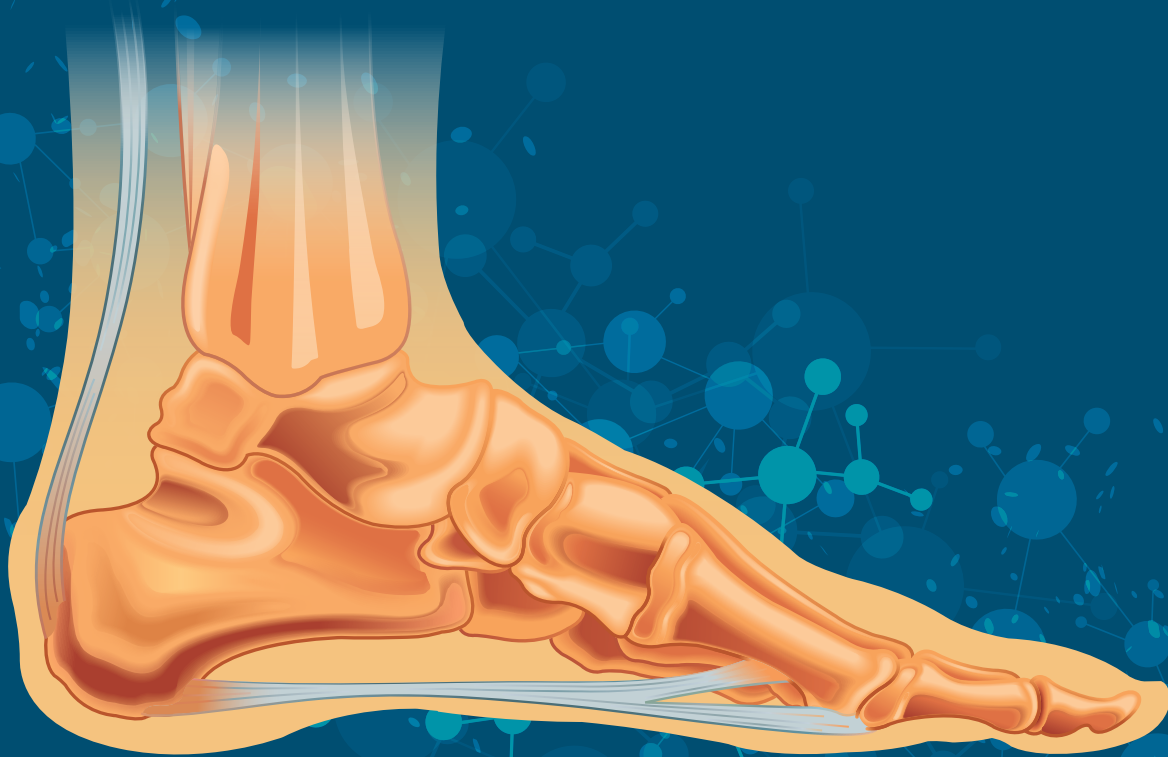




Your essential illustrated coding guide for podiatry, including CPT®, HCPCS, tips, CPT® to ICD-10 CrossRef, CCI edits, and RVU information.

**CODERS' SPECIALTY GUIDE**

# Podiatry



# 2022

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**+10004**

Fine needle aspiration biopsy, without imaging guidance; each additional lesion (List separately in addition to code for primary procedure)

**Clinical Responsibility**

With the patient properly prepared and anesthetized (typically with local anesthesia) and following FNA of an initial lesion, the provider inserts a needle, such as an 18- to 25-gauge needle with an attached syringe, into an additional suspicious lesion or area of tissue and withdraws cells, tissue, or fluid for laboratory analysis. The provider may make several passes to obtain an adequate specimen. The provider then sends the aspirate to the pathology lab for analysis.

**Coding Tips**

For FNA of an initial lesion using imaging guidance, see 10005 (ultrasound), 10007 (fluoroscopy), 10009 (CT), and 10011 (MRI) and +10006, +10008, +10010 and +10012 for each additional lesion respectively.

**Fee Schedule**

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$40.83, Non Facility: \$49.26, OPPI Facility: \$25.93, OPPI Non Facility: \$25.93

**RVU Facility** Work RVU: 0.80, PE RVU: 0.35, Malpractice RVU: 0.11, Total RVU: 1.26

**RVU Non-Facility** Work RVU: 0.80, PE RVU: 0.61, Malpractice RVU: 0.11, Total RVU: 1.52

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: ZZZ, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 3

**Modifier Allowances** 22, 52, 53, 58, 59, 76, 77, 78, 79, 80, 81, 82, 99, AQ, AR, AS, GA, GC, GZ, LT, PD, Q6, QJ, RT, SC, XE, XP, XS, XU

**CCI Alerts (version 27.0)**

0213T<sup>1</sup>, 0216T<sup>1</sup>, 10012<sup>1</sup>, 10035<sup>1</sup>, 19281<sup>1</sup>, 19283<sup>1</sup>, 19285<sup>1</sup>, 19287<sup>1</sup>, 36000<sup>1</sup>, 36410<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 61650<sup>1</sup>, 62324<sup>1</sup>, 62325<sup>1</sup>, 62326<sup>1</sup>, 62327<sup>1</sup>, 64415<sup>1</sup>, 64416<sup>1</sup>, 64417<sup>1</sup>, 64450<sup>1</sup>, 64454<sup>1</sup>, 64486<sup>1</sup>, 64487<sup>1</sup>, 64488<sup>1</sup>, 64489<sup>1</sup>, 64490<sup>1</sup>, 64493<sup>1</sup>, 76000<sup>1</sup>, 76380<sup>1</sup>, 76942<sup>1</sup>, 76998<sup>1</sup>, 77001<sup>1</sup>, 77002<sup>1</sup>, 77012<sup>1</sup>, 77021<sup>1</sup>, 96360<sup>1</sup>, 96365<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, J2001<sup>1</sup>

**ICD-10 CrossRef**

C00.3, C01, C02.9, C04.1, C06.9, C07, C08.0, C12, C13.9, C15.9, C22.0-C22.4, C22.7, C22.8, C32.1, C32.8, C34.30-C34.32, C43.20-C43.22, C43.30-C43.39, C43.51-C43.59, C43.60-C43.62, C46.0, C50.011-C50.019, C50.111-C50.119, C50.211-C50.219, C50.411-C50.419, C50.811-C50.819, C50.911-C50.919, C51.9, C76.0, C76.1, C77.0, C77.3, C79.2, C79.81, C79.89, C79.9, C82.50, C82.51, C82.55, C82.59, C83.31-C83.35, C84.90, C84.91, C84.95, C84.99, C84.A0, C84.A1, C84.A5, C84.A9, C84.Z0, C84.Z1, C84.Z5, C84.Z9, C85.10, C85.11, C85.15, C85.19, C85.20, C85.21, C85.25, C85.29, C85.80, C85.81, C85.85, C85.89, C85.90, C85.91, C85.95,

C85.99, C86.0, C86.4, C88.8, C94.40-C94.42, C94.6, D03.20-D03.22, D03.30, D03.39, D03.51-D03.59, D03.60-D03.62, D05.00-D05.02, D05.10-D05.12, D05.80-D05.82, D05.90-D05.92, D11.0-D11.9, D17.0, D17.1, D17.20-D17.24, D17.30, D17.39, D17.72, D17.79, D17.9, D19.7, D21.0, D22.5, D22.70-D22.72, D23.5, D23.70-D23.72, D36.0, D36.7, D37.030-D37.039, D44.0-D44.2, D44.9, D47.1, D47.2, D47.9, D47.Z9, D48.0-D48.2, D48.60-D48.62, D48.7, D48.9, D49.0-D49.7, D49.9, D64.9, D75.9, D78.01, D78.02, D78.21, D78.22, D89.2, E01.0-E01.2, E03.4, E03.9, E04.0-E04.9, E06.0, E07.89, E07.9, E35, E36.01, E36.02, E65, E78.71, E89.820-E89.823, G97.31, G97.32, G97.51, G97.52, G97.63, G97.64, H66.10-H66.13, H69.80-H69.83, H93.8X1-H93.8X9, H94.80-H94.83, H95.21, H95.22, H95.41, H95.42, H95.53, H95.54, I42.0-I42.5, I42.8, I42.9, I70.235, I70.245, I70.335, I70.345, I70.435, I70.445, I70.535, I70.545, I70.635, I70.645, I70.735, I70.745, I82.91, I88.1-I88.9, I89.8, I97.410-I97.418, I97.42, I97.610-I97.618, I97.622, I97.640-I97.648, J95.61, J95.62, J95.830, J95.831, J95.862, J95.863, J98.4, K11.20-K11.23, K11.3-K11.6, K11.9, K91.61, K91.62, K91.840, K91.841, K91.870-K91.873, L02.31, L02.415, L02.416, L02.419, L02.91, L03.115, L03.116, L03.119, L03.125, L03.126, L03.129, L03.317, L03.327, L03.90, L03.91, L57.0, L76.01, L76.02, L76.21, L76.22, L76.31-L76.34, L97.501-L97.504, L97.509, L97.511-L97.514, L97.519, L97.521-L97.524, L97.529, L98.3, L98.7, M54.2, M70.20-M70.22, M71.30, M77.10-M77.12, M79.4, M81.0, M96.810, M96.811, M96.830, M96.831, M96.840-M96.843, N60.01-N60.09, N60.11-N60.19, N61.0, N62, N63.0, N63.10-N63.15, N63.20-N63.25, N63.31, N63.32, N63.41, N63.42, N64.1, N64.4, N99.61, N99.62, N99.820, N99.821, N99.840-N99.843, Q18.0-Q18.9, Q87.2, Q87.3, Q87.5, Q87.81, Q87.89, Q89.2, Q89.8, R13.0, R13.10, R18.8, R19.02, R20.8, R20.9, R22.0-R22.2, R22.30-R22.33, R22.40-R22.43, R22.9, R29.4, R59.0-R59.9, R68.89, R69, R90.0, R92.1, R92.8, R99, S90.421D, S90.422D, S90.423D, S90.424D, S90.425D, S90.426D, S90.521D, S90.522D, S90.529D, S90.821D, S90.822D, S90.829D, S90.869A, Y84.4, Z00.6, Z12.89, Z85.21, Z85.3, Z85.6, Z86.79

**10005**

Fine needle aspiration biopsy, including ultrasound guidance; first lesion

**Clinical Responsibility**

With the patient properly prepared and anesthetized (typically with local anesthesia), the provider inserts a needle, such as an 18- to 25-gauge needle with an attached syringe, under ultrasound imaging guidance into a suspicious lesion or area of tissue and withdraws cells, tissue, or fluid for laboratory analysis. The provider may make several passes to obtain an adequate specimen. The provider then sends the aspirate to the pathology lab for analysis.

**Coding Tips**

Report +10006 for each additional lesion in addition to the primary code 10005.

For FNA of an initial lesion using other types of imaging guidance, see 10007 (fluoroscopy), 10009 (CT), and 10011 (MRI) and +10008, +10010 and +10012 for each additional lesion respectively.

**RVU Non-Facility** Work RVU: 1.81, PE RVU: 7.30, Malpractice RVU: 0.19, Total RVU: 9.30

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: XXX, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 1

**Modifier Allowances** 22, 51, 52, 53, 58, 59, 76, 77, 78, 79, 80, 81, 82, 99, AQ, AR, AS, GA, GC, GZ, LT, PD, Q6, QJ, RT, SC, XE, XP, XS, XU

## CCI Alerts (version 27.0)

0213T<sup>1</sup>, 0216T<sup>1</sup>, 10004<sup>1</sup>, 10005<sup>1</sup>, 10006<sup>1</sup>, 10010<sup>1</sup>, 10011<sup>1</sup>, 10012<sup>1</sup>, 10021<sup>1</sup>, 10035<sup>1</sup>, 11102<sup>1</sup>, 11103<sup>1</sup>, 11104<sup>1</sup>, 11105<sup>1</sup>, 11106<sup>1</sup>, 11107<sup>1</sup>, 19281<sup>1</sup>, 19283<sup>1</sup>, 19285<sup>1</sup>, 19287<sup>1</sup>, 36000<sup>1</sup>, 36410<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 61650<sup>1</sup>, 62324<sup>1</sup>, 62325<sup>1</sup>, 62326<sup>1</sup>, 62327<sup>1</sup>, 64415<sup>1</sup>, 64416<sup>1</sup>, 64417<sup>1</sup>, 64450<sup>1</sup>, 64454<sup>1</sup>, 64486<sup>1</sup>, 64487<sup>1</sup>, 64488<sup>1</sup>, 64489<sup>1</sup>, 64490<sup>1</sup>, 64493<sup>1</sup>, 76000<sup>1</sup>, 76380<sup>1</sup>, 76942<sup>1</sup>, 76998<sup>1</sup>, 77001<sup>1</sup>, 77002<sup>1</sup>, 77012<sup>1</sup>, 77021<sup>1</sup>, 96360<sup>1</sup>, 96365<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, J2001<sup>1</sup>

