

HCPCS Code	SI	HCPCS Description
<b>Integumentary Chapter (Including Breast Procedures)</b>		
11004	C	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia and perineum
11005	C	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; abdominal wall, with or without fascial closure
11006	C	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia, perineum and abdominal wall, with or without fascial closure
11008	C	REMOVAL OF PROSTHETIC MATERIAL OR MESH, ABDOMINAL WALL FOR INFECTION (EG, FOR CHRONIC OR RECURRENT MESH INFECTION OR NECROTIZING SOFT TISSUE INFECTION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
15756	C	Free muscle or myocutaneous flap with microvascular anastomosis
15757	C	Free skin flap with microvascular anastomosis
15758	C	Free fascial flap with microvascular anastomosis
16036	C	Escharotomy; each additional incision (List separately in addition to code for primary procedure)
19271	C	Excision of chest wall tumor involving ribs, with plastic reconstruction; without mediastinal lymphadenectomy
19272	C	Excision of chest wall tumor involving ribs, with plastic reconstruction; with mediastinal lymphadenectomy
19305	C	Mastectomy, radical, including pectoral muscles, axillary lymph nodes
19306	C	Mastectomy, radical, including pectoral muscles, axillary and internal mammary lymph nodes (Urban type operation)
19361	C	Breast reconstruction with latissimus dorsi flap, without prosthetic implant
19364	C	Breast reconstruction with free flap
19367	C	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site;
19368	C	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), single pedicle, including closure of donor site; with microvascular anastomosis (supercharging)
19369	C	Breast reconstruction with transverse rectus abdominis myocutaneous flap (TRAM), double pedicle, including closure of donor site
<b>Musculoskeletal System Chapter</b>		
20661	C	Application of halo, including removal; cranial
20664	C	Application of halo, including removal, cranial, 6 or more pins placed, for thin skull osteology (eg, pediatric patients, hydrocephalus, osteogenesis imperfecta), requiring general anesthesia
20802	C	Replantation, arm (includes surgical neck of humerus through elbow joint), complete amputation
20805	C	Replantation, forearm (includes radius and ulna to radial carpal joint), complete amputation
20808	C	Replantation, hand (includes hand through metacarpophalangeal joints), complete amputation
20816	C	Replantation, digit, excluding thumb (includes metacarpophalangeal joint to insertion of flexor sublimis tendon), complete amputation
20824	C	Replantation, thumb (includes carpometacarpal joint to MP joint), complete amputation
20827	C	Replantation, thumb (includes distal tip to MP joint), complete amputation
20838	C	Replantation, foot, complete amputation
20930	C	ALLOGRAFT FOR SPINE SURGERY ONLY; MORSELIZED (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
20931	C	ALLOGRAFT FOR SPINE SURGERY ONLY; STRUCTURAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
20936	C	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); LOCAL (EG, RIBS, SPINOUS PROCESS, OR LAMINAR FRAGMENTS) OBTAINED FROM SAME INCISION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
20937	C	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); MORSELIZED (THROUGH SEPARATE SKIN OR FASCIAL INCISION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
20938	C	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); STRUCTURAL, BICORTICAL OR TRICORTICAL (THROUGH SEPARATE SKIN OR FASCIAL INCISION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
20955	C	Bone graft with microvascular anastomosis; fibula
20956	C	Bone graft with microvascular anastomosis; iliac crest
20957	C	Bone graft with microvascular anastomosis; metatarsal
20962	C	Bone graft with microvascular anastomosis; other than fibula, iliac crest, or metatarsal
20969	C	Free osteocutaneous flap with microvascular anastomosis; other than iliac crest, metatarsal, or great toe
20970	C	Free osteocutaneous flap with microvascular anastomosis; iliac crest
21045	C	Excision of malignant tumor of mandible; radical resection
21141	C	Reconstruction midface, LeFort I; single piece, segment movement in any direction (eg, for Long Face Syndrome), without bone graft
21142	C	Reconstruction midface, LeFort I; two pieces, segment movement in any direction, without bone graft
21143	C	Reconstruction midface, LeFort I; three or more pieces, segment movement in any direction, without bone graft
21145	C	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts)
21146	C	Reconstruction midface, LeFort I; two pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted unilateral alveolar cleft)
21147	C	Reconstruction midface, LeFort I; three or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted bilateral alveolar cleft or multiple osteotomies)

21151	C	Reconstruction midface, LeFort II; any direction, requiring bone grafts (includes obtaining autografts)
21154	C	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without LeFort I
21155	C	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with LeFort I
21159	C	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); without LeFort I
21160	C	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); with LeFort I
21179	C	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)
21180	C	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)
21182	C	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting less than 40 sq cm
21183	C	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 40 sq cm but less than 80 sq cm
21184	C	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 80 sq cm
21188	C	Reconstruction midface, osteotomies (other than LeFort type) and bone grafts (includes obtaining autografts)
21193	C	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft
21194	C	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; with bone graft (includes obtaining graft)
21196	C	Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation
21247	C	Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (eg, for hemifacial microsomia)
21255	C	Reconstruction of zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)
21256	C	Reconstruction of orbit with osteotomies (extracranial) and with bone grafts (includes obtaining autografts) (eg, microphthalmia)
21268	C	Orbital repositioning, periorbital osteotomies, unilateral, with bone grafts; combined intra- and extracranial approach
21343	C	Open treatment of depressed frontal sinus fracture
21344	C	Open treatment of complicated (eg, comminuted or involving posterior wall) frontal sinus fracture, via coronal or multiple approaches
21346	C	Open treatment of nasomaxillary complex fracture (LeFort II type); with wiring and/or local fixation
21347	C	Open treatment of nasomaxillary complex fracture (LeFort II type); requiring multiple open approaches
21348	C	Open treatment of nasomaxillary complex fracture (LeFort II type); with bone grafting (includes obtaining graft)
21366	C	Open treatment of complicated (eg, comminuted or involving cranial nerve foramina) fracture(s) of malar area, including zygomatic arch and malar tripod; with bone grafting (includes obtaining graft)
21395	C	Open treatment of orbital floor blowout fracture; periorbital approach with bone graft (includes obtaining graft)
21422	C	Open treatment of palatal or maxillary fracture (LeFort I type);
21423	C	Open treatment of palatal or maxillary fracture (LeFort I type); complicated (comminuted or involving cranial nerve foramina), multiple approaches
21431	C	Closed treatment of craniofacial separation (LeFort III type) using interdental wire fixation of denture or splint
21432	C	Open treatment of craniofacial separation (LeFort III type); with wiring and/or internal fixation
21433	C	Open treatment of craniofacial separation (LeFort III type); complicated (eg, comminuted or involving cranial nerve foramina), multiple surgical approaches
21435	C	Open treatment of craniofacial separation (LeFort III type); complicated, utilizing internal and/or external fixation techniques (eg, head cap, halo device, and/or intermaxillary fixation)
