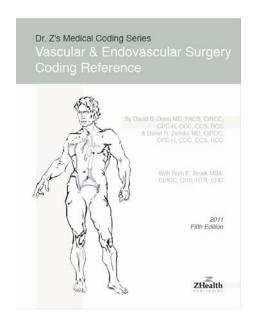
Dr Z's Medical Coding Series: Vascular & Endovascular Surgery Coding Reference: 2011 Edition

2011 Book Errata



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

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CODING INSTRUCTIONS

15. CPT code 36002 is specific for thrombin injection to treat pseudoaneurysm. Use codes 37204/75984 75894 when coil embolization is necessary. Use codes 34900/75954 when covered stent graft placement across an iliac pseudoaneurysm is required. Code 34900 is an inpatient only procedure (status indicator C) for Medicare.

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CODING INSTRUCTIONS

9. Coronary intervention rules dictate that if (regardless of reason) an angioplasty, atherectomy, and stent procedure are done in the same coronary vascular distribution, only the highest level of intervention (the stent procedure) can be coded. These same rules differ for now apply to infrainguinal arterial interventions, as stent with atherectomy supersedes atherectomy, which supersedes stent placement, which supersedes angioplasty.

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EXAMPLES

1) Hypertensive patient undergoes abdominal aortogram with selective renal angiography of two left and one right renal arteries (36245-50, 36245-59, 75724-59, 75774). Severe stenoses of both left renal arteries are balloon dilated (35471-50, 35471, 35471-59, 75966, 75968).

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CODING INSTRUCTIONS

- 11. There is a hierarchy hierarchy with the lower extremity revascularization codes similar to coronary interventions. Stent placement with atherectomy supersedes atherectomy, which supersedes stent, which supersedes angioplasty, when performed in the same vessel in the tibial/peroneal territory, or in any combination of vessels in the femoral/popliteal territory. Angioplasty is also bundled with stent placement in the same vessel in the iliac territory.
- 18. The tibial/peroneal territory includes three vessels that are separately coded: the anterior tibial, posterior tibial, and peroneal arteries. The tibial/peroneal trunk is considered part of any distal vessel intervention in the posterior tibial and peroneal arteries (similar to the left main coronary artery). The tibial/peroneal trunk is considered a separate vessel from the anterior tibial artery. The dorsalis pedis is considered part of the anterior tibial artery, and the medial malleolar artery is considered part of the posterior tibial artery.

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CODING INSTRUCTIONS

- 51. Do code stent placement (37221, 37223, 37226, or 37227) for stent graft placement in an iliac or femoral vessel to treat stenosis (not aneurysm, pseudoaneurysm, AVM, or trauma). Do code 37226 for stent graft placement in a popliteal artery to treat an aneurysm. In the iliac artery, use codes 34900 and 75954 for stent graft placement to treat an aneurysm.
- 53. Ultrasound guidance for vascular access (76937) may be reported in addition to lower extremity revascularization procedures when there is medical necessity and all necessary elements are documented.
- 54. Do code catheter placement separately for TPA infusion in a lower extremity artery if the intervention (angioplasty/atherectomy/stent placement) is performed at a separate session on the same date or service or on a different date of service.

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Page 256 CODES:

Second and third entries from the bottom should be

Iliac exposure with cutdown for	♦ 33883	N/A	35.53		
graft delivery via conduit	♦34833				
Brachial exposure with cutdown	♦ 34884	N/A	12.87		
to assist with graft delivery	♦ 34834				

Page 332 EXAMPLES

4) A sixty-two year old female with prior aorto-bifemoral bypass with PTFE ten years earlier presents with stenosis of the right femoral anastomosis. At surgery, cultures are obtained and there is no evidence of infection. The anastomosis is opened and revised with a PTFE patch (35583) (35883).

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