate codes 35473, 35474, 35475, and 35476 to describe angioplasty at the arterial anastomosis or within ~~“zone 1”~~ **the peripheral zone** of a fistula/graft.

The revision to instruction 1 is to remove references to numerical zones. Peripheral and central zones will now be the designations.

6. Previously we have recommended coding interventions per zone and there were 3 zones to consider. This has changed for 2010 as now there is a “bundling” of zones 2 and 3 into a single zone called the “central zone” for intervention. The peripheral zone as described below is the same as the previous zone 1.

Upper Extremity

- a) Peripheral zone: arterial anastomosis, intragraft, venous anastomosis, and outflow veins up to and including the axillary vein (peripheral veins)
- b) Central zone: subclavian vein, brachiocephalic vein and superior vena cava (central veins)

Lower Extremity

- a) Peripheral zone: arterial anastomosis, intragraft, venous anastomosis and outflow veins up to and including the common femoral/external iliac veins (peripheral veins)
- b) Central zone: common iliac vein and inferior vena cava (central veins)

There are now 2 zones for performing interventions related to an AV dialysis graft, the peripheral and the central zones. Instruction 6 has been totally revised.

7. Code 35476 applies to ~~all of zone 1~~ **the entire peripheral zone**, except the arterial anastomosis. If the only stenosis treated with venoplasty is in the native cephalic or ~~basilic~~ **basilic** vein, use 35476 along with 75978.

The revision of instruction 7 is to remove references to numerical zones. Peripheral and central zones will now be the designations. In addition, “basilic” was misspelled.

Page 263 – EXAMPLE(S)

- 1) A patient presents with a massively edematous left lower extremity. Despite anticoagulation, bedrest, and elevation, threatened venous gangrene develops. Preoperative duplex scans are performed, confirming deep venous thrombosis. A right femoral puncture is made with an inferior vena cavagram showing no IVC clot. An IVC filter is deployed below the renal vein level (36010, ~~75825-59~~, 37620, 75940). A left groin incision is then made. The iliac veins are controlled, a venotomy is made, and direct removal of a large amount of thrombus is accomplished (34421). Postoperative work-up reveals a hypercoagulable state. *Separate reporting of code 75825-59 has been removed as a recommendation.*
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Page 423 – Magnetic Resonance Angiography (MRA)

First sentence should read:

MRA is the imaging of the ~~atrial~~ **arterial** inflow and/or the arterial outflow of vascular structures utilizing magnetic resonance imaging

Page 482

Appendix D – 2010 Inpatient Only Procedures

Add code 37215

In the HOPPS final rule 37215 was indicated as being changed from a C status indicator to a T. On December 31, 2009, CMS announced that the instruction was an error in the Federal Register and it is remaining status indicator C.

Page 532

Venous Procedures – 2010

Under “Percutaneous AV Shunt Interventions”, the 4th entry should be:

Venoplasty, zone 1 peripheral zone		35476	75978
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The revision is to remove references to numerical zones. Peripheral and central zones will now be the designations.

Page 532 – Venous Procedures 2010

Under “Diagnostic Venography”, delete the 4th entry:

Each additional vessel, selective, beyond basic		★75774
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Code 75774 should not be reported for additional venous imaging.