21436	C	Open treatment of craniofacial separation (LeFort III type); complicated, multiple surgical approaches, internal fixation, with bone grafting (includes obtaining graft)
21510	C	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), thorax
21615	C	Excision first and/or cervical rib;
21616	C	Excision first and/or cervical rib; with sympathectomy
21620	C	Ostectomy of sternum, partial
21627	C	Sternal debridement
21630	C	Radical resection of sternum;
21632	C	Radical resection of sternum; with mediastinal lymphadenectomy
21705	C	Division of scalenus anticus; with resection of cervical rib
21740	C	Reconstructive repair of pectus excavatum or carinatum; open
21750	C	Closure of median sternotomy separation with or without debridement (separate procedure)
21810	C	Treatment of rib fracture requiring external fixation (flail chest)
21825	C	Open treatment of sternum fracture with or without skeletal fixation
22010	C	Incision and drainage, open, of deep abscess (subfascial), posterior spine; cervical, thoracic, or cervicothoracic
22015	C	Incision and drainage, open, of deep abscess (subfascial), posterior spine; lumbar, sacral, or lumbosacral
22110	C	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; cervical
22112	C	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; thoracic
22114	C	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; lumbar

22116	C	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)
22206	C	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, THREE COLUMNS, ONE VERTEBRAL SEGMENT (EG, PEDICLE/VERTEBRAL BODY SUBTRACTION); THORACIC
22207	C	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, THREE COLUMNS, ONE VERTEBRAL SEGMENT (EG, PEDICLE/VERTEBRAL BODY SUBTRACTION); LUMBAR
22208	C	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, THREE COLUMNS, ONE VERTEBRAL SEGMENT (EG, PEDICLE/VERTEBRAL BODY SUBTRACTION); EACH ADDITIONAL VERTEBRAL SEGMENT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22210	C	Osteotomy of spine, posterior or posterolateral approach, one vertebral segment; cervical
22212	C	Osteotomy of spine, posterior or posterolateral approach, one vertebral segment; thoracic
22214	C	Osteotomy of spine, posterior or posterolateral approach, one vertebral segment; lumbar
22216	C	Osteotomy of spine, posterior or posterolateral approach, one vertebral segment; each additional vertebral segment (List separately in addition to primary procedure)
22220	C	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; cervical
22224	C	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; lumbar
22226	C	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)
22318	C	Open treatment and/or reduction of odontoid fracture(s) and or dislocation(s) (including os odontoideum), anterior approach, including placement of internal fixation; without grafting
22319	C	Open treatment and/or reduction of odontoid fracture(s) and or dislocation(s) (including os odontoideum), anterior approach, including placement of internal fixation; with grafting
22325	C	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA OR DISLOCATED SEGMENT; LUMBAR
22326	C	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA OR DISLOCATED SEGMENT; CERVICAL
22327	C	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA OR DISLOCATED SEGMENT; THORACIC
22328	C	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, ONE FRACTURED VERTEBRA OR DISLOCATED SEGMENT; EACH ADDITIONAL FRACTURED VERTEBRA OR DISLOCATED SEGMENT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22532	C	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic
22533	C	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar
22534	C	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic or lumbar, each additional vertebral segment (List separately in addition to code for primary procedure)
22548	C	Arthrodesis, anterior transoral or extraoral technique, clivus-C1-C2 (atlas-axis), with or without excision of odontoid process
22554	C	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); cervical below C2
22556	C	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic
22558	C	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar
22585	C	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); each additional interspace (List separately in addition to code for primary procedure)
22590	C	Arthrodesis, posterior technique, craniocervical (occiput-C2)
22595	C	Arthrodesis, posterior technique, atlas-axis (C1-C2)
22600	C	Arthrodesis, posterior or posterolateral technique, single level; cervical below C2 segment
22610	C	Arthrodesis, posterior or posterolateral technique, single level; thoracic (with or without lateral transverse technique)
22630	C	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar
22632	C	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; each additional interspace (List separately in addition to code for primary procedure)
22800	C	Arthrodesis, posterior, for spinal deformity, with or without cast; up to 6 vertebral segments
22802	C	Arthrodesis, posterior, for spinal deformity, with or without cast; 7 to 12 vertebral segments
22804	C	Arthrodesis, posterior, for spinal deformity, with or without cast; 13 or more vertebral segments
22808	C	Arthrodesis, anterior, for spinal deformity, with or without cast; 2 to 3 vertebral segments
22810	C	Arthrodesis, anterior, for spinal deformity, with or without cast; 4 to 7 vertebral segments
22812	C	Arthrodesis, anterior, for spinal deformity, with or without cast; 8 or more vertebral segments
22818	C	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); single or 2 segments
22819	C	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); 3 or more segments
22830	C	Exploration of spinal fusion

22840	C	POSTERIOR NON-SEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD TECHNIQUE, PEDICLE FIXATION ACROSS ONE INTERSPACE, ATLANTOAXIAL TRANSARTICULAR SCREW FIXATION, SUBLAMINAR WIRING AT C1, FACET SCREW FIXATION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22841	C	INTERNAL SPINAL FIXATION BY WIRING OF SPINOUS PROCESSES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22842	C	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 3 TO 6 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22843	C	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 7 TO 12 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22844	C	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 13 OR MORE VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22845	C	ANTERIOR INSTRUMENTATION; 2 TO 3 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22846	C	ANTERIOR INSTRUMENTATION; 4 TO 7 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22847	C	ANTERIOR INSTRUMENTATION; 8 OR MORE VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22848	C	PELVIC FIXATION (ATTACHMENT OF CAUDAL END OF INSTRUMENTATION TO PELVIC BONY STRUCTURES) OTHER THAN SACRUM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
22849	C	Reinsertion of spinal fixation device
22850	C	Removal of posterior nonsegmental instrumentation (eg, Harrington rod)
22852	C	Removal of posterior segmental instrumentation
22855	C	Removal of anterior instrumentation
22856	C	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophyctomy for nerve root or spinal cord decompression and microdissection), single interspace, cervical
22857	C	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, single interspace
22861	C	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical
22862	C	Revision including replacement of total disc arthroplasty (artificial disc) anterior approach, lumbar, single interspace
22865	C	Removal of total disc arthroplasty (artificial disc), anterior approach, lumbar, single interspace
23200	C	Radical resection for tumor; clavicle
23210	C	Radical resection for tumor; scapula
23220	C	Radical resection of bone tumor, proximal humerus;
23221	C	Radical resection of bone tumor, proximal humerus; with autograft (includes obtaining graft)