## ICD-10 CrossRef

C00.3, C01, C02.9, C04.1, C06.9, C07, C08.0, C12, C13.9, C15.9, C22.0-C22.4, C22.7, C22.8, C32.1, C32.8, C34.30-C34.32, C43.20-C43.22, C43.30-C43.39, C43.51-C43.59, C43.60-C43.62, C46.0, C50.011-C50.019, C50.111-C50.119, C50.211-C50.219, C50.411-C50.419, C50.811-C50.819, C50.911-C50.919, C51.9, C76.0, C76.1, C77.0, C77.3, C79.2, C79.81, C79.89, C79.9, C81.00-C81.09, C81.10-C81.19, C81.20-C81.29, C81.30-C81.39, C81.40-C81.49, C81.70-C81.79, C81.90-C81.99, C82.00-C82.09, C82.10-C82.19, C82.20-C82.29, C82.30-C82.39, C82.40-C82.49, C82.50-C82.59, C82.60-C82.69, C82.80-C82.89, C82.90-C82.99, C83.00-C83.09, C83.10-C83.19, C83.30-C83.39, C83.50-C83.59, C83.70-C83.79, C83.80-C83.89, C83.90-C83.99, C84.40-C84.49, C84.60-C84.69, C84.70-C84.79, C84.90-C84.99, C84.A0-C84.A9, C84.Z0-C84.Z9, C85.10-C85.19, C85.20-C85.29, C85.80-C85.89, C85.90-C85.99, C86.0-C86.5, C88.4, C88.8, C91.50-C91.52, C94.40-C94.42, C94.6, D03.20-D03.22, D03.30, D03.39, D03.51-D03.59, D03.60-D03.62, D05.00-D05.02, D05.10-D05.12, D05.80-D05.82, D05.90-D05.92, D11.0-D11.9, D17.0, D17.1, D17.20-D17.24, D17.30, D17.39, D17.72, D17.79, D17.9, D19.7, D21.0, D22.5, D22.70-D22.72, D23.5, D23.70-D23.72, D36.0, D36.7, D37.030-D37.039, D44.0-D44.2, D44.9, D47.1, D47.2, D47.9, D47.9, D48.1, D48.2, D48.60-D48.62, D48.7, D48.9, D49.0-D49.7, D49.9, D64.9, D75.9, D78.01, D78.02, D78.21, D78.22, D89.2, E01.0-E01.2, E03.4, E03.9, E04.0-E04.9, E06.0, E07.89, E07.9, E35, E36.01, E36.02, E65, E78.71, E89.820-E89.823, G97.31, G97.32, G97.51, G97.52, G97.63, G97.64, H66.10-H66.13, H69.80-H69.83, H93.8X1-H93.8X9, H94.80-H94.83, H95.21, H95.22, H95.41, H95.42, H95.53, H95.54, I42.0-I42.5, I42.8, I42.9, I70.235, I70.245, I70.335, I70.345, I70.435, I70.445, I70.535, I70.545, I70.635, I70.645, I70.735, I70.745, I82.91, I88.1-I88.9, I89.8, I97.410-I97.418, I97.42, I97.610-I97.618, I97.622, I97.640-I97.648, J95.61, J95.62, J95.830, J95.831, J95.862, J95.863, J98.4, K11.20-K11.23, K11.3-K11.6, K11.9, K91.61, K91.62, K91.840, K91.841, K91.870-K91.873, L02.31, L02.415, L02.416, L02.419, L02.91, L03.115, L03.116, L03.119, L03.125, L03.126, L03.129, L03.317, L03.327, L03.90, L03.91, L57.0, L76.01, L76.02, L76.21, L76.22, L76.31-L76.34, L97.501-L97.504, L97.509, L97.511-L97.514, L97.519, L97.521-L97.524, L97.529, L98.3, L98.7, M71.30, M79.4, M96.810, M96.811, M96.830, M96.831, M96.840-M96.843, N60.01-N60.09, N60.11-N60.19, N61.0, N62, N63.0, N63.10-N63.15, N63.20-N63.25, N63.31, N63.32, N63.41, N63.42, N64.1, N99.61, N99.62,

N99.820, N99.821, N99.840-N99.843, R18.8, R19.02, R20.8, R20.9, R22.0-R22.2, R22.30-R22.33, R22.40-R22.43, R22.9, R59.0-R59.9, R90.0, R92.1, R92.8, S14.111A-S14.111S, S14.112A-S14.112S, S14.113A-S14.113S, S14.114A-S14.114S, S14.115A-S14.115S, S14.116A-S14.116S, S14.117A-S14.117S, S14.118A-S14.118S, S14.119A-S14.119S, S14.151A-S14.151S, S14.152A-S14.152S, S14.153A-S14.153S, S14.154A-S14.154S, S14.155A-S14.155S, S14.156A-S14.156S, S14.157A-S14.157S, S14.158A-S14.158S, S14.159A-S14.159S, S24.111A-S24.111S, S24.112A-S24.112S, S24.113A-S24.113S, S24.114A-S24.114S, S24.119A-S24.119S, S24.151A-S24.151S, S24.152A-S24.152S, S24.153A-S24.153S, S24.154A-S24.154S, S24.159A-S24.159S, S34.111A-S34.111S, S34.112A-S34.112S, S34.113A-S34.113S, S34.114A-S34.114S, S34.115A-S34.115S, S34.119A-S34.119S, S34.121A-S34.121S, S34.122A-S34.122S, S34.123A-S34.123S, S34.124A-S34.124S, S34.125A-S34.125S, S34.129A-S34.129S, S90.869A, Y84.4, Z00.6, Z12.89, Z85.21, Z85.3, Z85.6, Z85.71, Z85.72

## +10008

Fine needle aspiration biopsy, including fluoroscopic guidance; each additional lesion (List separately in addition to code for primary procedure)

## Clinical Responsibility

With the patient properly prepared and anesthetized (typically with local anesthesia) and following FNA of an initial lesion, the provider inserts a needle, such as an 18- to 25-gauge needle with an attached syringe, under fluoroscopic imaging guidance into an additional suspicious lesion or area of tissue and withdraws cells, tissue, or fluid for laboratory analysis. The provider may make several passes to obtain an adequate specimen. The provider then sends the aspirate to the pathology lab for analysis.

## Coding Tips

For FNA of an initial lesion using other types of imaging guidance, see 10005 (ultrasound), 10009 (CT), and 10011 (MRI) and +10006, +10010 and +10012 for each additional lesion respectively.

For FNA without imaging guidance, report 10021 for the initial lesion and +10004 for each additional lesion.

## Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$55.42, Non Facility: \$159.77, OPPS Facility: \$38.24, OPPS Non Facility: \$38.24

**RVU Facility** Work RVU: 1.18, PE RVU: 0.41, Malpractice RVU: 0.12, Total RVU: 1.71

**RVU Non-Facility** Work RVU: 1.18, PE RVU: 3.63, Malpractice RVU: 0.12, Total RVU: 4.93

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: ZZZ, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 2

**Modifier Allowances** 22, 52, 53, 58, 59, 76, 77, 78, 79, 80, 81, 82, 99, AQ, AR, AS, GA, GC, GZ, LT, PD, Q6, QJ, RT, SC, XE, XP, XS, XU

62323<sup>0</sup>, 62324<sup>0</sup>, 62325<sup>0</sup>, 62326<sup>0</sup>, 62327<sup>0</sup>, 64400<sup>0</sup>, 64405<sup>0</sup>, 64408<sup>0</sup>, 64415<sup>0</sup>, 64416<sup>0</sup>, 64417<sup>0</sup>, 64418<sup>0</sup>, 64420<sup>0</sup>, 64421<sup>0</sup>, 64425<sup>0</sup>, 64430<sup>0</sup>, 64435<sup>0</sup>, 64445<sup>0</sup>, 64446<sup>0</sup>, 64447<sup>0</sup>, 64448<sup>0</sup>, 64449<sup>0</sup>, 64450<sup>1</sup>, 64451<sup>0</sup>, 64454<sup>1</sup>, 64461<sup>0</sup>, 64462<sup>0</sup>, 64463<sup>0</sup>, 64479<sup>0</sup>, 64480<sup>0</sup>, 64483<sup>0</sup>, 64484<sup>0</sup>, 64486<sup>0</sup>, 64487<sup>0</sup>, 64488<sup>0</sup>, 64489<sup>0</sup>, 64490<sup>0</sup>, 64491<sup>0</sup>, 64492<sup>0</sup>, 64493<sup>0</sup>, 64494<sup>0</sup>, 64495<sup>0</sup>, 64505<sup>0</sup>, 64510<sup>0</sup>, 64517<sup>0</sup>, 64520<sup>0</sup>, 64530<sup>0</sup>, 66987<sup>1</sup>, 66988<sup>1</sup>, 69990<sup>0</sup>, 75710<sup>1</sup>, 75716<sup>1</sup>, 92012<sup>1</sup>, 92014<sup>1</sup>, 93000<sup>1</sup>, 93005<sup>1</sup>, 93010<sup>1</sup>, 93040<sup>1</sup>, 93041<sup>1</sup>, 93042<sup>1</sup>, 93318<sup>1</sup>, 93355<sup>1</sup>, 94002<sup>1</sup>, 94200<sup>1</sup>, 94680<sup>1</sup>, 94681<sup>1</sup>, 94690<sup>1</sup>, 95812<sup>1</sup>, 95813<sup>1</sup>, 95816<sup>1</sup>, 95819<sup>1</sup>, 95822<sup>1</sup>, 95829<sup>1</sup>, 95955<sup>1</sup>, 96360<sup>1</sup>, 96361<sup>1</sup>, 96365<sup>1</sup>, 96366<sup>1</sup>, 96367<sup>1</sup>, 96368<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, 97597<sup>1</sup>, 97598<sup>1</sup>, 97602<sup>1</sup>, 97610<sup>1</sup>, 99155<sup>0</sup>, 99156<sup>0</sup>, 99157<sup>0</sup>, 99211<sup>1</sup>, 99212<sup>1</sup>, 99213<sup>1</sup>, 99214<sup>1</sup>, 99215<sup>1</sup>, 99217<sup>1</sup>, 99218<sup>1</sup>, 99219<sup>1</sup>, 99220<sup>1</sup>, 99221<sup>1</sup>, 99222<sup>1</sup>, 99223<sup>1</sup>, 99231<sup>1</sup>, 99232<sup>1</sup>, 99233<sup>1</sup>, 99234<sup>1</sup>, 99235<sup>1</sup>, 99236<sup>1</sup>, 99238<sup>1</sup>, 99239<sup>1</sup>, 99241<sup>1</sup>, 99242<sup>1</sup>, 99243<sup>1</sup>, 99244<sup>1</sup>, 99245<sup>1</sup>, 99251<sup>1</sup>, 99252<sup>1</sup>, 99253<sup>1</sup>, 99254<sup>1</sup>, 99255<sup>1</sup>, 99291<sup>1</sup>, 99292<sup>1</sup>, 99304<sup>1</sup>, 99305<sup>1</sup>, 99306<sup>1</sup>, 99307<sup>1</sup>, 99308<sup>1</sup>, 99309<sup>1</sup>, 99310<sup>1</sup>, 99315<sup>1</sup>, 99316<sup>1</sup>, 99334<sup>1</sup>, 99335<sup>1</sup>, 99336<sup>1</sup>, 99337<sup>1</sup>, 99347<sup>1</sup>, 99348<sup>1</sup>, 99349<sup>1</sup>, 99350<sup>1</sup>, 99374<sup>1</sup>, 99375<sup>1</sup>, 99377<sup>1</sup>, 99378<sup>1</sup>, 99446<sup>0</sup>, 99447<sup>0</sup>, 99448<sup>0</sup>, 99449<sup>0</sup>, 99451<sup>0</sup>, 99452<sup>0</sup>, 99495<sup>1</sup>, 99496<sup>1</sup>, G0463<sup>1</sup>, G0471<sup>1</sup>, J0670<sup>1</sup>, J2001<sup>1</sup>

## ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code.  
Please check individual payer guidelines for specific coverage determinations.

## +11045

Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)

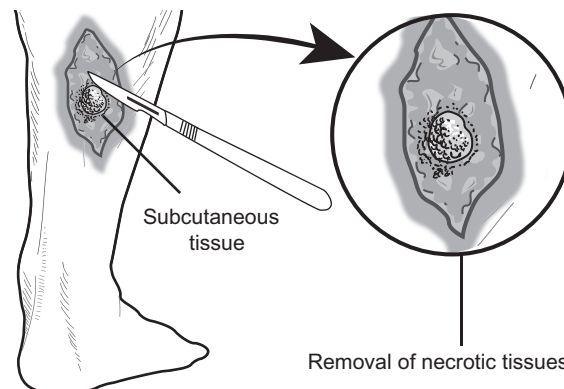
## Clinical Responsibility

At the same session that the provider performs a primary procedure for subcutaneous debridement of 20 cm<sup>2</sup>, the provider performs this debridement for up to an additional 20 cm<sup>2</sup>. When the patient is appropriately prepped and anesthetized, the provider uses appropriate instruments such as a scalpel, forceps, or other tools to remove necrotic or dead tissue from the wound. The provider excises large areas of affected tissues until she sees healthy bleeding on the skin edges. She then controls bleeding, applies an antibiotic, and may close the wound primarily or in layers, or may leave the wound to heal by secondary intention. Use this code as an add-on code with primary procedure code 11042.

## Coding Tips

Because +11045 is an add-on code, payers will not reimburse you if you report it without an appropriate primary code for debridement: 11042.

