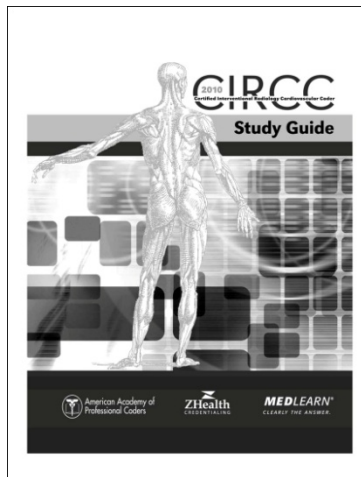# CIRCC Study Guide

2011 Book Errata

Deleted text is crossed out and new text is in red

Page 46
Revise second Bullet to move Atherectomy to a higher valued procedure than Stent placement
- The hierarchy is (from highest-valued to lowest valued):
  ◊ Stent and atherectomy, with or without PTA
  ◊ Atherectomy with or without PTA
  ◊ Stent with or without PTA
  ◊ PTA only.

Revise fourth Bullet
- The tibial/peroneal trunk *is not* a separate tibial/peroneal vessel from an interventional perspective **when performed in conjunction with revascularization of posterior tibial or peroneal arteries. It is a separate vessel when performed with revascularization of the anterior tibial artery.**

Page 50
Revise third Bullet
- For lower extremity arterial stenting, atherectomy and PTA, there is now a coding hierarchy. There is also and anatomical breakdown of vascular territories. The three territories are:

Page 51
Revise first main Bullet to move Atherectomy to a higher valued procedure than Stent placement
- The hierarchy is (from highest-valued to lowest valued):
    ◊ Stent and atherectomy, with or without PTA
    ◊ Atherectomy with or without PTA
    ◊ Stent with or without PTA
    ◊ PTA only.

Revise third main Bullet
- The tibial/peroneal trunk *is not* a separate tibial/peroneal vessel from an interventional perspective **when performed in conjunction with revascularization of posterior tibial or peroneal arteries. It is a separate vessel when performed with revascularization of the anterior tibial artery.** ~~While not clearly defined in current literature, it is our opinion that if~~ If only the tibial/peroneal trunk is treated, this may be separately coded.

Page 52
Revise second Bullet
- For procedures performed in the renal, visceral, aorta, iliac or brachiocephalic arteries, atherectomy should also be coded when the intent was to perform a successful atherectomy, but a stent placement was necessary due to a residual stenosis greater than 20 to 30 ~~percdnt~~ **percent,** a residual systolic gradient greater than 5 mm Hg, or an acute occlusion. It is likewise appropriate to report the stent placement procedures and radiology S&I codes for the stent procedure.

Revise fifth Bullet
- Intervention in the right and left lower extremity is coded separately. The **tibial/peroneal arteries**, like the iliac described above, are considered to be a single vascular territory. Up to three atherectomy procedures may be able to be assigned in this territory, per extremity. The three codeable vessels (do not code separately for atherectomy in the tibial/peroneal trunk **if the posterior tibial or peroneal artery has also been revascularized with atherectomy**) in this location are the anterior tibial, posterior tibial, and peroneal artery. ~~While not clearly defined in current literature, it is our opinion that if~~ **If** *only* the tibial/peroneal trunk is treated, it may be separately coded.

Page 55
Revise fourth Bullet to move Atherectomy to a higher valued procedure than Stent placement
- The hierarchy is (from highest-valued to lowest valued):
    ◊ Stent and atherectomy, with or without PTA
    ◊ Atherectomy with or without PTA
    ◊ Stent with or without PTA
    ◊ PTA only.

Revise sixth Bullet (second from last)
- The tibial/peroneal trunk *is not* a separate tibial/peroneal vessel from an interventional perspective **when performed in conjunction with revascularization of the posterior tibial or peroneal arteries. It is a separate vessel when performed with revascularization of the anterior tibial artery.** ~~While not clearly defined in current literature, it is our opinion that if~~ If only the tibial/peroneal trunk is treated, this may be separately coded.

Page 56
Revise sixth Bullet
- Intervention in the right and left lower extremity is coded separately. The **tibial/peroneal (i.e., anterior tibial, posterior tibial and peroneal) arteries**, like the iliac described above, are considered to be a single vascular territory. Up to three stent placement procedures may be able to be assigned in this territory, per extremity. The three codeable vessels (do not code separately for stent placement in the tibial/peroneal trunk **if the posterior tibial or peroneal artery has also been revascularized**) in this location are the anterior tibial, posterior tibial, and peroneal arteries.

Page 101
Revise last Bullet
- Treatment at the T12-L1 level is reported with the ~~lumbar/sacral~~ **cervical/thoracic** codes.

Page 102
Revise last Bullet
- Treatment at the T12-L1 level is reported with the ~~lumbar/sacral~~ **cervical/thoracic** codes.