23222	C	Radical resection of bone tumor, proximal humerus; with prosthetic replacement
23332	C	Removal of foreign body, shoulder; complicated (eg, total shoulder)
23472	C	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))
23900	C	Interthoracoscapular amputation (forequarter)
23920	C	Disarticulation of shoulder;
24900	C	Amputation, arm through humerus; with primary closure
24920	C	Amputation, arm through humerus; open, circular (guillotine)
24930	C	Amputation, arm through humerus; re-amputation
24931	C	Amputation, arm through humerus; with implant
24940	C	Cineplasty, upper extremity, complete procedure
25900	C	Amputation, forearm, through radius and ulna;
25905	C	Amputation, forearm, through radius and ulna; open, circular (guillotine)
25909	C	Amputation, forearm, through radius and ulna; re-amputation
25915	C	Krukenberg procedure
25920	C	Disarticulation through wrist;
25924	C	Disarticulation through wrist; re-amputation
25927	C	Transmetacarpal amputation;
26551	C	Transfer, toe-to-hand with microvascular anastomosis; great toe wrap-around with bone graft
26553	C	Transfer, toe-to-hand with microvascular anastomosis; other than great toe, single
26554	C	Transfer, toe-to-hand with microvascular anastomosis; other than great toe, double
26556	C	Transfer, free toe joint, with microvascular anastomosis
26992	C	Incision, bone cortex, pelvis and/or hip joint (eg, osteomyelitis or bone abscess)
27005	C	Tenotomy, hip flexor(s), open (separate procedure)
27025	C	Fasciotomy, hip or thigh, any type
27030	C	Arthrotomy, hip, with drainage (eg, infection)
27036	C	Capsulectomy or capsulotomy, hip, with or without excision of heterotopic bone, with release of hip flexor muscles (ie, gluteus medius, gluteus minimus, tensor fascia latae, rectus femoris, sartorius, iliopsoas)
27054	C	Arthrotomy with synovectomy, hip joint
27070	C	Partial excision (craterization, saucerization) (eg, osteomyelitis or bone abscess); superficial (eg, wing of ilium, symphysis pubis, or greater trochanter of femur)
27071	C	Partial excision (craterization, saucerization) (eg, osteomyelitis or bone abscess); deep (subfascial or intramuscular)
27075	C	Radical resection of tumor or infection; wing of ilium, one pubic or ischial ramus or symphysis pubis
27076	C	Radical resection of tumor or infection; ilium, including acetabulum, both pubic rami, or ischium and acetabulum

27077	C	Radical resection of tumor or infection; innominate bone, total
27078	C	Radical resection of tumor or infection; ischial tuberosity and greater trochanter of femur
27079	C	Radical resection of tumor or infection; ischial tuberosity and greater trochanter of femur, with skin flaps
27090	C	Removal of hip prosthesis; (separate procedure)
27091	C	Removal of hip prosthesis; complicated, including total hip prosthesis, methylmethacrylate with or without insertion of spacer
27120	C	Acetabuloplasty; (eg, Whitman, Colonna, Haygroves, or cup type)
27122	C	Acetabuloplasty; resection, femoral head (eg, Girdlestone procedure)
27125	C	Hemiarthroplasty, hip, partial (eg, femoral stem prosthesis, bipolar arthroplasty)
27130	C	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft
27132	C	Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft
27134	C	Revision of total hip arthroplasty; both components, with or without autograft or allograft
27137	C	Revision of total hip arthroplasty; acetabular component only, with or without autograft or allograft
27138	C	Revision of total hip arthroplasty; femoral component only, with or without allograft
27140	C	Osteotomy and transfer of greater trochanter of femur (separate procedure)
27146	C	Osteotomy, iliac, acetabular or innominate bone;
27147	C	Osteotomy, iliac, acetabular or innominate bone; with open reduction of hip
27151	C	Osteotomy, iliac, acetabular or innominate bone; with femoral osteotomy
27156	C	Osteotomy, iliac, acetabular or innominate bone; with femoral osteotomy and with open reduction of hip
27158	C	Osteotomy, pelvis, bilateral (eg, congenital malformation)
27161	C	Osteotomy, femoral neck (separate procedure)
27165	C	Osteotomy, intertrochanteric or subtrochanteric including internal or external fixation and/or cast
27170	C	Bone graft, femoral head, neck, intertrochanteric or subtrochanteric area (includes obtaining bone graft)
27175	C	Treatment of slipped femoral epiphysis; by traction, without reduction
27176	C	Treatment of slipped femoral epiphysis; by single or multiple pinning, in situ
27177	C	Open treatment of slipped femoral epiphysis; single or multiple pinning or bone graft (includes obtaining graft)
27178	C	Open treatment of slipped femoral epiphysis; closed manipulation with single or multiple pinning
27179	C	Open treatment of slipped femoral epiphysis; osteoplasty of femoral neck (Heyman type procedure)
27181	C	Open treatment of slipped femoral epiphysis; osteotomy and internal fixation
27185	C	Epiphyseal arrest by epiphysiodesis or stapling, greater trochanter of femur
27187	C	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate, femoral neck and proximal femur
27222	C	Closed treatment of acetabulum (hip socket) fracture(s); with manipulation, with or without skeletal traction
27226	C	Open treatment of posterior or anterior acetabular wall fracture, with internal fixation
27227	C	Open treatment of acetabular fracture(s) involving anterior or posterior (one) column, or a fracture running transversely across the acetabulum, with internal fixation
27228	C	Open treatment of acetabular fracture(s) involving anterior and posterior (two) columns, includes T-fracture and both column fracture with complete articular detachment, or single column or transverse fracture with associated acetabular wall fracture, with internal fixation
27232	C	Closed treatment of femoral fracture, proximal end, neck; with manipulation, with or without skeletal traction
27236	C	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement
27240	C	Closed treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with manipulation, with or without skin or skeletal traction
27244	C	Treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with plate/screw type implant, with or without cerclage
27245	C	Treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with intramedullary implant, with or without interlocking screws and/or cerclage
27248	C	OPEN TREATMENT OF GREATER TROCHANTERIC FRACTURE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27253	C	Open treatment of hip dislocation, traumatic, without internal fixation
27254	C	Open treatment of hip dislocation, traumatic, with acetabular wall and femoral head fracture, with or without internal or external fixation
27258	C	Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc);
27259	C	Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc); with femoral shaft shortening
27268	C	CLOSED TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, HEAD; WITH MANIPULATION
27269	C	OPEN TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, HEAD, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27280	C	Arthrodesis, sacroiliac joint (including obtaining graft)
27282	C	Arthrodesis, symphysis pubis (including obtaining graft)
27284	C	Arthrodesis, hip joint (including obtaining graft);
27286	C	Arthrodesis, hip joint (including obtaining graft); with subtrochanteric osteotomy
27290	C	Interpelviabdominal amputation (hindquarter amputation)
27295	C	Disarticulation of hip
27303	C	Incision, deep, with opening of bone cortex, femur or knee (eg, osteomyelitis or bone abscess)
27365	C	Radical resection of tumor, bone, femur or knee
27445	C	Arthroplasty, knee, hinge prosthesis (eg, Walldius type)

27447	C	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)
27448	C	Osteotomy, femur, shaft or supracondylar; without fixation
27450	C	Osteotomy, femur, shaft or supracondylar; with fixation
27454	C	Osteotomy, multiple, with realignment on intramedullary rod, femoral shaft (eg, Sofield type procedure)
27455	C	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus (bowleg) or genu valgus (knock-knee)); before epiphyseal closure