## Illustration



11045

## Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$24.63, Non Facility: \$39.54, OPPS Facility: \$16.20, OPPS Non Facility: \$16.20

**RVU Facility** Work RVU: 0.50, PE RVU: 0.18, Malpractice RVU: 0.08, Total RVU: 0.76

**RVU Non-Facility** Work RVU: 0.50, PE RVU: 0.64, Malpractice RVU: 0.08, Total RVU: 1.22

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: ZZZ, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 12

**Modifier Allowances** 22, 47, 52, 53, 58, 59, 76, 77, 78, 79, 80, 81, 82, 99, AQ, AR, AS, F1, F2, F3, F4, F5, F6, F7, F8, F9, FA, GA, GC, GJ, GR, KX, LT, PD, Q5, Q6, QJ, RT, T1, T2, T3, T4, T5, T6, T7, T8, T9, TA, XE, XP, XS, XU

## CCI Alerts (version 27.0)

20560<sup>1</sup>, 20561<sup>1</sup>, 29000<sup>1</sup>, 29010<sup>1</sup>, 29015<sup>1</sup>, 29035<sup>1</sup>, 29040<sup>1</sup>, 29044<sup>1</sup>, 29046<sup>1</sup>, 29049<sup>1</sup>, 29055<sup>1</sup>, 29058<sup>1</sup>, 29065<sup>1</sup>, 29075<sup>1</sup>, 29085<sup>1</sup>, 29086<sup>1</sup>, 29105<sup>1</sup>, 29125<sup>1</sup>, 29126<sup>1</sup>, 29130<sup>1</sup>, 29131<sup>1</sup>, 29200<sup>1</sup>, 29240<sup>1</sup>, 29260<sup>1</sup>, 29280<sup>1</sup>, 29305<sup>1</sup>, 29325<sup>1</sup>, 29345<sup>1</sup>, 29355<sup>1</sup>, 29358<sup>1</sup>, 29365<sup>1</sup>, 29405<sup>1</sup>, 29425<sup>1</sup>, 29435<sup>1</sup>, 29440<sup>1</sup>, 29445<sup>1</sup>, 29450<sup>1</sup>, 29505<sup>1</sup>, 29515<sup>1</sup>, 29520<sup>1</sup>, 29530<sup>1</sup>, 29540<sup>1</sup>, 29550<sup>1</sup>, 29580<sup>1</sup>, 29581<sup>1</sup>, 29584<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 66987<sup>1</sup>, 66988<sup>1</sup>, 96523<sup>0</sup>, 97597<sup>1</sup>, 97598<sup>1</sup>, 97602<sup>1</sup>

## ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code.  
Please check individual payer guidelines for specific coverage determinations.

## +11046

Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)



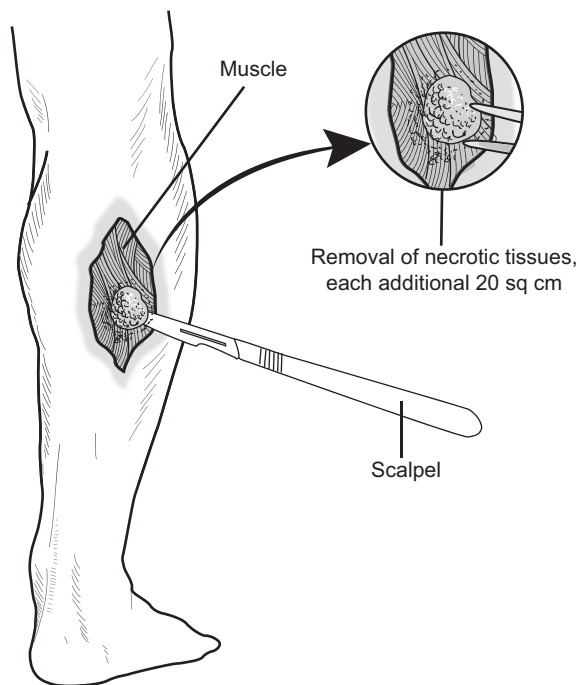
## Clinical Responsibility

At the same session that the provider performs a primary procedure for muscle and/or fascia debridement of 20 cm<sup>2</sup>, the provider performs this debridement for up to an additional 20 cm<sup>2</sup>. When the patient is appropriately prepped and anesthetized, the provider uses appropriate instruments such as a scalpel or scissors to remove a large area of damaged or necrotic tissues. This includes skin, subcutaneous tissue, fascia, and/or muscle. She debrides the affected tissue until she sees healthy tissue; she closes the wound in layers or may leave the wound to heal by secondary intention. Use this code for debridement as an add-on code with primary procedure code 11043.

## Coding Tips

Because +11046 is an add-on code, payers will not reimburse you if you report it without an appropriate primary code for debridement: 11043.

## Illustration



11046

## Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$52.50, Non Facility: \$70.65, OPPS Facility: \$33.38, OPPS Non Facility: \$33.38

**RVU Facility** Work RVU: 1.03, PE RVU: 0.39, Malpractice RVU: 0.20, Total RVU: 1.62

**RVU Non-Facility** Work RVU: 1.03, PE RVU: 0.95, Malpractice RVU: 0.20, Total RVU: 2.18

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: ZZZ, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 10

**Modifier Allowances** 22, 47, 52, 53, 58, 59, 76, 77, 78, 79, 80, 81, 82, 99, AQ, AR, AS, F1, F2, F3, F4, F5, F6, F7, F8, F9, FA, GA, GC, GJ, GR, KX, LT, PD, Q5, Q6, QJ, RT, T1, T2, T3, T4, T5, T6, T7, T8, T9, TA, XE, XP, XS, XU

## CCI Alerts (version 27.0)

20560<sup>1</sup>, 20561<sup>1</sup>, 29000<sup>1</sup>, 29010<sup>1</sup>, 29015<sup>1</sup>, 29035<sup>1</sup>, 29040<sup>1</sup>, 29044<sup>1</sup>, 29046<sup>1</sup>, 29049<sup>1</sup>, 29055<sup>1</sup>, 29058<sup>1</sup>, 29065<sup>1</sup>, 29075<sup>1</sup>, 29085<sup>1</sup>, 29086<sup>1</sup>, 29105<sup>1</sup>, 29125<sup>1</sup>, 29126<sup>1</sup>, 29130<sup>1</sup>, 29131<sup>1</sup>, 29200<sup>1</sup>, 29240<sup>1</sup>, 29260<sup>1</sup>, 29280<sup>1</sup>, 29305<sup>1</sup>, 29325<sup>1</sup>, 29345<sup>1</sup>, 29355<sup>1</sup>, 29358<sup>1</sup>, 29365<sup>1</sup>, 29405<sup>1</sup>, 29425<sup>1</sup>, 29435<sup>1</sup>, 29440<sup>1</sup>, 29445<sup>1</sup>, 29450<sup>1</sup>, 29505<sup>1</sup>, 29515<sup>1</sup>, 29520<sup>1</sup>, 29530<sup>1</sup>, 29540<sup>1</sup>, 29550<sup>1</sup>, 29580<sup>1</sup>, 29581<sup>1</sup>, 29584<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 66987<sup>1</sup>, 66988<sup>1</sup>, 96523<sup>0</sup>, 97597<sup>1</sup>, 97598<sup>1</sup>, 97602<sup>1</sup>, J0670<sup>1</sup>, J2001<sup>1</sup>

## ICD-10 CrossRef

ICD-10-CM contains hundreds of matches for this code.

Please check individual payer guidelines for specific coverage determinations.

## +11047

Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)

## Clinical Responsibility

At the same session that the provider performs a primary procedure for bone debridement of 20 cm<sup>2</sup>, the provider performs debridement for up to an additional 20 cm<sup>2</sup>. When the patient is appropriately prepped and anesthetized, the provider uses a scalpel, scissors, or other tools to remove large areas of necrotic affected tissue from bone as well as the epidermis, dermis, subcutaneous tissue, muscle and/or fascia as needed. Once she reaches healthy tissue, she closes the wound by primary closure or in layers or may leave the wound to heal by secondary intention.

## Coding Tips

Because +11047 is an add-on code, payers will not reimburse you if you report it without an appropriate primary code for debridement: 11044.

## Fee Schedule

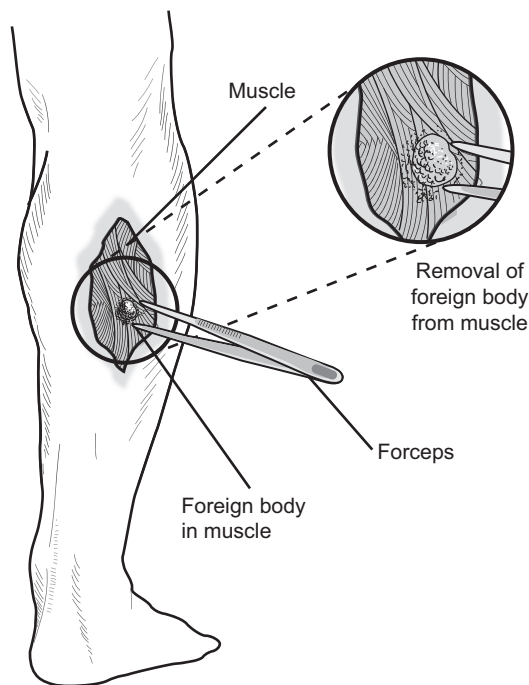
**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$92.36, Non Facility: \$116.67, OPPS Facility: \$58.34, OPPS Non Facility: \$58.34

**RVU Facility** Work RVU: 1.80, PE RVU: 0.69, Malpractice RVU: 0.36, Total RVU: 2.85

**RVU Non-Facility** Work RVU: 1.80, PE RVU: 1.44, Malpractice RVU: 0.36, Total RVU: 3.60

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: ZZZ, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 10

## Illustration



20520, 20525

## Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$141.95, Non Facility: \$211.95, OPPS Facility: \$61.58, OPPS Non Facility: \$61.58

**RVU Facility** Work RVU: 1.90, PE RVU: 2.19, Malpractice RVU: 0.29, Total RVU: 4.38

**RVU Non-Facility** Work RVU: 1.90, PE RVU: 4.35, Malpractice RVU: 0.29, Total RVU: 6.54

**Indicators** Preoperative: 10.00, Intraoperative: 80.00, Postoperative: 10.00, Total RVU: 100, Global Period: 010, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 2

**Modifier Allowances** 22, 47, 51, 52, 53, 54, 55, 56, 58, 59, 63, 76, 77, 78, 79, 99, AG, AQ, AR, CR, ET, GA, GC, GJ, GR, KX, LT, PD, Q5, Q6, QJ, RT, XE, XP, XS, XU

## CCI Alerts (version 27.0)

0213T<sup>0</sup>, 0216T<sup>0</sup>, 0490T<sup>1</sup>, 0596T<sup>1</sup>, 0597T<sup>1</sup>, 11000<sup>1</sup>, 11001<sup>1</sup>, 11004<sup>1</sup>, 11005<sup>1</sup>, 11006<sup>1</sup>, 11042<sup>1</sup>, 11043<sup>1</sup>, 11044<sup>1</sup>, 11045<sup>1</sup>, 11046<sup>1</sup>, 11047<sup>1</sup>, 12001<sup>1</sup>, 12002<sup>1</sup>, 12004<sup>1</sup>, 12005<sup>1</sup>, 12006<sup>1</sup>, 12007<sup>1</sup>, 12011<sup>1</sup>, 12013<sup>1</sup>, 12014<sup>1</sup>, 12015<sup>1</sup>, 12016<sup>1</sup>, 12017<sup>1</sup>, 12018<sup>1</sup>, 12020<sup>1</sup>, 12021<sup>1</sup>, 12031<sup>1</sup>, 12032<sup>1</sup>, 12034<sup>1</sup>, 12035<sup>1</sup>, 12036<sup>1</sup>, 12037<sup>1</sup>, 12041<sup>1</sup>, 12042<sup>1</sup>, 12044<sup>1</sup>, 12045<sup>1</sup>, 12046<sup>1</sup>, 12047<sup>1</sup>, 12051<sup>1</sup>, 12052<sup>1</sup>, 12053<sup>1</sup>, 12054<sup>1</sup>, 12055<sup>1</sup>, 12056<sup>1</sup>, 12057<sup>1</sup>, 13100<sup>1</sup>, 13101<sup>1</sup>, 13102<sup>1</sup>, 13120<sup>1</sup>, 13121<sup>1</sup>, 13122<sup>1</sup>, 13131<sup>1</sup>, 13132<sup>1</sup>, 13133<sup>1</sup>, 13151<sup>1</sup>, 13152<sup>1</sup>, 13153<sup>1</sup>, 20103<sup>1</sup>, 20200<sup>1</sup>, 20205<sup>1</sup>, 20526<sup>1</sup>, 20527<sup>1</sup>, 20550<sup>1</sup>, 20551<sup>1</sup>, 20552<sup>1</sup>, 20553<sup>1</sup>, 20560<sup>1</sup>, 20561<sup>1</sup>, 24300<sup>1</sup>, 25259<sup>1</sup>, 25295<sup>1</sup>, 26340<sup>1</sup>, 27680<sup>1</sup>, 27681<sup>1</sup>, 36000<sup>1</sup>, 36400<sup>1</sup>, 36405<sup>1</sup>, 36406<sup>1</sup>, 36410<sup>1</sup>, 36420<sup>1</sup>, 36425<sup>1</sup>, 36430<sup>1</sup>, 36440<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 36600<sup>1</sup>, 36640<sup>1</sup>, 43752<sup>1</sup>, 51701<sup>1</sup>, 51702<sup>1</sup>, 51703<sup>1</sup>, 62320<sup>0</sup>, 62321<sup>0</sup>, 62322<sup>0</sup>, 62323<sup>0</sup>, 62324<sup>0</sup>, 62325<sup>0</sup>, 62326<sup>0</sup>, 62327<sup>0</sup>, 64400<sup>0</sup>, 64405<sup>0</sup>, 64408<sup>0</sup>, 64415<sup>0</sup>, 64416<sup>0</sup>, 64417<sup>0</sup>, 64418<sup>0</sup>, 64420<sup>0</sup>, 64421<sup>0</sup>, 64425<sup>0</sup>, 64430<sup>0</sup>, 64435<sup>0</sup>, 64445<sup>0</sup>, 64446<sup>0</sup>, 64447<sup>0</sup>, 64448<sup>0</sup>,