27457	C	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus (bowleg) or genu valgus (knock-knee)); after epiphyseal closure
27465	C	Osteoplasty, femur; shortening (excluding 64876)
27466	C	Osteoplasty, femur; lengthening
27468	C	Osteoplasty, femur; combined, lengthening and shortening with femoral segment transfer
27470	C	Repair, nonunion or malunion, femur, distal to head and neck; without graft (eg, compression technique)
27472	C	Repair, nonunion or malunion, femur, distal to head and neck; with iliac or other autogenous bone graft (includes obtaining graft)
27477	C	Arrest, epiphyseal, any method (eg, epiphysiodesis); tibia and fibula, proximal
27485	C	Arrest, hemiepiphyseal, distal femur or proximal tibia or fibula (eg, genu varus or valgus)
27486	C	Revision of total knee arthroplasty, with or without allograft; one component
27487	C	Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component
27488	C	Removal of prosthesis, including total knee prosthesis, methylmethacrylate with or without insertion of spacer, knee
27495	C	PROPHYLACTIC TREATMENT (NAILING, PINNING, PLATING, OR WIRING) WITH OR WITHOUT METHYLMETHACRYLATE, FEMUR
27506	C	Open treatment of femoral shaft fracture, with or without external fixation, with insertion of intramedullary implant, with or without cerclage and/or locking screws
27507	C	Open treatment of femoral shaft fracture with plate/screws, with or without cerclage
27511	C	OPEN TREATMENT OF FEMORAL SUPRACONDYLAR OR TRANSCONDYLAR FRACTURE WITHOUT INTERCONDYLAR EXTENSION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27513	C	OPEN TREATMENT OF FEMORAL SUPRACONDYLAR OR TRANSCONDYLAR FRACTURE WITH INTERCONDYLAR EXTENSION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27514	C	OPEN TREATMENT OF FEMORAL FRACTURE, DISTAL END, MEDIAL OR LATERAL CONDYLE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27519	C	OPEN TREATMENT OF DISTAL FEMORAL EPIPHYSEAL SEPARATION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27535	C	OPEN TREATMENT OF TIBIAL FRACTURE, PROXIMAL (PLATEAU); UNICONDYLAR, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27536	C	Open treatment of tibial fracture, proximal (plateau); bicondylar, with or without internal fixation
27540	C	OPEN TREATMENT OF INTERCONDYLAR SPINE(S) AND/OR TUBEROSITY FRACTURE(S) OF THE KNEE, INCLUDES INTERNAL FIXATION, WHEN PERFORMED
27556	C	OPEN TREATMENT OF KNEE DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED; WITHOUT PRIMARY LIGAMENOUS REPAIR OR AUGMENTATION/RECONSTRUCTION
27557	C	OPEN TREATMENT OF KNEE DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED; WITH PRIMARY LIGAMENOUS REPAIR
27558	C	OPEN TREATMENT OF KNEE DISLOCATION, INCLUDES INTERNAL FIXATION, WHEN PERFORMED; WITH PRIMARY LIGAMENOUS REPAIR, WITH AUGMENTATION/RECONSTRUCTION
27580	C	Arthrodesis, knee, any technique
27590	C	Amputation, thigh, through femur, any level;
27591	C	Amputation, thigh, through femur, any level; immediate fitting technique including first cast
27592	C	Amputation, thigh, through femur, any level; open, circular (guillotine)
27596	C	Amputation, thigh, through femur, any level; re-amputation
27598	C	Disarticulation at knee
27645	C	Radical resection of tumor, bone; tibia
27646	C	Radical resection of tumor, bone; fibula
27702	C	Arthroplasty, ankle; with implant (total ankle)
27703	C	Arthroplasty, ankle; revision, total ankle
27712	C	Osteotomy; multiple, with realignment on intramedullary rod (eg, Sofield type procedure)
27715	C	Osteoplasty, tibia and fibula, lengthening or shortening
27724	C	Repair of nonunion or malunion, tibia; with iliac or other autograft (includes obtaining graft)
27725	C	Repair of nonunion or malunion, tibia; by synostosis, with fibula, any method
27727	C	Repair of congenital pseudarthrosis, tibia
27880	C	Amputation, leg, through tibia and fibula;
27881	C	Amputation, leg, through tibia and fibula; with immediate fitting technique including application of first cast
27882	C	Amputation, leg, through tibia and fibula; open, circular (guillotine)
27886	C	Amputation, leg, through tibia and fibula; re-amputation
27888	C	Amputation, ankle, through malleoli of tibia and fibula (eg, Syme, Pirogoff type procedures), with plastic closure and resection of nerves
28800	C	Amputation, foot; midtarsal (eg, Chopart type procedure)
28805	C	Amputation, foot; transmetatarsal
		<b>Respiratory System Chapter</b>
31225	C	Maxillectomy; without orbital exenteration
31230	C	Maxillectomy; with orbital exenteration (en bloc)

31290	C	Nasal/sinus endoscopy, surgical, with repair of cerebrospinal fluid leak; ethmoid region
31291	C	Nasal/sinus endoscopy, surgical, with repair of cerebrospinal fluid leak; sphenoid region
31360	C	Laryngectomy; total, without radical neck dissection
31365	C	Laryngectomy; total, with radical neck dissection
31367	C	Laryngectomy; subtotal supraglottic, without radical neck dissection
31368	C	Laryngectomy; subtotal supraglottic, with radical neck dissection
31370	C	Partial laryngectomy (hemilaryngectomy); horizontal
31375	C	Partial laryngectomy (hemilaryngectomy); laterovertical
31380	C	Partial laryngectomy (hemilaryngectomy); anterovertical
31382	C	Partial laryngectomy (hemilaryngectomy); antero-latero-vertical
31390	C	Pharyngolaryngectomy, with radical neck dissection; without reconstruction
31395	C	Pharyngolaryngectomy, with radical neck dissection; with reconstruction
31584	C	Laryngoplasty; with open reduction of fracture
31587	C	Laryngoplasty, cricoid split
31725	C	Catheter aspiration (separate procedure); tracheobronchial with fiberscope, bedside
31760	C	Tracheoplasty; intrathoracic
31766	C	Carinal reconstruction
31770	C	Bronchoplasty; graft repair
31775	C	Bronchoplasty; excision stenosis and anastomosis
31780	C	Excision tracheal stenosis and anastomosis; cervical
31781	C	Excision tracheal stenosis and anastomosis; cervicothoracic
31786	C	Excision of tracheal tumor or carcinoma; thoracic
31800	C	Suture of tracheal wound or injury; cervical
31805	C	Suture of tracheal wound or injury; intrathoracic
32035	C	Thoracostomy; with rib resection for empyema
32036	C	Thoracostomy; with open flap drainage for empyema
32095	C	Thoracotomy, limited, for biopsy of lung or pleura
32100	C	Thoracotomy, major; with exploration and biopsy
32110	C	Thoracotomy, major; with control of traumatic hemorrhage and/or repair of lung tear
32120	C	Thoracotomy, major; for postoperative complications
32124	C	Thoracotomy, major; with open intrapleural pneumonolysis
32140	C	Thoracotomy, major; with cyst(s) removal, with or without a pleural procedure
32141	C	Thoracotomy, major; with excision-plication of bullae, with or without any pleural procedure
32150	C	Thoracotomy, major; with removal of intrapleural foreign body or fibrin deposit
32151	C	Thoracotomy, major; with removal of intrapulmonary foreign body
32160	C	Thoracotomy, major; with cardiac massage
32200	C	Pneumonostomy; with open drainage of abscess or cyst
32215	C	Pleural scarification for repeat pneumothorax
32220	C	Decortication, pulmonary (separate procedure); total
32225	C	Decortication, pulmonary (separate procedure); partial
32310	C	Pleurectomy, parietal (separate procedure)
32320	C	Decortication and parietal pleurectomy
32402	C	Biopsy, pleura; open
32440	C	Removal of lung, total pneumonectomy;
32442	C	Removal of lung, total pneumonectomy; with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)
32445	C	Removal of lung, total pneumonectomy; extrapleural
32480	C	Removal of lung, other than total pneumonectomy; single lobe (lobectomy)
32482	C	Removal of lung, other than total pneumonectomy; two lobes (bilobectomy)
32484	C	Removal of lung, other than total pneumonectomy; single segment (segmentectomy)
32486	C	Removal of lung, other than total pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)
32488	C	Removal of lung, other than total pneumonectomy; all remaining lung following previous removal of a portion of lung (completion pneumonectomy)