64449<sup>0</sup>, 64450<sup>1</sup>, 64451<sup>0</sup>, 64454<sup>1</sup>, 64461<sup>0</sup>, 64462<sup>0</sup>, 64463<sup>0</sup>, 64479<sup>0</sup>, 64480<sup>0</sup>, 64483<sup>0</sup>, 64484<sup>0</sup>, 64486<sup>0</sup>, 64487<sup>0</sup>, 64488<sup>0</sup>, 64489<sup>0</sup>, 64490<sup>0</sup>, 64491<sup>0</sup>, 64492<sup>0</sup>, 64493<sup>0</sup>, 64494<sup>0</sup>, 64495<sup>0</sup>, 64505<sup>0</sup>, 64510<sup>0</sup>, 64517<sup>0</sup>, 64520<sup>0</sup>, 64530<sup>0</sup>, 69990<sup>0</sup>, 92012<sup>1</sup>, 92014<sup>1</sup>, 93000<sup>1</sup>, 93005<sup>1</sup>, 93010<sup>1</sup>, 93040<sup>1</sup>, 93041<sup>1</sup>, 93042<sup>1</sup>, 93318<sup>1</sup>, 93355<sup>1</sup>, 94002<sup>1</sup>, 94200<sup>1</sup>, 94680<sup>1</sup>, 94681<sup>1</sup>, 94690<sup>1</sup>, 95812<sup>1</sup>, 95813<sup>1</sup>, 95816<sup>1</sup>, 95819<sup>1</sup>, 95822<sup>1</sup>, 95829<sup>1</sup>, 95955<sup>1</sup>, 96360<sup>1</sup>, 96361<sup>1</sup>, 96365<sup>1</sup>, 96366<sup>1</sup>, 96367<sup>1</sup>, 96368<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, 97597<sup>1</sup>, 97598<sup>1</sup>, 97602<sup>1</sup>, 99155<sup>0</sup>, 99156<sup>0</sup>, 99157<sup>0</sup>, 99211<sup>1</sup>, 99212<sup>1</sup>, 99213<sup>1</sup>, 99214<sup>1</sup>, 99215<sup>1</sup>, 99217<sup>1</sup>, 99218<sup>1</sup>, 99219<sup>1</sup>, 99220<sup>1</sup>, 99221<sup>1</sup>, 99222<sup>1</sup>, 99223<sup>1</sup>, 99231<sup>1</sup>, 99232<sup>1</sup>, 99233<sup>1</sup>, 99234<sup>1</sup>, 99235<sup>1</sup>, 99236<sup>1</sup>, 99238<sup>1</sup>, 99239<sup>1</sup>, 99241<sup>1</sup>, 99242<sup>1</sup>, 99243<sup>1</sup>, 99244<sup>1</sup>, 99245<sup>1</sup>, 99251<sup>1</sup>, 99252<sup>1</sup>, 99253<sup>1</sup>, 99254<sup>1</sup>, 99255<sup>1</sup>, 99291<sup>1</sup>, 99292<sup>1</sup>, 99304<sup>1</sup>, 99305<sup>1</sup>, 99306<sup>1</sup>, 99307<sup>1</sup>, 99308<sup>1</sup>, 99309<sup>1</sup>, 99310<sup>1</sup>, 99315<sup>1</sup>, 99316<sup>1</sup>, 99334<sup>1</sup>, 99335<sup>1</sup>, 99336<sup>1</sup>, 99337<sup>1</sup>, 99347<sup>1</sup>, 99348<sup>1</sup>, 99349<sup>1</sup>, 99350<sup>1</sup>, 99374<sup>1</sup>, 99375<sup>1</sup>, 99377<sup>1</sup>, 99378<sup>1</sup>, 99446<sup>0</sup>, 99447<sup>0</sup>, 99448<sup>0</sup>, 99449<sup>0</sup>, 99451<sup>0</sup>, 99452<sup>0</sup>, 99495<sup>0</sup>, 99496<sup>0</sup>, G0168<sup>1</sup>, G0463<sup>1</sup>, G0471<sup>1</sup>, J0670<sup>1</sup>, J2001<sup>1</sup>

## ICD-10 CrossRef

L92.3, M60.20, M60.211-M60.219, M60.221-M60.229, M60.231-M60.239, M60.241-M60.249, M60.251-M60.259, M60.261-M60.269, M60.271-M60.279, M60.28, M79.10, M79.18, M79.5, S01.421A, S01.422A, S01.429A, S01.441A, S01.442A, S01.449A, S01.521A, S01.541A, S01.82XA, S01.84XA, S09.12XD, S09.12XS, S11.82XA, S11.84XA, S11.92XA, S11.94XA, S21.121A, S21.122A, S21.129A, S21.141A, S21.142A, S21.149A, S21.221A, S21.222A, S21.229A, S21.241A, S21.242A, S21.249A, S21.92XA, S21.94XA, S31.020A, S31.040A, S31.120A, S31.121A, S31.122A, S31.123A, S31.124A, S31.125A, S31.129A, S31.140A, S31.141A, S31.142A, S31.143A, S31.144A, S31.145A, S31.149A, S41.021A-S41.021S, S41.022A-S41.022S, S41.029A-S41.029S, S41.041A, S41.042A, S41.049A, S41.121A-S41.121S, S41.122A-S41.122S, S41.129A-S41.129S, S41.141A, S41.142A, S41.149A, S51.021A, S51.022A, S51.029A, S51.041A, S51.042A, S51.049A, S51.821A, S51.822A, S51.829A, S51.841A, S51.842A, S51.849A, S61.021A-S61.021S, S61.022A-S61.022S, S61.029A-S61.029S, S61.041A, S61.042A, S61.049A, S61.121A, S61.122A, S61.129A, S61.141A, S61.142A, S61.149A, S61.220A, S61.221A, S61.222A, S61.223A, S61.224A, S61.225A, S61.226A, S61.227A, S61.228A, S61.229A, S61.240A, S61.241A, S61.242A, S61.243A, S61.244A, S61.245A, S61.246A, S61.247A, S61.248A, S61.249A, S61.320A, S61.321A, S61.322A, S61.323A, S61.324A, S61.325A, S61.326A, S61.327A, S61.328A, S61.329A, S61.340A, S61.341A, S61.342A, S61.343A, S61.344A, S61.345A, S61.346A, S61.347A, S61.348A, S61.349A, S61.421A-S61.421S, S61.422A-S61.422S, S61.429A-S61.429S, S61.441A, S61.442A, S61.449A, S61.521A-S61.521S, S61.522A-S61.522S, S61.529A-S61.529S, S61.541A, S61.542A, S61.549A, S71.021A, S71.022A, S71.029A, S71.041A, S71.042A, S71.049A, S71.121A, S71.122A, S71.129A-S71.129S, S71.141A, S71.142A, S71.149A, S81.021A, S81.021D, S81.022A, S81.022D, S81.029A, S81.029D, S81.041A, S81.042A, S81.049A, S81.051D, S81.052D, S81.059D, S81.821A-S81.821S, S81.822A-S81.822S, S81.829A-S81.829S, S81.841A, S81.842A, S81.849A, S86.001D, S86.002D, S86.009D, S86.021D, S86.021S, S86.022D, S86.022S, S86.029D, S86.029S, S86.091D, S86.092D, S86.099D, S86.101D, S86.102D, S90.851D, S90.852D, S90.859D, S91.021A, S91.022A, S91.029A, S91.041A, S91.042A, S91.049A, S91.121A, S91.122A, S91.123A, S91.124A, S91.125A, S91.126A, S91.129A, S91.141A, S91.142A, S91.143A, S91.144A, S91.145A, S91.146A, S91.149A, S91.221A, S91.222A, S91.223A, S91.224A, S91.225A, S91.226A, S91.229A, S91.241A, S91.242A, S91.243A, S91.244A, S91.245A,

S91.246A, S91.249A, S91.321A, S91.322A, S91.329A, S91.341A, S91.342A, S91.349A, X00.2XXA-X00.2XXS, X00.4XXA-X00.4XXS, X00.5XXA, X00.5XXS, X00.8XXA-X00.8XXS, X01.4XXA-X01.4XXS, X01.8XXA-X01.8XXS, X02.2XXA-X02.2XXS, X02.4XXA-X02.4XXS, X02.5XXA-X02.5XXS, X02.8XXA-X02.8XXS, X03.4XXA-X03.4XXS, X03.8XXA-X03.8XXS, Y36.231A-Y36.231S, Y36.240A-Y36.240S, Y36.241A-Y36.241S, Y36.250A-Y36.250S, Y36.251A-Y36.251S, Y36.260A-Y36.260S, Y36.261A-Y36.261S, Y36.290A-Y36.290S, Y36.291A-Y36.291S, Y36.300A-Y36.300S, Y36.301A-Y36.301S, Y36.310A-Y36.310S, Y36.311A-Y36.311S, Y36.320A-Y36.320S, Y36.321A-Y36.321S, Y36.330A-Y36.330S, Y36.331A-Y36.331S, Y36.390A-Y36.390S, Y36.391A-Y36.391S, Y36.420A-Y36.420S, Y36.421A-Y36.421S, Y36.430A-Y36.430S, Y36.431A-Y36.431S, Y36.490A-Y36.490S, Y36.491A-Y36.491S, Y36.810A-Y36.810S, Y36.811A-Y36.811S, Y36.820A-Y36.820S, Y36.821A-Y36.821S, Y36.880A-Y36.880S, Y36.881A-Y36.881S, Y36.890A-Y36.890S, Y36.891A-Y36.891S, Y36.90XA-Y36.90XS, Y36.92XA-Y36.92XS, Y37.010A-Y37.010S, Y37.011A-Y37.011S, Y37.020A-Y37.020S, Y37.021A-Y37.021S, Y37.030A-Y37.030S, Y37.031A-Y37.031S, Y37.040A-Y37.040S, Y37.041A-Y37.041S, Y37.100A-Y37.100S, Y37.101A-Y37.101S, Y37.110A-Y37.110S, Y37.111A-Y37.111S, Y37.120A-Y37.120S, Y37.121A-Y37.121S, Y37.130A-Y37.130S, Y37.131A-Y37.131S, Y37.140A-Y37.140S, Y37.141A-Y37.141S, Y37.190A-Y37.190S, Y37.191A-Y37.191S, Y37.200A-Y37.200S, Y37.201A-Y37.201S, Z18.09, Z18.10, Z18.11, Z18.2, Z18.33, Z18.81, Z57.4-Z57.6

## 20525

Removal of foreign body in muscle or tendon sheath; deep or complicated

### Clinical Responsibility

When the patient is appropriately prepped and the area anesthetized, the provider incises the skin over the targeted area and separates the tissues. When she reaches the muscle or tendon sheath, the depth of the foreign body or presence of infection may require more difficult dissection or removal of necrotic, or dead, tissue. She removes the foreign body and closes the surgical opening with sutures after thoroughly cleaning the site. The provider may rely on X-ray images taken prior to the procedure to locate the foreign body in the soft tissue and a postprocedure image to ensure the complete removal of all foreign bodies.

### Coding Tips

More time and effort is required for 20525 than for 20520, Removal of foreign body in muscle or tendon sheath, simple.

Report radiologic imaging separately.

Report foreign body removal from body areas that do not have their own foreign body removal codes, such as the head, neck, flank, spine, abdomen, wrist, forearm, and fingers, using 20520, Removal of foreign body in muscle or tendon sheath, simple, or 20525, Removal of foreign body in muscle or tendon sheath, deep or complicated. Avoid using these general musculoskeletal foreign body removal codes if a code exists for the specific body part.

## Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$235.61, Non Facility: \$467.01, OPPS Facility: \$114.73, OPPS Non Facility: \$114.73

**RVU Facility** Work RVU: 3.54, PE RVU: 3.08, Malpractice RVU: 0.65, Total RVU: 7.27

**RVU Non-Facility** Work RVU: 3.54, PE RVU: 10.22, Malpractice RVU: 0.65, Total RVU: 14.41

**Indicators** Preoperative: 10.00, Intraoperative: 80.00, Postoperative: 10.00, Total RVU: 100, Global Period: 010, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 4

**Modifier Allowances** 22, 47, 51, 52, 53, 54, 55, 56, 58, 59, 63, 76, 77, 78, 79, 99, AQ, AR, CR, ET, GA, GC, GJ, GR, KX, LT, PD, Q5, Q6, QJ, RT, XE, XP, XS, XU

## CCI Alerts (version 27.0)

0213T<sup>0</sup>, 0216T<sup>0</sup>, 0490T<sup>1</sup>, 0596T<sup>1</sup>, 0597T<sup>1</sup>, 11000<sup>1</sup>, 11001<sup>1</sup>, 11004<sup>1</sup>, 11005<sup>1</sup>, 11006<sup>1</sup>, 11042<sup>1</sup>, 11043<sup>1</sup>, 11044<sup>1</sup>, 11045<sup>1</sup>, 11046<sup>1</sup>, 11047<sup>1</sup>, 12001<sup>1</sup>, 12002<sup>1</sup>, 12004<sup>1</sup>, 12005<sup>1</sup>, 12006<sup>1</sup>, 12007<sup>1</sup>, 12011<sup>1</sup>, 12013<sup>1</sup>, 12014<sup>1</sup>, 12015<sup>1</sup>, 12016<sup>1</sup>, 12017<sup>1</sup>, 12018<sup>1</sup>, 12020<sup>1</sup>, 12021<sup>1</sup>, 12031<sup>1</sup>, 12032<sup>1</sup>, 12034<sup>1</sup>, 12035<sup>1</sup>, 12036<sup>1</sup>, 12037<sup>1</sup>, 12041<sup>1</sup>, 12042<sup>1</sup>, 12044<sup>1</sup>, 12045<sup>1</sup>, 12046<sup>1</sup>, 12047<sup>1</sup>, 12051<sup>1</sup>, 12052<sup>1</sup>, 12053<sup>1</sup>, 12054<sup>1</sup>, 12055<sup>1</sup>, 12056<sup>1</sup>, 12057<sup>1</sup>, 13100<sup>1</sup>, 13101<sup>1</sup>, 13102<sup>1</sup>, 13120<sup>1</sup>, 13121<sup>1</sup>, 13122<sup>1</sup>, 13131<sup>1</sup>, 13132<sup>1</sup>, 13133<sup>1</sup>, 13151<sup>1</sup>, 13152<sup>1</sup>, 13153<sup>1</sup>, 20103<sup>1</sup>, 20200<sup>1</sup>, 20205<sup>1</sup>, 20520<sup>1</sup>, 20526<sup>1</sup>, 20527<sup>1</sup>, 20550<sup>1</sup>, 20551<sup>1</sup>, 20552<sup>1</sup>, 20553<sup>1</sup>, 20560<sup>1</sup>, 20561<sup>1</sup>, 21501<sup>1</sup>, 23030<sup>1</sup>, 24300<sup>1</sup>, 25028<sup>1</sup>, 25259<sup>1</sup>, 25295<sup>1</sup>, 26340<sup>1</sup>, 26440<sup>1</sup>, 26442<sup>1</sup>, 26445<sup>1</sup>, 26449<sup>1</sup>, 26990<sup>1</sup>, 27301<sup>1</sup>, 27603<sup>1</sup>, 27680<sup>1</sup>, 27681<sup>1</sup>, 28220<sup>1</sup>, 28222<sup>1</sup>, 28225<sup>1</sup>, 28226<sup>1</sup>, 29125<sup>1</sup>, 36000<sup>1</sup>, 36400<sup>1</sup>, 36405<sup>1</sup>, 36406<sup>1</sup>, 36410<sup>1</sup>, 36420<sup>1</sup>, 36425<sup>1</sup>, 36430<sup>1</sup>, 36440<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 36600<sup>1</sup>, 36640<sup>1</sup>, 43752<sup>1</sup>, 49000<sup>0</sup>, 49002<sup>1</sup>, 51701<sup>1</sup>, 51702<sup>1</sup>, 51703<sup>1</sup>, 62320<sup>0</sup>, 62321<sup>0</sup>, 62322<sup>0</sup>, 62323<sup>0</sup>, 62324<sup>0</sup>, 62325<sup>0</sup>, 62326<sup>0</sup>, 62327<sup>0</sup>, 64400<sup>0</sup>, 64405<sup>0</sup>, 64408<sup>0</sup>, 64415<sup>0</sup>, 64416<sup>0</sup>, 64417<sup>0</sup>, 64418<sup>0</sup>, 64420<sup>0</sup>, 64421<sup>0</sup>, 64425<sup>0</sup>, 64430<sup>0</sup>, 64435<sup>0</sup>, 64445<sup>0</sup>, 64446<sup>0</sup>, 64447<sup>0</sup>, 64448<sup>0</sup>, 64449<sup>0</sup>, 64450<sup>1</sup>, 64451<sup>0</sup>, 64454<sup>1</sup>, 64461<sup>0</sup>, 64462<sup>0</sup>, 64463<sup>0</sup>, 64479<sup>0</sup>, 64480<sup>0</sup>, 64483<sup>0</sup>, 64484<sup>0</sup>, 64486<sup>0</sup>, 64487<sup>0</sup>, 64488<sup>0</sup>, 64489<sup>0</sup>, 64490<sup>0</sup>, 64491<sup>0</sup>, 64492<sup>0</sup>, 64493<sup>0</sup>, 64494<sup>0</sup>, 64495<sup>0</sup>, 64505<sup>0</sup>, 64510<sup>0</sup>, 64517<sup>0</sup>, 64520<sup>0</sup>, 64530<sup>0</sup>, 69990<sup>0</sup>, 76000<sup>1</sup>, 77001<sup>1</sup>, 87102<sup>0</sup>, 92012<sup>1</sup>, 92014<sup>1</sup>, 93000<sup>1</sup>, 93005<sup>1</sup>, 93010<sup>1</sup>, 93040<sup>1</sup>, 93041<sup>1</sup>, 93042<sup>1</sup>, 93318<sup>1</sup>, 93355<sup>1</sup>, 94002<sup>1</sup>, 94200<sup>1</sup>, 94680<sup>1</sup>, 94681<sup>1</sup>, 94690<sup>1</sup>, 95812<sup>1</sup>, 95813<sup>1</sup>, 95816<sup>1</sup>, 95819<sup>1</sup>, 95822<sup>1</sup>, 95829<sup>1</sup>, 95955<sup>1</sup>, 96360<sup>1</sup>, 96361<sup>1</sup>, 96365<sup>1</sup>, 96366<sup>1</sup>, 96367<sup>1</sup>, 96368<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, 97597<sup>1</sup>, 97598<sup>1</sup>, 97602<sup>1</sup>, 99155<sup>0</sup>, 99156<sup>0</sup>, 99157<sup>0</sup>, 99211<sup>1</sup>, 99212<sup>1</sup>, 99213<sup>1</sup>, 99214<sup>1</sup>, 99215<sup>1</sup>, 99217<sup>1</sup>, 99218<sup>1</sup>, 99219<sup>1</sup>, 99220<sup>1</sup>, 99221<sup>1</sup>, 99222<sup>1</sup>, 99223<sup>1</sup>, 99231<sup>1</sup>, 99232<sup>1</sup>, 99233<sup>1</sup>, 99234<sup>1</sup>, 99235<sup>1</sup>, 99236<sup>1</sup>, 99238<sup>1</sup>, 99239<sup>1</sup>, 99241<sup>1</sup>, 99242<sup>1</sup>, 99243<sup>1</sup>, 99244<sup>1</sup>, 99245<sup>1</sup>, 99251<sup>1</sup>, 99252<sup>1</sup>, 99253<sup>1</sup>, 99254<sup>1</sup>, 99255<sup>1</sup>, 99291<sup>1</sup>, 99292<sup>1</sup>, 99304<sup>1</sup>, 99305<sup>1</sup>, 99306<sup>1</sup>, 99307<sup>1</sup>, 99308<sup>1</sup>, 99309<sup>1</sup>, 99310<sup>1</sup>, 99315<sup>1</sup>, 99316<sup>1</sup>, 99334<sup>1</sup>, 99335<sup>1</sup>, 99336<sup>1</sup>, 99337<sup>1</sup>, 99347<sup>1</sup>, 99348<sup>1</sup>, 99349<sup>1</sup>, 99350<sup>1</sup>, 99374<sup>1</sup>, 99375<sup>1</sup>, 99377<sup>1</sup>, 99378<sup>1</sup>, 99446<sup>0</sup>, 99447<sup>0</sup>, 99448<sup>0</sup>, 99449<sup>0</sup>, 99451<sup>0</sup>, 99452<sup>0</sup>, 99495<sup>0</sup>, 99496<sup>0</sup>, G0463<sup>1</sup>, G0471<sup>1</sup>, J0670<sup>1</sup>, J2001<sup>1</sup>

## ICD-10 CrossRef

L92.3, M60.20, M60.211-M60.219, M60.221-M60.229, M60.231-M60.239, M60.241-M60.249, M60.251-M60.259, M60.261-M60.269, M60.271-M60.279, M60.28, M79.10, M79.18, M79.5, S01.82XA, S01.84XA, S09.12XD, S09.12XS, S11.82XA, S11.84XA, S11.92XA, S11.94XA, S21.121A, S21.122A, S21.129A,



Y36.250A-Y36.250S, Y36.251A-Y36.251S, Y36.260A-Y36.260S, Y36.261A-Y36.261S, Y36.290A-Y36.290S, Y36.291A-Y36.291S, Y36.300A-Y36.300S, Y36.301A-Y36.301S, Y36.310A-Y36.310S, Y36.311A-Y36.311S, Y36.320A-Y36.320S, Y36.321A-Y36.321S, Y36.330A-Y36.330S, Y36.331A-Y36.331S, Y36.390A-Y36.390S, Y36.391A-Y36.391S, Y36.420A-Y36.420S, Y36.421A-Y36.421S, Y36.430A-Y36.430S, Y36.431A-Y36.431S, Y36.440A-Y36.440S, Y36.441A-Y36.441S, Y36.450A-Y36.450S, Y36.451A-Y36.451S, Y36.490A-Y36.490S, Y36.491A-Y36.491S, Y36.810A-Y36.810S, Y36.811A-Y36.811S, Y36.820A-Y36.820S, Y36.821A-Y36.821S, Y36.880A-Y36.880S, Y36.881A-Y36.881S, Y36.890A-Y36.890S, Y36.891A-Y36.891S, Y36.90XA-Y36.90XS, Y36.92XA-Y36.92XS, Y37.010A-Y37.010S, Y37.011A-Y37.011S, Y37.020A-Y37.020S, Y37.021A-Y37.021S, Y37.030A-Y37.030S, Y37.031A-Y37.031S, Y37.040A-Y37.040S, Y37.041A-Y37.041S, Y37.100A-Y37.100S, Y37.101A-Y37.101S, Y37.110A-Y37.110S, Y37.111A-Y37.111S, Y37.120A-Y37.120S, Y37.121A-Y37.121S, Y37.130A-Y37.130S, Y37.131A-Y37.131S, Y37.140A-Y37.140S, Y37.141A-Y37.141S, Y37.190A-Y37.190S, Y37.191A-Y37.191S, Y37.200A-Y37.200S, Y37.201A-Y37.201S, Z09, Z47.81-Z47.89

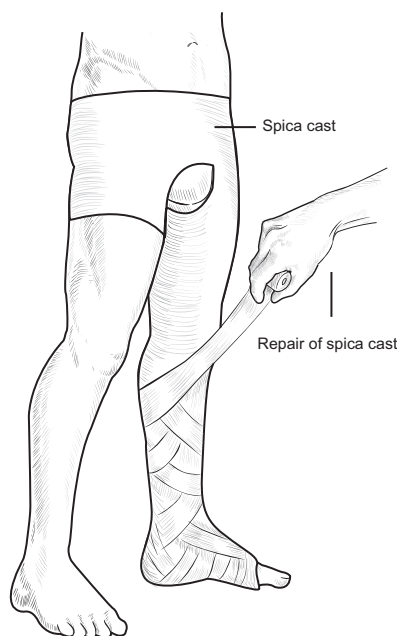
## 29720

Repair of spica, body cast or jacket

### Clinical Responsibility

Providers apply spica casts, body casts, or jacket casts to immobilize specific body areas until they heal. The spica, body cast, or jacket is subject to damage over time, so the provider evaluates and repairs the cast. One cause of damage is normal wear and tear. The provider may also repair an opening made in the cast to evaluate a wound or may use the repair to adjust the cast for better function.

### Illustration



29720

### Fee Schedule

**Medicare Fees National** Conversion Factor: 32.4085, Facility: \$41.16, Non Facility: \$80.37, OPPS Facility: \$22.04, OPPS Non Facility: \$22.04

**RVU Facility** Work RVU: 0.68, PE RVU: 0.46, Malpractice RVU: 0.13, Total RVU: 1.27

**RVU Non-Facility** Work RVU: 0.68, PE RVU: 1.67, Malpractice RVU: 0.13, Total RVU: 2.48

**Indicators** Preoperative: 0.00, Intraoperative: 0.00, Postoperative: 0.00, Total RVU: 0, Global Period: 000, Radiology Diagnostic Test: 99, Code Status: A, PC/TC Indicator: 0, Endoscopic Base Code: None, MUE: 1

**Modifier Allowances** 22, 47, 51, 52, 58, 59, 63, 76, 77, 78, 79, 99, AQ, AR, CR, ET, GA, GC, GJ, GR, KX, PD, Q5, Q6, QJ, XE, XP, XS, XU

### CCI Alerts (version 27.0)

0213T<sup>0</sup>, 0216T<sup>0</sup>, 0596T<sup>1</sup>, 0597T<sup>1</sup>, 12001<sup>1</sup>, 12002<sup>1</sup>, 12004<sup>1</sup>, 12005<sup>1</sup>, 12006<sup>1</sup>, 12007<sup>1</sup>, 12011<sup>1</sup>, 12013<sup>1</sup>, 12014<sup>1</sup>, 12015<sup>1</sup>, 12016<sup>1</sup>, 12017<sup>1</sup>, 12018<sup>1</sup>, 12020<sup>1</sup>, 12021<sup>1</sup>, 12031<sup>1</sup>, 12032<sup>1</sup>, 12034<sup>1</sup>, 12035<sup>1</sup>, 12036<sup>1</sup>, 12037<sup>1</sup>, 12041<sup>1</sup>, 12042<sup>1</sup>, 12044<sup>1</sup>, 12045<sup>1</sup>, 12046<sup>1</sup>, 12047<sup>1</sup>, 12051<sup>1</sup>, 12052<sup>1</sup>, 12053<sup>1</sup>, 12054<sup>1</sup>, 12055<sup>1</sup>, 12056<sup>1</sup>, 12057<sup>1</sup>, 13100<sup>1</sup>, 13101<sup>1</sup>, 13102<sup>1</sup>, 13120<sup>1</sup>, 13121<sup>1</sup>, 13122<sup>1</sup>, 13131<sup>1</sup>, 13132<sup>1</sup>, 13133<sup>1</sup>, 13151<sup>1</sup>, 13152<sup>1</sup>, 13153<sup>1</sup>, 36000<sup>1</sup>, 36400<sup>1</sup>, 36405<sup>1</sup>, 36406<sup>1</sup>, 36410<sup>1</sup>, 36420<sup>1</sup>, 36425<sup>1</sup>, 36430<sup>1</sup>, 36440<sup>1</sup>, 36591<sup>0</sup>, 36592<sup>0</sup>, 36600<sup>1</sup>, 36640<sup>1</sup>, 43752<sup>1</sup>, 51701<sup>1</sup>, 51702<sup>1</sup>, 51703<sup>1</sup>, 62320<sup>0</sup>, 62321<sup>0</sup>, 62322<sup>0</sup>, 62323<sup>0</sup>, 62324<sup>0</sup>, 62325<sup>0</sup>, 62326<sup>0</sup>, 62327<sup>0</sup>, 64400<sup>0</sup>, 64405<sup>0</sup>, 64408<sup>0</sup>, 64415<sup>0</sup>, 64416<sup>0</sup>, 64417<sup>0</sup>, 64418<sup>0</sup>, 64420<sup>0</sup>, 64421<sup>0</sup>, 64425<sup>0</sup>, 64430<sup>0</sup>, 64435<sup>0</sup>, 64445<sup>0</sup>, 64446<sup>0</sup>, 64447<sup>0</sup>, 64448<sup>0</sup>, 64449<sup>0</sup>, 64450<sup>1</sup>, 64451<sup>0</sup>, 64454<sup>1</sup>, 64461<sup>0</sup>, 64462<sup>0</sup>, 64463<sup>0</sup>, 64479<sup>0</sup>, 64480<sup>0</sup>, 64483<sup>0</sup>, 64484<sup>0</sup>, 64486<sup>0</sup>, 64487<sup>0</sup>, 64488<sup>0</sup>, 64489<sup>0</sup>, 64490<sup>0</sup>, 64491<sup>0</sup>, 64492<sup>0</sup>, 64493<sup>0</sup>, 64494<sup>0</sup>, 64495<sup>0</sup>, 64505<sup>0</sup>, 64510<sup>0</sup>, 64517<sup>0</sup>, 64520<sup>0</sup>, 64530<sup>0</sup>, 69990<sup>0</sup>, 92012<sup>1</sup>, 92014<sup>1</sup>, 93000<sup>1</sup>, 93005<sup>1</sup>, 93010<sup>1</sup>, 93040<sup>1</sup>, 93041<sup>1</sup>, 93042<sup>1</sup>, 93318<sup>1</sup>, 93355<sup>1</sup>, 94002<sup>1</sup>, 94200<sup>1</sup>, 94680<sup>1</sup>, 94681<sup>1</sup>, 94690<sup>1</sup>, 95812<sup>1</sup>, 95813<sup>1</sup>, 95816<sup>1</sup>, 95819<sup>1</sup>, 95822<sup>1</sup>, 95829<sup>1</sup>, 95955<sup>1</sup>, 96360<sup>1</sup>, 96361<sup>1</sup>, 96365<sup>1</sup>, 96366<sup>1</sup>, 96367<sup>1</sup>, 96368<sup>1</sup>, 96372<sup>1</sup>, 96374<sup>1</sup>, 96375<sup>1</sup>, 96376<sup>1</sup>, 96377<sup>1</sup>, 96523<sup>0</sup>, 99155<sup>0</sup>, 99156<sup>0</sup>, 99157<sup>0</sup>, 99211<sup>1</sup>, 99212<sup>1</sup>, 99213<sup>1</sup>, 99214<sup>1</sup>, 99215<sup>1</sup>, 99217<sup>1</sup>, 99218<sup>1</sup>, 99219<sup>1</sup>, 99220<sup>1</sup>, 99221<sup>1</sup>, 99222<sup>1</sup>, 99223<sup>1</sup>, 99231<sup>1</sup>, 99232<sup>1</sup>, 99233<sup>1</sup>, 99234<sup>1</sup>, 99235<sup>1</sup>, 99236<sup>1</sup>, 99238<sup>1</sup>, 99239<sup>1</sup>, 99241<sup>1</sup>, 99242<sup>1</sup>, 99243<sup>1</sup>, 99244<sup>1</sup>, 99245<sup>1</sup>, 99251<sup>1</sup>, 99252<sup>1</sup>, 99253<sup>1</sup>, 99254<sup>1</sup>, 99255<sup>1</sup>, 99281<sup>1</sup>, 99282<sup>1</sup>, 99283<sup>1</sup>, 99284<sup>1</sup>, 99285<sup>1</sup>, 99291<sup>1</sup>, 99292<sup>1</sup>, 99304<sup>1</sup>, 99305<sup>1</sup>, 99306<sup>1</sup>, 99307<sup>1</sup>, 99308<sup>1</sup>, 99309<sup>1</sup>, 99310<sup>1</sup>, 99315<sup>1</sup>, 99316<sup>1</sup>, 99334<sup>1</sup>, 99335<sup>1</sup>, 99336<sup>1</sup>, 99337<sup>1</sup>, 99347<sup>1</sup>, 99348<sup>1</sup>, 99349<sup>1</sup>, 99350<sup>1</sup>, 99374<sup>1</sup>, 99375<sup>1</sup>, 99377<sup>1</sup>, 99378<sup>1</sup>, 99446<sup>0</sup>, 99447<sup>0</sup>, 99448<sup>0</sup>, 99449<sup>0</sup>, 99451<sup>0</sup>, 99452<sup>0</sup>, 99495<sup>1</sup>, 99496<sup>1</sup>, G0463<sup>1</sup>, G0471<sup>1</sup>

### ICD-10 CrossRef

M84.40XD, M84.459D, M84.48XD, S12.8XXD, S32.301D, S32.302D, S32.309D, S32.311D, S32.312D, S32.313D, S32.314D, S32.315D, S32.316D, S32.391D, S32.392D, S32.399D, S32.401D, S32.402D, S32.409D, S32.411D, S32.412D, S32.413D, S32.414D, S32.415D, S32.416D, S32.421D, S32.422D, S32.423D, S32.424D, S32.425D, S32.426D, S32.431D, S32.432D, S32.433D, S32.434D, S32.435D, S32.436D, S32.441D, S32.442D, S32.443D, S32.444D, S32.445D, S32.446D, S32.451D, S32.452D, S32.453D, S32.454D, S32.455D, S32.456D, S32.461D, S32.462D, S32.463D, S32.464D, S32.465D, S32.466D, S32.471D, S32.472D, S32.473D, S32.474D, S32.475D, S32.476D, S32.481D, S32.482D, S32.483D, S32.484D, S32.485D, S32.486D, S32.491D, S32.492D, S32.499D, S32.501D, S32.502D, S32.509D, S32.511D, S32.512D, S32.519D, S32.591D, S32.592D,

## G2209

Patient refused to participate

### Clinical Responsibility

Documentation shows a patient refuses to participate.

### BETOS

**Z2:** Undefined codes

## G2211

Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. (add-on code, list separately in addition to office/outpatient evaluation and management visit, new or established)

### Clinical Responsibility

As an add-on code reported in conjunction with an office or other outpatient evaluation and management (E/M) service, this code reflects the time, intensity, and practice expense involved in providing services to a patient on a consistent, ongoing basis. The services are part of a comprehensive, continuous relationship between the provider and patient over time, often with the provider serving as a focal point for the patient's care. Services may include treatment, management, coordinating care, patient education, shared decision making between the provider and patient, and shared commitment to achieving goals. The patient does not need to have a chronic condition or single high-risk disease for this code to apply. The patient may be new or established.

### Coding Tips

Because this code is an add-on code, payers will not reimburse you unless you report it with an appropriate primary code.

Confirm payer coverage and requirements for this code.

### BETOS

**Z2:** Undefined codes

## G2212

Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to CPT® codes 99205, 99215 for

office or other outpatient evaluation and management services) (do not report g2212 on the same date of service as 99354, 99355, 99358, 99359, 99415, 99416). (do not report g2212 for any time unit less than 15 minutes)

### Clinical Responsibility

In addition to the maximum required time for evaluation and management (E/M) service 99205 or 99215, the provider spends additional time on that office or other outpatient service. The service is one being coded based on time. Total time with and without patient contact on the date of the primary service is counted. This code applies to each 15 minutes of prolonged service time. Any time unit less than 15 minutes is not reported.

### Coding Tips

Because this code is an add-on code, payers will not reimburse you unless you report it with an appropriate primary code.

Confirm payer coverage and requirements for this code. Medicare requires this code in place of +99417.

As an example of proper use, when coding based on time, you report 99205 for a new patient visit lasting 60 to 74 minutes. Once the time reaches 89 minutes, you also may report +G2212 because 89 minutes is 15 minutes beyond the maximum required time of 74 minutes.

### BETOS

**M5D:** Specialist - other

## G2250

Remote assessment of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment

### Clinical Responsibility

A provider who cannot independently bill for evaluation and management (E/M) receives recorded video and/or images remotely from a patient. He assesses the material received, analyzes it, and interprets the findings. He follows up with the patient within 24 business hours. Report this code only if this service is performed unrelated to a previous service within the past seven days, and no related service or procedure results from this service within the next 24 hours or at the next available appointment. The provider performs the service consistent with scope of practice.