32491	C	Removal of lung, other than total pneumonectomy; excision-plication of emphysematous lung(s) (bullous or non-bullous) for lung volume reduction, sternal split or transthoracic approach, with or without any pleural procedure
32500	C	Removal of lung, other than total pneumonectomy; wedge resection, single or multiple
32501	C	Resection and repair of portion of bronchus (bronchoplasty) when performed at time of lobectomy or segmentectomy (List separately in addition to code for primary procedure)
32503	C	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; without chest wall reconstruction(s)
32504	C	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; with chest wall reconstruction
32540	C	Extrapleural enucleation of empyema (empyemectomy)
32650	C	Thoracoscopy, surgical; with pleurodesis (eg, mechanical or chemical)
32651	C	Thoracoscopy, surgical; with partial pulmonary decortication
32652	C	Thoracoscopy, surgical; with total pulmonary decortication, including intrapleural pneumonolysis
32653	C	Thoracoscopy, surgical; with removal of intrapleural foreign body or fibrin deposit
32654	C	Thoracoscopy, surgical; with control of traumatic hemorrhage
32655	C	Thoracoscopy, surgical; with excision-plication of bullae, including any pleural procedure

32656	C	Thoracoscopy, surgical; with parietal pleurectomy
32657	C	Thoracoscopy, surgical; with wedge resection of lung, single or multiple
32658	C	Thoracoscopy, surgical; with removal of clot or foreign body from pericardial sac
32659	C	Thoracoscopy, surgical; with creation of pericardial window or partial resection of pericardial sac for drainage
32660	C	Thoracoscopy, surgical; with total pericardiectomy
32661	C	Thoracoscopy, surgical; with excision of pericardial cyst, tumor, or mass
32662	C	Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass
32663	C	Thoracoscopy, surgical; with lobectomy, total or segmental
32664	C	Thoracoscopy, surgical; with thoracic sympathectomy
32665	C	Thoracoscopy, surgical; with esophagomyotomy (Heller type)
32800	C	Repair lung hernia through chest wall
32810	C	Closure of chest wall following open flap drainage for empyema (Clagett type procedure)
32815	C	Open closure of major bronchial fistula
32820	C	Major reconstruction, chest wall (posttraumatic)
32850	C	Donor pneumonectomy(s) (including cold preservation), from cadaver donor
32851	C	Lung transplant, single; without cardiopulmonary bypass
32852	C	Lung transplant, single; with cardiopulmonary bypass
32853	C	Lung transplant, double (bilateral sequential or en bloc); without cardiopulmonary bypass
32854	C	Lung transplant, double (bilateral sequential or en bloc); with cardiopulmonary bypass
32855	C	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; unilateral
32856	C	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; bilateral
32900	C	Resection of ribs, extrapleural, all stages
32905	C	Thoracoplasty, Schede type or extrapleural (all stages);
32906	C	Thoracoplasty, Schede type or extrapleural (all stages); with closure of bronchopleural fistula
32940	C	Pneumonolysis, extraperiosteal, including filling or packing procedures
32997	C	Total lung lavage (unilateral)
		<b>Cardiovascular System Chapter</b>
33015	C	Tube pericardiostomy
33020	C	Pericardiotomy for removal of clot or foreign body (primary procedure)
33025	C	Creation of pericardial window or partial resection for drainage
33030	C	Pericardiectomy, subtotal or complete; without cardiopulmonary bypass
33031	C	Pericardiectomy, subtotal or complete; with cardiopulmonary bypass
33050	C	Excision of pericardial cyst or tumor
33120	C	Excision of intracardiac tumor, resection with cardiopulmonary bypass
33130	C	Resection of external cardiac tumor
33140	C	Transmyocardial laser revascularization, by thoracotomy; (separate procedure)
33141	C	Transmyocardial laser revascularization, by thoracotomy; performed at the time of other open cardiac procedure(s) (List separately in addition to code for primary procedure)
33202	C	Insertion of epicardial electrode(s); open incision (eg, thoracotomy, median sternotomy, subxiphoid approach)
33203	C	Insertion of epicardial electrode(s); endoscopic approach (eg, thoracoscopy, pericardioscopy)
33236	C	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; single lead system, atrial or ventricular
33237	C	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; dual lead system
33238	C	Removal of permanent transvenous electrode(s) by thoracotomy
33243	C	Removal of single or dual chamber pacing cardioverter-defibrillator electrode(s); by thoracotomy
33250	C	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re- entry), tract(s) and/or focus (foci); without cardiopulmonary bypass
33251	C	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re- entry), tract(s) and/or focus (foci); with cardiopulmonary bypass
33254	C	Operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure)
33255	C	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); without cardiopulmonary bypass
33256	C	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); with cardiopulmonary bypass
33257	C	OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, PERFORMED AT THE TIME OF OTHER CARDIAC PROCEDURE(S), LIMITED (EG, MODIFIED MAZE PROCEDURE) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33258	C	OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, PERFORMED AT THE TIME OF OTHER CARDIAC PROCEDURE(S), EXTENSIVE (EG, MAZE PROCEDURE), WITHOUT CARDIOPULMONARY BYPASS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33259	C	OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, PERFORMED AT THE TIME OF OTHER CARDIAC PROCEDURE(S), EXTENSIVE (EG, MAZE PROCEDURE), WITH CARDIOPULMONARY BYPASS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33261	C	Operative ablation of ventricular arrhythmogenic focus with cardiopulmonary bypass
33265	C	ENDOSCOPY, SURGICAL; OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, LIMITED (EG, MODIFIED MAZE PROCEDURE), WITHOUT CARDIOPULMONARY BYPASS
33266	C	ENDOSCOPY, SURGICAL; OPERATIVE TISSUE ABLATION AND RECONSTRUCTION OF ATRIA, EXTENSIVE (EG, MAZE PROCEDURE), WITHOUT CARDIOPULMONARY BYPASS

33300	C	Repair of cardiac wound; without bypass
33305	C	Repair of cardiac wound; with cardiopulmonary bypass
33310	C	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); without bypass
33315	C	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); with cardiopulmonary bypass
33320	C	Suture repair of aorta or great vessels; without shunt or cardiopulmonary bypass
33321	C	Suture repair of aorta or great vessels; with shunt bypass
33322	C	Suture repair of aorta or great vessels; with cardiopulmonary bypass
33330	C	Insertion of graft, aorta or great vessels; without shunt, or cardiopulmonary bypass
33332	C	Insertion of graft, aorta or great vessels; with shunt bypass
33335	C	Insertion of graft, aorta or great vessels; with cardiopulmonary bypass
33400	C	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass
33401	C	Valvuloplasty, aortic valve; open, with inflow occlusion
33403	C	Valvuloplasty, aortic valve; using transventricular dilation, with cardiopulmonary bypass
33404	C	Construction of apical-aortic conduit
33405	C	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve
33406	C	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)
33410	C	Replacement, aortic valve, with cardiopulmonary bypass; with stentless tissue valve
33411	C	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp
33412	C	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)
33413	C	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)
33414	C	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract
33415	C	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis
33416	C	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)
33417	C	Aortoplasty (gusset) for supraaortic stenosis
33420	C	Valvotomy, mitral valve; closed heart
33422	C	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass
33425	C	Valvuloplasty, mitral valve, with cardiopulmonary bypass;
33426	C	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring
33427	C	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring
33430	C	Replacement, mitral valve, with cardiopulmonary bypass
33460	C	Valvectomy, tricuspid valve, with cardiopulmonary bypass
33463	C	Valvuloplasty, tricuspid valve; without ring insertion
33464	C	Valvuloplasty, tricuspid valve; with ring insertion
33465	C	Replacement, tricuspid valve, with cardiopulmonary bypass
33468	C	Tricuspid valve repositioning and plication for Ebstein anomaly
33470	C	Valvotomy, pulmonary valve, closed heart; transventricular
33471	C	Valvotomy, pulmonary valve, closed heart; via pulmonary artery
33472	C	Valvotomy, pulmonary valve, open heart; with inflow occlusion
33474	C	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass
33475	C	Replacement, pulmonary valve
33476	C	Right ventricular resection for infundibular stenosis, with or without commissurotomy
33478	C	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection
33496	C	Repair of non-structural prosthetic valve dysfunction with cardiopulmonary bypass (separate procedure)
33500	C	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass
33501	C	Repair of coronary arteriovenous or arteriocardiac chamber fistula; without cardiopulmonary bypass
33502	C	Repair of anomalous coronary artery from pulmonary artery origin; by ligation
33503	C	Repair of anomalous coronary artery from pulmonary artery origin; by graft, without cardiopulmonary bypass
33504	C	Repair of anomalous coronary artery from pulmonary artery origin; by graft, with cardiopulmonary bypass
33505	C	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)
33506	C	Repair of anomalous coronary artery from pulmonary artery origin; by translocation from pulmonary artery to aorta
33507	C	Repair of anomalous (eg, intramural) aortic origin of coronary artery by unroofing or translocation
33510	C	Coronary artery bypass, vein only; single coronary venous graft
33511	C	Coronary artery bypass, vein only; two coronary venous grafts
33512	C	Coronary artery bypass, vein only; three coronary venous grafts
33513	C	Coronary artery bypass, vein only; four coronary venous grafts
33514	C	Coronary artery bypass, vein only; five coronary venous grafts
33516	C	Coronary artery bypass, vein only; six or more coronary venous grafts
33517	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); SINGLE VEIN GRAFT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33518	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); TWO VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33519	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); THREE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33521	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); FOUR VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33522	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); FIVE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)

33523	C	CORONARY ARTERY BYPASS, USING VENOUS GRAFT(S) AND ARTERIAL GRAFT(S); SIX OR MORE VENOUS GRAFTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
33530	C	Reoperation, coronary artery bypass procedure or valve procedure, more than one month after original operation (List separately in addition to code for primary procedure)
33533	C	Coronary artery bypass, using arterial graft(s); single arterial graft
33534	C	Coronary artery bypass, using arterial graft(s); two coronary arterial grafts
33535	C	Coronary artery bypass, using arterial graft(s); three coronary arterial grafts
33536	C	Coronary artery bypass, using arterial graft(s); four or more coronary arterial grafts
33542	C	Myocardial resection (eg, ventricular aneurysmectomy)
33545	C	Repair of postinfarction ventricular septal defect, with or without myocardial resection
33548	C	Surgical ventricular restoration procedure, includes prosthetic patch, when performed (eg, ventricular remodeling, SVR, SAVER, Dor procedures)
33572	C	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)
33600	C	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch
33602	C	Closure of semilunar valve (aortic or pulmonary) by suture or patch
33606	C	Anastomosis of pulmonary artery to aorta (Damus-Kaye-Stansel procedure)
33608	C	Repair of complex cardiac anomaly other than pulmonary atresia with ventricular septal defect by construction or replacement of conduit from right or left ventricle to pulmonary artery
33610	C	Repair of complex cardiac anomalies (eg, single ventricle with subaortic obstruction) by surgical enlargement of ventricular septal defect
33611	C	Repair of double outlet right ventricle with intraventricular tunnel repair;
33612	C	Repair of double outlet right ventricle with intraventricular tunnel repair; with repair of right ventricular outflow tract obstruction
33615	C	Repair of complex cardiac anomalies (eg, tricuspid atresia) by closure of atrial septal defect and anastomosis of atria or vena cava to pulmonary artery (simple Fontan procedure)
33617	C	Repair of complex cardiac anomalies (eg, single ventricle) by modified Fontan procedure
33619	C	Repair of single ventricle with aortic outflow obstruction and aortic arch hypoplasia (hypoplastic left heart syndrome) (eg, Norwood procedure)
33641	C	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch
33645	C	Direct or patch closure, sinus venosus, with or without anomalous pulmonary venous drainage
33647	C	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure
33660	C	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair
33665	C	Repair of intermediate or transitional atrioventricular canal, with or without atrioventricular valve repair
33670	C	Repair of complete atrioventricular canal, with or without prosthetic valve
33675	C	Closure of multiple ventricular septal defects;
33676	C	Closure of multiple ventricular septal defects; with pulmonary valvotomy or infundibular resection (acyanotic)
33677	C	Closure of multiple ventricular septal defects; with removal of pulmonary artery band, with or without gusset
33681	C	Closure of single ventricular septal defect, with or without patch;
33684	C	Closure of single ventricular septal defect, with or without patch; with pulmonary valvotomy or infundibular resection (acyanotic)
33688	C	Closure of single ventricular septal defect, with or without patch; with removal of pulmonary artery band, with or without gusset
33690	C	Banding of pulmonary artery
33692	C	Complete repair tetralogy of Fallot without pulmonary atresia;
33694	C	Complete repair tetralogy of Fallot without pulmonary atresia; with transannular patch
33697	C	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect
33702	C	Repair sinus of Valsalva fistula, with cardiopulmonary bypass;
33710	C	Repair sinus of Valsalva fistula, with cardiopulmonary bypass; with repair of ventricular septal defect
33720	C	Repair sinus of Valsalva aneurysm, with cardiopulmonary bypass
33722	C	Closure of aortico-left ventricular tunnel
33724	C	Repair of isolated partial anomalous pulmonary venous return (eg, Scimitar Syndrome)
33726	C	Repair of pulmonary venous stenosis
33730	C	Complete repair of anomalous pulmonary venous return (supracardiac, intracardiac, or infracardiac types)
33732	C	Repair of cor triatriatum or supravulvular mitral ring by resection of left atrial membrane
33735	C	Atrial septectomy or septostomy; closed heart (Blalock-Hanlon type operation)
33736	C	Atrial septectomy or septostomy; open heart with cardiopulmonary bypass
33737	C	Atrial septectomy or septostomy; open heart, with inflow occlusion
33750	C	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)
33755	C	Shunt; ascending aorta to pulmonary artery (Waterston type operation)
33762	C	Shunt; descending aorta to pulmonary artery (Potts-Smith type operation)
33764	C	Shunt; central, with prosthetic graft
33766	C	Shunt; superior vena cava to pulmonary artery for flow to one lung (classical Glenn procedure)
33767	C	Shunt; superior vena cava to pulmonary artery for flow to both lungs (bidirectional Glenn procedure)
33768	C	Anastomosis, cavopulmonary, second superior vena cava (List separately in addition to primary procedure)