### BETOS

**M5D:** Specialist - other

# ICD-10 CrossRef Details

<b>A15.0</b>	Tuberculosis of lung	<b>B37.49</b>	Other urogenital candidiasis
<b>A15.4</b>	Tuberculosis of intrathoracic lymph nodes	<b>B38.0</b>	Acute pulmonary coccidioidomycosis
<b>A15.5</b>	Tuberculosis of larynx, trachea and bronchus	<b>B38.1</b>	Chronic pulmonary coccidioidomycosis
<b>A15.6</b>	Tuberculous pleurisy	<b>B38.2</b>	Pulmonary coccidioidomycosis, unspecified
<b>A15.8</b>	Other respiratory tuberculosis	<b>B38.3</b>	Cutaneous coccidioidomycosis
<b>A18.01</b>	Tuberculosis of spine	<b>B40.0</b>	Acute pulmonary blastomycosis
<b>A18.02</b>	Tuberculous arthritis of other joints	<b>B40.1</b>	Chronic pulmonary blastomycosis
<b>A31.0</b>	Pulmonary mycobacterial infection	<b>B40.2</b>	Pulmonary blastomycosis, unspecified
<b>A41.3</b>	Sepsis due to Hemophilus influenzae	<b>B40.3</b>	Cutaneous blastomycosis
<b>A42.0</b>	Pulmonary actinomycosis	<b>B40.7</b>	Disseminated blastomycosis
<b>A52.11</b>	Tabes dorsalis	<b>B40.81</b>	Blastomycotic meningoencephalitis
<b>A52.15</b>	Late syphilitic neuropathy	<b>B40.89</b>	Other forms of blastomycosis
<b>A52.16</b>	Charcot's arthropathy (tabetic)	<b>B40.9</b>	Blastomycosis, unspecified
<b>A52.78</b>	Syphilis of other musculoskeletal tissue	<b>B41.0</b>	Pulmonary paracoccidioidomycosis
<b>A54.49</b>	Gonococcal infection of other musculoskeletal tissue	<b>B41.7</b>	Disseminated paracoccidioidomycosis
<b>A66.0</b>	Initial lesions of yaws	<b>B41.8</b>	Other forms of paracoccidioidomycosis
<b>A66.2</b>	Other early skin lesions of yaws	<b>B41.9</b>	Paracoccidioidomycosis, unspecified
<b>A66.3</b>	Hyperkeratosis of yaws	<b>B42.0</b>	Pulmonary sporotrichosis
<b>A67.0</b>	Primary lesions of pinta	<b>B42.1</b>	Lymphocutaneous sporotrichosis
<b>A67.1</b>	Intermediate lesions of pinta	<b>B42.7</b>	Disseminated sporotrichosis
<b>A67.2</b>	Late lesions of pinta	<b>B42.81</b>	Cerebral sporotrichosis
<b>A67.3</b>	Mixed lesions of pinta	<b>B42.82</b>	Sporotrichosis arthritis
<b>B00.1</b>	Herpesviral vesicular dermatitis	<b>B42.89</b>	Other forms of sporotrichosis
<b>B00.9</b>	Herpesviral infection, unspecified	<b>B42.9</b>	Sporotrichosis, unspecified
<b>B02.0</b>	Zoster encephalitis	<b>B43.0</b>	Cutaneous chromomycosis
<b>B02.1</b>	Zoster meningitis	<b>B43.1</b>	Pheomycotic brain abscess
<b>B02.21</b>	Postherpetic geniculate ganglionitis	<b>B43.2</b>	Subcutaneous pheomycotic abscess and cyst
<b>B02.22</b>	Postherpetic trigeminal neuralgia	<b>B43.8</b>	Other forms of chromomycosis
<b>B02.23</b>	Postherpetic polyneuropathy	<b>B43.9</b>	Chromomycosis, unspecified
<b>B02.24</b>	Postherpetic myelitis	<b>B44.0</b>	Invasive pulmonary aspergillosis
<b>B02.29</b>	Other postherpetic nervous system involvement	<b>B44.1</b>	Other pulmonary aspergillosis
<b>B02.7</b>	Disseminated zoster	<b>B44.2</b>	Tonsillar aspergillosis
<b>B02.8</b>	Zoster with other complications	<b>B44.7</b>	Disseminated aspergillosis
<b>B02.9</b>	Zoster without complications	<b>B44.81</b>	Allergic bronchopulmonary aspergillosis
<b>B03</b>	Smallpox	<b>B44.89</b>	Other forms of aspergillosis
<b>B04</b>	Monkeypox	<b>B44.9</b>	Aspergillosis, unspecified
<b>B05.89</b>	Other measles complications	<b>B45.0</b>	Pulmonary cryptococcosis
<b>B05.9</b>	Measles without complication	<b>B45.1</b>	Cerebral cryptococcosis
<b>B06.00</b>	Rubella with neurological complication, unspecified	<b>B45.2</b>	Cutaneous cryptococcosis
<b>B06.89</b>	Other rubella complications	<b>B45.3</b>	Osseous cryptococcosis
<b>B06.9</b>	Rubella without complication	<b>B45.7</b>	Disseminated cryptococcosis
<b>B07.0</b>	Plantar wart	<b>B45.8</b>	Other forms of cryptococcosis
<b>B07.8</b>	Other viral warts	<b>B45.9</b>	Cryptococcosis, unspecified
<b>B07.9</b>	Viral wart, unspecified	<b>B46.3</b>	Cutaneous mucormycosis
<b>B08.09</b>	Other orthopoxvirus infections	<b>B55.1</b>	Cutaneous leishmaniasis
<b>B08.1</b>	Molluscum contagiosum	<b>B55.2</b>	Mucocutaneous leishmaniasis
<b>B08.21</b>	Exanthema subitum [sixth disease] due to human herpesvirus 6	<b>B65.3</b>	Cercarial dermatitis
<b>B08.22</b>	Exanthema subitum [sixth disease] due to human herpesvirus 7	<b>B67.32</b>	Echinococcus granulosus infection, multiple sites
<b>B08.8</b>	Other specified viral infections characterized by skin and mucous membrane lesions	<b>B67.39</b>	Echinococcus granulosus infection, other sites
<b>B09</b>	Unspecified viral infection characterized by skin and mucous membrane lesions	<b>B67.4</b>	Echinococcus granulosus infection, unspecified
<b>B20</b>	Human immunodeficiency virus [HIV] disease	<b>B78.1</b>	Cutaneous strongyloidiasis
<b>B26.89</b>	Other mumps complications	<b>B85.0</b>	Pediculosis due to Pediculus humanus capitis
<b>B26.9</b>	Mumps without complication	<b>B86</b>	Scabies
<b>B27.00</b>	Gammaherpesviral mononucleosis without complication	<b>B87.0</b>	Cutaneous myiasis
<b>B27.09</b>	Gammaherpesviral mononucleosis with other complications	<b>B87.81</b>	Genitourinary myiasis
<b>B27.80</b>	Other infectious mononucleosis without complication	<b>B90.1</b>	Sequelae of genitourinary tuberculosis
<b>B35.0</b>	Tinea barbae and tinea capitis	<b>B91</b>	Sequelae of poliomyelitis
<b>B35.1</b>	Tinea unguium	<b>B95.2</b>	Enterococcus as the cause of diseases classified elsewhere
<b>B35.3</b>	Tinea pedis	<b>B96.22</b>	Other specified Shiga toxin-producing Escherichia coli [E. coli] [STEC] as the cause of diseases classified elsewhere
<b>B35.8</b>	Other dermatophytoses	<b>B97.35</b>	Human immunodeficiency virus, type 2 [HIV 2] as the cause of diseases classified elsewhere
<b>B35.9</b>	Dermatophytosis, unspecified	<b>B99.8</b>	Other infectious disease
<b>B37.2</b>	Candidiasis of skin and nail	<b>B99.9</b>	Unspecified infectious disease
		<b>C00.0</b>	Malignant neoplasm of external upper lip
		<b>C00.1</b>	Malignant neoplasm of external lower lip

<b>C49.6</b>	Malignant neoplasm of connective and soft tissue of trunk, unspecified	<b>C50.411</b>	Malignant neoplasm of upper-outer quadrant of right female breast
<b>C49.8</b>	Malignant neoplasm of overlapping sites of connective and soft tissue	<b>C50.412</b>	Malignant neoplasm of upper-outer quadrant of left female breast
<b>C49.9</b>	Malignant neoplasm of connective and soft tissue, unspecified	<b>C50.419</b>	Malignant neoplasm of upper-outer quadrant of unspecified female breast
<b>C4A.0</b>	Merkel cell carcinoma of lip	<b>C50.421</b>	Malignant neoplasm of upper-outer quadrant of right male breast
<b>C4A.10</b>	Merkel cell carcinoma of unspecified eyelid, including canthus	<b>C50.422</b>	Malignant neoplasm of upper-outer quadrant of left male breast
<b>C4A.111</b>	Merkel cell carcinoma of right upper eyelid, including canthus	<b>C50.429</b>	Malignant neoplasm of upper-outer quadrant of unspecified male breast
<b>C4A.112</b>	Merkel cell carcinoma of right lower eyelid, including canthus	<b>C50.511</b>	Malignant neoplasm of lower-outer quadrant of right female breast
<b>C4A.121</b>	Merkel cell carcinoma of left upper eyelid, including canthus	<b>C50.512</b>	Malignant neoplasm of lower-outer quadrant of left female breast
<b>C4A.122</b>	Merkel cell carcinoma of left lower eyelid, including canthus	<b>C50.519</b>	Malignant neoplasm of lower-outer quadrant of unspecified female breast
<b>C4A.20</b>	Merkel cell carcinoma of unspecified ear and external auricular canal	<b>C50.521</b>	Malignant neoplasm of lower-outer quadrant of right male breast
<b>C4A.21</b>	Merkel cell carcinoma of right ear and external auricular canal	<b>C50.522</b>	Malignant neoplasm of lower-outer quadrant of left male breast
<b>C4A.22</b>	Merkel cell carcinoma of left ear and external auricular canal	<b>C50.529</b>	Malignant neoplasm of lower-outer quadrant of unspecified male breast
<b>C4A.30</b>	Merkel cell carcinoma of unspecified part of face	<b>C50.611</b>	Malignant neoplasm of axillary tail of right female breast
<b>C4A.31</b>	Merkel cell carcinoma of nose	<b>C50.612</b>	Malignant neoplasm of axillary tail of left female breast
<b>C4A.39</b>	Merkel cell carcinoma of other parts of face	<b>C50.619</b>	Malignant neoplasm of axillary tail of unspecified female breast
<b>C4A.4</b>	Merkel cell carcinoma of scalp and neck	<b>C50.621</b>	Malignant neoplasm of axillary tail of right male breast
<b>C4A.52</b>	Merkel cell carcinoma of skin of breast	<b>C50.622</b>	Malignant neoplasm of axillary tail of left male breast
<b>C4A.60</b>	Merkel cell carcinoma of unspecified upper limb, including shoulder	<b>C50.629</b>	Malignant neoplasm of axillary tail of unspecified male breast
<b>C4A.61</b>	Merkel cell carcinoma of right upper limb, including shoulder	<b>C50.811</b>	Malignant neoplasm of overlapping sites of right female breast
<b>C4A.62</b>	Merkel cell carcinoma of left upper limb, including shoulder	<b>C50.812</b>	Malignant neoplasm of overlapping sites of left female breast
<b>C4A.70</b>	Merkel cell carcinoma of unspecified lower limb, including hip	<b>C50.819</b>	Malignant neoplasm of overlapping sites of unspecified female breast
<b>C4A.71</b>	Merkel cell carcinoma of right lower limb, including hip	<b>C50.821</b>	Malignant neoplasm of overlapping sites of right male breast
<b>C4A.72</b>	Merkel cell carcinoma of left lower limb, including hip	<b>C50.822</b>	Malignant neoplasm of overlapping sites of left male breast
<b>C4A.8</b>	Merkel cell carcinoma of overlapping sites	<b>C50.829</b>	Malignant neoplasm of overlapping sites of unspecified male breast
<b>C4A.9</b>	Merkel cell carcinoma, unspecified	<b>C50.911</b>	Malignant neoplasm of unspecified site of right female breast
<b>C50.011</b>	Malignant neoplasm of nipple and areola, right female breast	<b>C50.912</b>	Malignant neoplasm of unspecified site of left female breast
<b>C50.012</b>	Malignant neoplasm of nipple and areola, left female breast	<b>C50.919</b>	Malignant neoplasm of unspecified site of unspecified female breast
<b>C50.019</b>	Malignant neoplasm of nipple and areola, unspecified female breast	<b>C50.921</b>	Malignant neoplasm of unspecified site of right male breast
<b>C50.021</b>	Malignant neoplasm of nipple and areola, right male breast	<b>C50.922</b>	Malignant neoplasm of unspecified site of left male breast
<b>C50.022</b>	Malignant neoplasm of nipple and areola, left male breast	<b>C50.929</b>	Malignant neoplasm of unspecified site of unspecified male breast
<b>C50.029</b>	Malignant neoplasm of nipple and areola, unspecified male breast	<b>C51.0</b>	Malignant neoplasm of labium majus
<b>C50.111</b>	Malignant neoplasm of central portion of right female breast	<b>C51.1</b>	Malignant neoplasm of labium minus
<b>C50.112</b>	Malignant neoplasm of central portion of left female breast	<b>C51.2</b>	Malignant neoplasm of clitoris
<b>C50.119</b>	Malignant neoplasm of central portion of unspecified female breast	<b>C51.8</b>	Malignant neoplasm of overlapping sites of vulva
<b>C50.121</b>	Malignant neoplasm of central portion of right male breast	<b>C51.9</b>	Malignant neoplasm of vulva, unspecified
<b>C50.122</b>	Malignant neoplasm of central portion of left male breast	<b>C52</b>	Malignant neoplasm of vagina
<b>C50.129</b>	Malignant neoplasm of central portion of unspecified male breast	<b>C57.7</b>	Malignant neoplasm of other specified female genital organs
<b>C50.211</b>	Malignant neoplasm of upper-inner quadrant of right female breast	<b>C57.8</b>	Malignant neoplasm of overlapping sites of female genital organs
<b>C50.212</b>	Malignant neoplasm of upper-inner quadrant of left female breast	<b>C57.9</b>	Malignant neoplasm of female genital organ, unspecified
<b>C50.219</b>	Malignant neoplasm of upper-inner quadrant of unspecified female breast	<b>C60.0</b>	Malignant neoplasm of prepuce
<b>C50.221</b>	Malignant neoplasm of upper-inner quadrant of right male breast	<b>C60.1</b>	Malignant neoplasm of glans penis
<b>C50.222</b>	Malignant neoplasm of upper-inner quadrant of left male breast	<b>C60.2</b>	Malignant neoplasm of body of penis
<b>C50.229</b>	Malignant neoplasm of upper-inner quadrant of unspecified male breast	<b>C60.8</b>	Malignant neoplasm of overlapping sites of penis
<b>C50.311</b>	Malignant neoplasm of lower-inner quadrant of right female breast	<b>C60.9</b>	Malignant neoplasm of penis, unspecified
<b>C50.312</b>	Malignant neoplasm of lower-inner quadrant of left female breast	<b>C61</b>	Malignant neoplasm of prostate
<b>C50.319</b>	Malignant neoplasm of lower-inner quadrant of unspecified female breast	<b>C62.10</b>	Malignant neoplasm of unspecified descended testis
<b>C50.321</b>	Malignant neoplasm of lower-inner quadrant of right male breast	<b>C62.11</b>	Malignant neoplasm of descended right testis
<b>C50.322</b>	Malignant neoplasm of lower-inner quadrant of left male breast	<b>C62.12</b>	Malignant neoplasm of descended left testis
<b>C50.329</b>	Malignant neoplasm of lower-inner quadrant of unspecified male breast	<b>C62.90</b>	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended
		<b>C62.91</b>	Malignant neoplasm of right testis, unspecified whether descended or undescended

# Modifier Descriptors

Modifier	Description
CPT® Modifiers	
<b>22</b>	Increased Procedural Services
<b>23</b>	Unusual Anesthesia
<b>24</b>	Unrelated Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional During a Postoperative Period
<b>25</b>	Significant, Separately Identifiable Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional on the Same Day of the Procedure or Other Service
<b>26</b>	Professional Component
<b>27</b>	Multiple Outpatient Hospital E/M Encounters on the Same Date
<b>32</b>	Mandated Services
<b>33</b>	Preventive Services
<b>47</b>	Anesthesia by Surgeon
<b>50</b>	Bilateral Procedure
<b>51</b>	Multiple Procedures
<b>52</b>	Reduced Services
<b>53</b>	Discontinued Procedure
<b>54</b>	Surgical Care Only
<b>55</b>	Postoperative Management Only
<b>56</b>	Preoperative Management Only
<b>57</b>	Decision for Surgery
<b>58</b>	Staged or Related Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period
<b>59</b>	Distinct Procedural Service
<b>62</b>	Two Surgeons
<b>63</b>	Procedure Performed on Infants less than 4 kg
<b>66</b>	Surgical Team
<b>73</b>	Discontinued Out-Patient Hospital/Ambulatory Surgery Center (ASC) Procedure Prior to the Administration of Anesthesia
<b>74</b>	Discontinued Out-Patient Hospital/Ambulatory Surgery Center (ASC) Procedure After Administration of Anesthesia
<b>76</b>	Repeat Procedure or Service by Same Physician or Other Qualified Health Care Professional
<b>77</b>	Repeat Procedure by Another Physician or Other Qualified Health Care Professional
<b>78</b>	Unplanned Return to the Operating/Procedure Room by the Same Physician or Other Qualified Health Care Professional Following Initial Procedure for a Related Procedure During the Postoperative Period