33770	C	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; without surgical enlargement of ventricular septal defect

33771	C	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; with surgical enlargement of ventricular septal defect
33774	C	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass;
33775	C	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with removal of pulmonary band
33776	C	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with closure of ventricular septal defect
33777	C	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with repair of subpulmonic obstruction
33778	C	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type);
33779	C	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with removal of pulmonary band
33780	C	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect
33781	C	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction
33786	C	Total repair, truncus arteriosus (Rastelli type operation)
33788	C	Reimplantation of an anomalous pulmonary artery
33800	C	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)
33802	C	Division of aberrant vessel (vascular ring);
33803	C	Division of aberrant vessel (vascular ring); with reanastomosis
33813	C	Obliteration of aortopulmonary septal defect; without cardiopulmonary bypass
33814	C	Obliteration of aortopulmonary septal defect; with cardiopulmonary bypass
33820	C	Repair of patent ductus arteriosus; by ligation
33822	C	Repair of patent ductus arteriosus; by division, younger than 18 years
33824	C	Repair of patent ductus arteriosus; by division, 18 years and older
33840	C	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with direct anastomosis
33845	C	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with graft
33851	C	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; repair using either left subclavian artery or prosthetic material as gusset for enlargement
33852	C	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass
33853	C	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass
33860	C	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension;
33861	C	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension; with coronary reconstruction
33863	C	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension; with aortic root replacement using composite prosthesis and coronary reconstruction
33864	C	ASCENDING AORTA GRAFT, WITH CARDIOPULMONARY BYPASS WITH VALVE SUSPENSION, WITH CORONARY RECONSTRUCTION AND VALVE-SPARING AORTIC ANNULUS REMODELING (EG, DAVID PROCEDURE, YACOUB PROCEDURE)
33870	C	Transverse arch graft, with cardiopulmonary bypass
33875	C	Descending thoracic aorta graft, with or without bypass
33877	C	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass
33880	C	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin
33881	C	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin
33883	C	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension
33884	C	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); each additional proximal extension (List separately in addition to code for primary procedure)
33886	C	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta
33889	C	Open subclavian to carotid artery transposition performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision, unilateral
33891	C	Bypass graft, with other than vein, transcervical retropharyngeal carotid-carotid, performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision
33910	C	Pulmonary artery embolectomy; with cardiopulmonary bypass
33915	C	Pulmonary artery embolectomy; without cardiopulmonary bypass
33916	C	Pulmonary endarterectomy, with or without embolectomy, with cardiopulmonary bypass
33917	C	Repair of pulmonary artery stenosis by reconstruction with patch or graft
33920	C	Repair of pulmonary atresia with ventricular septal defect, by construction or replacement of conduit from right or left ventricle to pulmonary artery
33922	C	Transection of pulmonary artery with cardiopulmonary bypass
33924	C	Ligation and takedown of a systemic-to-pulmonary artery shunt, performed in conjunction with a congenital heart procedure (List separately in addition to code for primary procedure)
33925	C	Repair of pulmonary artery arborization anomalies by unifocalization; without cardiopulmonary bypass

33926	C	Repair of pulmonary artery arborization anomalies by unifocalization; with cardiopulmonary bypass
33930	C	Donor cardiectomy-pneumonectomy (including cold preservation)
33933	C	Backbench standard preparation of cadaver donor heart/lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, and trachea for implantation
33935	C	Heart-lung transplant with recipient cardiectomy-pneumonectomy
33940	C	Donor cardiectomy (including cold preservation)
33944	C	Backbench standard preparation of cadaver donor heart allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, pulmonary artery, and left atrium for implantation
33945	C	Heart transplant, with or without recipient cardiectomy
33960	C	Prolonged extracorporeal circulation for cardiopulmonary insufficiency; initial 24 hours
33961	C	Prolonged extracorporeal circulation for cardiopulmonary insufficiency; each additional 24 hours (List separately in addition to code for primary procedure)
33967	C	Insertion of intra-aortic balloon assist device, percutaneous
33968	C	Removal of intra-aortic balloon assist device, percutaneous
33970	C	Insertion of intra-aortic balloon assist device through the femoral artery, open approach
33971	C	Removal of intra-aortic balloon assist device including repair of femoral artery, with or without graft
33973	C	Insertion of intra-aortic balloon assist device through the ascending aorta
33974	C	Removal of intra-aortic balloon assist device from the ascending aorta, including repair of the ascending aorta, with or without graft
33975	C	Insertion of ventricular assist device; extracorporeal, single ventricle
33976	C	Insertion of ventricular assist device; extracorporeal, biventricular
33977	C	Removal of ventricular assist device; extracorporeal, single ventricle
33978	C	Removal of ventricular assist device; extracorporeal, biventricular
33979	C	Insertion of ventricular assist device, implantable intracorporeal, single ventricle
33980	C	Removal of ventricular assist device, implantable intracorporeal, single ventricle
34001	C	Embolectomy or thrombectomy, with or without catheter; carotid, subclavian or innominate artery, by neck incision
34051	C	Embolectomy or thrombectomy, with or without catheter; innominate, subclavian artery, by thoracic incision
34151	C	Embolectomy or thrombectomy, with or without catheter; renal, celiac, mesentery, aortoiliac artery, by abdominal incision
34401	C	Thrombectomy, direct or with catheter; vena cava, iliac vein, by abdominal incision
34451	C	Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by abdominal and leg incision
34502	C	Reconstruction of vena cava, any method
34800	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; using aorto-aortic tube prosthesis
34802	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; using modular bifurcated prosthesis (one docking limb)
34803	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; using modular bifurcated prosthesis (two docking limbs)
34804	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; using unibody bifurcated prosthesis
34805	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection; using aorto-uniliac or aorto-unifemoral prosthesis
34806	C	TRANSCATHETER PLACEMENT OF WIRELESS PHYSIOLOGIC SENSOR IN ANEURYSMAL SAC DURING ENDOVASCULAR REPAIR, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION, INSTRUMENT CALIBRATION, AND COLLECTION OF PRESSURE DATA
34808	C	Endovascular placement of iliac artery occlusion device (List separately in addition to code for primary procedure)
34812	C	Open femoral artery exposure for delivery of endovascular prosthesis, by groin incision, unilateral
34813	C	Placement of femoral-femoral prosthetic graft during endovascular aortic aneurysm repair (List separately in addition to code for primary procedure)