Modifier	Description
<b>79</b>	Unrelated Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period
<b>80</b>	Assistant Surgeon
<b>81</b>	Minimum Assistant Surgeon
<b>82</b>	Assistant Surgeon (when qualified resident surgeon not available)
<b>90</b>	Reference (Outside) Laboratory
<b>91</b>	Repeat Clinical Diagnostic Laboratory Test
<b>92</b>	Alternative Laboratory Platform Testing
<b>95</b>	Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System
<b>96</b>	Habilitative Services
<b>97</b>	Rehabilitative Services
<b>99</b>	Multiple Modifiers
Category II Modifiers	
<b>1P</b>	Performance Measure Exclusion Modifier due to Medical Reasons
<b>2P</b>	Performance Measure Exclusion Modifier due to Patient Reasons
<b>3P</b>	Performance Measure Exclusion Modifier due to System Reasons
<b>8P</b>	Performance Measure Reporting Modifier - Action Not Performed, Reason Not Otherwise Specified
HCPCS Level II Modifiers	
<b>A1</b>	Dressing for one wound
<b>A2</b>	Dressing for two wounds
<b>A3</b>	Dressing for three wounds
<b>A4</b>	Dressing for four wounds
<b>A5</b>	Dressing for five wounds
<b>A6</b>	Dressing for six wounds
<b>A7</b>	Dressing for seven wounds
<b>A8</b>	Dressing for eight wounds
<b>A9</b>	Dressing for nine or more wounds
<b>AA</b>	Anesthesia services performed personally by anesthesiologist
<b>AD</b>	Medical supervision by a physician: more than four concurrent anesthesia procedures
<b>AE</b>	Registered dietitian
<b>AF</b>	Specialty physician
<b>AG</b>	Primary physician
<b>AH</b>	Clinical psychologist
<b>AI</b>	Principal physician of record



Modifier	Description
<b>GS</b>	Dosage of erythropoietin stimulating agent has been reduced and maintained in response to hematocrit or hemoglobin level
<b>GT</b>	Via interactive audio and video telecommunication systems
<b>GU</b>	Waiver of liability statement issued as required by payer policy, routine notice
<b>GV</b>	Attending physician not employed or paid under arrangement by the patient's hospice provider
<b>GW</b>	Service not related to the hospice patient's terminal condition
<b>GX</b>	Notice of liability issued, voluntary under payer policy
<b>GY</b>	Item or service statutorily excluded, does not meet the definition of any Medicare benefit or, for Non-Medicare insurers, is not a contract benefit
<b>GZ</b>	Item or service expected to be denied as not reasonable and necessary
<b>H9</b>	Court-ordered
<b>HA</b>	Child/adolescent program
<b>HB</b>	Adult program, non-geriatric
<b>HC</b>	Adult program, geriatric
<b>HD</b>	Pregnant/parenting women's program
<b>HE</b>	Mental health program
<b>HF</b>	Substance abuse program
<b>HG</b>	Opioid addiction treatment program
<b>HH</b>	Integrated mental health/substance abuse program
<b>HI</b>	Integrated mental health and intellectual disability/developmental disabilities program
<b>HJ</b>	Employee assistance program
<b>HK</b>	Specialized mental health programs for high-risk populations
<b>HL</b>	Intern
<b>HM</b>	Less than bachelor degree level
<b>HN</b>	Bachelor's degree level
<b>HO</b>	Master's degree level
<b>HP</b>	Doctoral level
<b>HQ</b>	Group setting
<b>HR</b>	Family/couple with client present
<b>HS</b>	Family/couple without client present
<b>HT</b>	Multi-disciplinary team
<b>HU</b>	Funded by child welfare agency
<b>HV</b>	Funded state addictions agency
<b>HW</b>	Funded by state mental health agency
<b>HX</b>	Funded by county/local agency
<b>HY</b>	Funded by juvenile justice agency
<b>HZ</b>	Funded by criminal justice agency
<b>J1</b>	Competitive acquisition program no-pay submission for a prescription number

Modifier	Description
<b>J2</b>	Competitive acquisition program, restocking of emergency drugs after emergency administration
<b>J3</b>	Competitive acquisition program (CAP), drug not available through cap as written, reimbursed under average sales price methodology
<b>J4</b>	DMEPOS item subject to DMEPOS competitive bidding program that is furnished by a hospital upon discharge
<b>J5</b>	Off-the-shelf orthotic subject to DMEPOS competitive bidding program that is furnished as part of a physical therapist or occupational therapist professional service
<b>JA</b>	Administered intravenously
<b>JB</b>	Administered subcutaneously
<b>JC</b>	Skin substitute used as a graft
<b>JD</b>	Skin substitute not used as a graft
<b>JE</b>	Administered via dialysate
<b>JG</b>	Drug or biological acquired with 340b drug pricing program discount
<b>JW</b>	Drug amount discarded/not administered to any patient
<b>K0</b>	Lower extremity prosthesis functional level 0 - does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility
<b>K1</b>	Lower extremity prosthesis functional level 1 - has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence, typical of the limited and unlimited household ambulator
<b>K2</b>	Lower extremity prosthesis functional level 2 - has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs or uneven surfaces, typical of the limited community ambulator
<b>K3</b>	Lower extremity prosthesis functional level 3 - has the ability or potential for ambulation with variable cadence, typical of the community ambulator who has the ability to transverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion
<b>K4</b>	Lower extremity prosthesis functional level 4 - has the ability or potential for prosthetic ambulation that exceeds the basic ambulation skills, exhibiting high impact, stress, or energy levels, typical of the prosthetic demands of the child, active adult, or athlete
<b>KA</b>	Add on option/accessory for wheelchair
<b>KB</b>	Beneficiary requested upgrade for ABN, more than 4 modifiers identified on claim
<b>KC</b>	Replacement of special power wheelchair interface
<b>KD</b>	Drug or biological infused through DME

# Terminology

Terminology	Explanation
<b>Abductor hallucis muscle</b>	Muscle of the great toe which draws it away from the body.
<b>Abscess</b>	Sac or pocket formed due to the accumulation of purulent material, pus, in the soft tissue.
<b>Accessory navicular bone</b>	An extra bone on the inner side of the foot that can cause irritation and require removal.
<b>Achilles</b>	Tendon at the heel, or calcaneal tendon.
<b>Achilles tendon</b>	Tendon that attaches the gastrocnemius and soleus muscles, muscles on the back of the lower leg, to the ankle bone.
<b>Acromioclavicular, or AC, joint</b>	Union of the acromion, or shoulder blade, and the clavicle, or collar bone.
<b>Actinic keratoses</b>	Rough, scaly patches of skin that develop from prolonged exposure to sun.
<b>Acute</b>	A medical condition or injury of sudden onset, sometimes severe in nature, and typically last a short period of time; opposite of chronic.
<b>Adhesiolysis</b>	Freeing up adhesions by cutting and dividing, typically with a combination of sharp and blunt dissection.
<b>Adhesion</b>	Fibrous bands, which typically result from inflammation or injury during surgery, that form between tissues and organs; they may be thought of as internal scar tissue.
<b>Advance directive</b>	A document which enables a person to make provision for his health care decisions in case if in the future, he becomes unable to make those decisions; include documents such as a living will and a medical power of attorney.
<b>Algorithm</b>	A specific set of step-by-step calculations using defined inputs at each step to produce a useful output.
<b>Allograft</b>	A tissue graft harvested from one person for another; donors include cadavers and living individuals related or unrelated to the recipient; also called allogeneic graft and homograft.
<b>Ambulatory</b>	The ability to walk or suitability for walking.
<b>Amputate</b>	Removal of a limb or digit.
<b>Amputation</b>	Surgical removal of a complete or partial appendage of the body.
<b>Anastomosis</b>	Connection between two structures, anatomical or surgically created, such as between two blood vessels or the colon after resection of a part; types of anastomoses include end to side and side to side.
<b>Anesthesia</b>	A medication induced state that reduces or eliminates sensitivity to pain, depending upon the type of anesthesia administered; general anesthesia renders the patient completely unconscious, while local or regional anesthesia reduce sensation to pain in specific areas of the body.
<b>Anesthetic agent</b>	Substance that reduces sensitivity to pain.
<b>Ankle joint</b>	Joint composed by the tibia, the fibula, and the talus.
<b>Anterior</b>	Closer to the front part of the body.
<b>Anterior tibial extensors</b>	Muscle of anterior part of leg.
<b>Anteroposterior, or AP, view</b>	The X-ray projection travels from front to back.
<b>Antibiotic</b>	A substance that inhibits infection.
<b>Anticoagulant</b>	A drug that prevents clot formation within the blood vessels and dissolves any blood clot formed previously.
<b>Antiinflammatory</b>	Substance that reduces pain, swelling, and inflammation.
<b>Arthritis</b>	An inflammatory condition affecting one or more of the body's joints, resulting in pain, swelling, and limitation of movement.
<b>Arthrocentesis</b>	A procedure in which the provider using a needle and a syringe drains or withdraws fluid from the joint.
<b>Arthrodesis</b>	Surgical procedure involving fusion of the bones adjacent to a joint to immobilize the joint.
<b>Arthrography</b>	Radiography of a joint after injecting one or more contrast dyes into the joint; it is a diagnostic injection that visualizes an injury by means of a contrast dye and X-ray.

Terminology	Explanation
<b>Contrast</b>	A special dye used in radiology imaging to improve the visibility of internal structures or organs of the body, which providers administer to patients through various routes, including oral and intravenously; also called contrast material, contrast medium, contrast media, contrast agent, or contrast dye.
<b>Coring reamer system</b>	System to collect cylindrical bone, thereby creating a tunnel in the bone.
<b>Corn</b>	A nodule caused by skin friction; mainly appears on top or side of toes as a small thickened area with a dense central area.
<b>Corticosteroid</b>	Substance that reduces inflammation.
<b>Craterization</b>	Surgical removal of bone that creates a craterlike depression in the bone.
<b>Cryosurgery</b>	Treatment of damaged tissue by lowering the temperature of that targeted tissue.
<b>Cuboid bone</b>	One of the seven tarsal bones present on outer side of the foot.
<b>Cuneiform bones</b>	Three small tarsal bones in the foot that connect to the metatarsals of the midfoot toward the hind foot.
<b>Curettage</b>	Use of a curet, a spoon shaped surgical instrument used for scraping, to remove tissue by scraping or scooping.
<b>Curette</b>	Spoon shaped surgical instrument used for scraping; also spelled curet.
<b>Curettement</b>	Scraping away the lesion with the help of curette which is an instrument with a scoop or ring at the end.
<b>Curly toes</b>	A deformity in which the toes are bent downward or sideways toward the sole of the foot.
<b>Cutaneous nerve</b>	A mixed peripheral nerve that supplies a region of the skin.
<b>Cutaneous vascular proliferative lesion</b>	Birthmarks, such as port wine stains, commonly found among children.
<b>Cyst</b>	Sac usually containing fluid; the term cyst can refer to an abnormal growth or to any saclike structure, such as the urinary bladder or gallbladder.
<b>Debride</b>	To surgically remove damaged, diseased, or unhealthy tissue from wounds to allow healthy tissue to grow.
<b>Debridement</b>	The removal of an organ's dead, damaged, or infected tissue to facilitate natural healing of the remaining healthy tissue.
<b>Decorticate</b>	Surgical excision of the cortex, the outer membrane of the bone.
<b>Deformity</b>	Defect in the body part.
<b>Deposition</b>	The giving of sworn testimony under oath.
<b>Dermatome</b>	A surgical instrument, used especially for grafting, that can cut very thin skin slices.
<b>Dermis</b>	Layer of skin that contains connective tissues, situated immediately below the epidermis, the outermost layer.
<b>Devitalized bone</b>	Dead bone; bone that cannot produce living cells due to trauma or loss of blood supply.
<b>Diabetes mellitus</b>	Disease in which the body's production or utilization of insulin, the primary hormone involved in glucose metabolism, is insufficient, leading to high levels of blood glucose and subsequent complications, including significant damage to nerves, vessels, and multiple organs.
<b>Diabetic neuropathy</b>	Nerve damage caused by diabetes mellitus; the most common type affects the nerves of the lower limbs, causing loss of sensation.
<b>Diabetic ulcer</b>	Skin breakdown and or open sores that occur with great frequency on the feet and lower legs of diabetics due to the complications of vascular and nerve damage associated with diabetes mellitus.
<b>Diaphysectomy</b>	Surgical removal of the middle portion of a long bone.
<b>Diaphysis</b>	Middle portion of a long bone.
<b>Digital nerve</b>	Branches of nerves supplying the toes or the fingers and thumb.
<b>Dislocation</b>	Body structure out of its normal place, especially parts of a broken bone or two structures that normally connect to form a joint.
<b>Dissection</b>	Separation of tissue by layers; blunt dissection separates tissue layers using the fingers; sharp dissection separates tissue layers with a blade.
<b>Distal</b>	Located away from the center of the body or away from a structure's point of attachment.
<b>Donor site</b>	Location from where tissue is harvested for use in a grafting procedure, such as a bone graft or skin graft.
<b>Dorsal</b>	Upper surface of an organ.

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