34820	C	Open iliac artery exposure for delivery of endovascular prosthesis or iliac occlusion during endovascular therapy, by abdominal or retroperitoneal incision, unilateral
34825	C	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, or dissection; initial vessel
34826	C	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, or dissection; each additional vessel (List separately in addition to code for primary procedure)
34830	C	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; tube prosthesis
34831	C	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bi-iliac prosthesis
34832	C	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bifemoral prosthesis
34833	C	Open iliac artery exposure with creation of conduit for delivery of aortic or iliac endovascular prosthesis, by abdominal or retroperitoneal incision, unilateral
34834	C	Open brachial artery exposure to assist in the deployment of aortic or iliac endovascular prosthesis by arm incision, unilateral
34900	C	Endovascular graft placement for repair of iliac artery (eg, aneurysm, pseudoaneurysm, arteriovenous malformation, trauma)
35001	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm and associated occlusive disease, carotid, subclavian artery, by neck incision

35002	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, carotid, subclavian artery, by neck incision
35005	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, vertebral artery
35013	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, axillary-brachial artery, by arm incision
35021	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, innominate, subclavian artery, by thoracic incision
35022	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, innominate, subclavian artery, by thoracic incision
35045	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, radial or ulnar artery
35081	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta
35082	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta
35091	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)
35092	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)
35102	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving iliac vessels (common, hypogastric, external)
35103	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving iliac vessels (common, hypogastric, external)
35111	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, splenic artery
35112	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, splenic artery
35121	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, hepatic, celiac, renal, or mesenteric artery
35122	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, hepatic, celiac, renal, or mesenteric artery
35131	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, iliac artery (common, hypogastric, external)
35132	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, iliac artery (common, hypogastric, external)
35141	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, common femoral artery (profunda femoris, superficial femoral)
35142	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, common femoral artery (profunda femoris, superficial femoral)
35151	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, popliteal artery
35152	C	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, popliteal artery
35182	C	Repair, congenital arteriovenous fistula; thorax and abdomen
35189	C	Repair, acquired or traumatic arteriovenous fistula; thorax and abdomen
35211	C	Repair blood vessel, direct; intrathoracic, with bypass
35216	C	Repair blood vessel, direct; intrathoracic, without bypass
35221	C	Repair blood vessel, direct; intra-abdominal
35241	C	Repair blood vessel with vein graft; intrathoracic, with bypass
35246	C	Repair blood vessel with vein graft; intrathoracic, without bypass
35251	C	Repair blood vessel with vein graft; intra-abdominal
35271	C	Repair blood vessel with graft other than vein; intrathoracic, with bypass
35276	C	Repair blood vessel with graft other than vein; intrathoracic, without bypass
35281	C	Repair blood vessel with graft other than vein; intra-abdominal
35301	C	Thromboendarterectomy, including patch graft, if performed; carotid, vertebral, subclavian, by neck incision
35302	C	Thromboendarterectomy, including patch graft, if performed; superficial femoral artery
35303	C	Thromboendarterectomy, including patch graft, if performed; popliteal artery
35304	C	Thromboendarterectomy, including patch graft, if performed; tibioperoneal trunk artery
35305	C	Thromboendarterectomy, including patch graft, if performed; tibial or peroneal artery, initial vessel
35306	C	Thromboendarterectomy, including patch graft, if performed; each additional tibial or peroneal artery (List separately in addition to code for primary procedure)
35311	C	Thromboendarterectomy, including patch graft, if performed; subclavian, innominate, by thoracic incision
35331	C	Thromboendarterectomy, including patch graft, if performed; abdominal aorta
35341	C	Thromboendarterectomy, including patch graft, if performed; mesenteric, celiac, or renal
35351	C	Thromboendarterectomy, including patch graft, if performed; iliac

35355	C	Thromboendarterectomy, including patch graft, if performed; iliofemoral
35361	C	Thromboendarterectomy, including patch graft, if performed; combined aortoiliac
35363	C	Thromboendarterectomy, including patch graft, if performed; combined aortoiliofemoral
35371	C	Thromboendarterectomy, including patch graft, if performed; common femoral
35372	C	Thromboendarterectomy, including patch graft, if performed; deep (profunda) femoral
35390	C	Reoperation, carotid, thromboendarterectomy, more than one month after original operation (List separately in addition to code for primary procedure)
35400	C	Angioscopy (non-coronary vessels or grafts) during therapeutic intervention (List separately in addition to code for primary procedure)
35450	C	Transluminal balloon angioplasty, open; renal or other visceral artery
35452	C	Transluminal balloon angioplasty, open; aortic
35454	C	Transluminal balloon angioplasty, open; iliac
35456	C	Transluminal balloon angioplasty, open; femoral-popliteal
35480	C	Transluminal peripheral atherectomy, open; renal or other visceral artery
35481	C	Transluminal peripheral atherectomy, open; aortic
35482	C	Transluminal peripheral atherectomy, open; iliac
35483	C	Transluminal peripheral atherectomy, open; femoral-popliteal
35501	C	Bypass graft, with vein; common carotid-ipsilateral internal carotid
35506	C	Bypass graft, with vein; carotid-subclavian or subclavian-carotid
35508	C	Bypass graft, with vein; carotid-vertebral
35509	C	Bypass graft, with vein; carotid-contralateral carotid
35510	C	Bypass graft, with vein; carotid-brachial
35511	C	Bypass graft, with vein; subclavian-subclavian
35512	C	Bypass graft, with vein; subclavian-brachial
35515	C	Bypass graft, with vein; subclavian-vertebral
35516	C	Bypass graft, with vein; subclavian-axillary
35518	C	Bypass graft, with vein; axillary-axillary
35521	C	Bypass graft, with vein; axillary-femoral
35522	C	Bypass graft, with vein; axillary-brachial
35523	C	BYPASS GRAFT, WITH VEIN; BRACHIAL-ULNAR OR -RADIAL
35525	C	Bypass graft, with vein; brachial-brachial
35526	C	Bypass graft, with vein; aortosubclavian or carotid
35531	C	Bypass graft, with vein; aortoceliac or aortomesenteric
35533	C	Bypass graft, with vein; axillary-femoral-femoral
35535		Bypass graft, with vein; hepatorenal
35536	C	Bypass graft, with vein; splenorenal
35537	C	Bypass graft, with vein; aortoiliac
35538	C	Bypass graft, with vein; aortobi-iliac
35539	C	Bypass graft, with vein; aortofemoral
35540	C	Bypass graft, with vein; aortobifemoral
35548	C	Bypass graft, with vein; aortoiliofemoral, unilateral
35549	C	Bypass graft, with vein; aortoiliofemoral, bilateral
35551	C	Bypass graft, with vein; aortofemoral-popliteal
35556	C	Bypass graft, with vein; femoral-popliteal
35558	C	Bypass graft, with vein; femoral-femoral
35560	C	Bypass graft, with vein; aortorenal
35563	C	Bypass graft, with vein; ilioliac
35565	C	Bypass graft, with vein; iliofemoral
35566	C	Bypass graft, with vein; femoral-anterior tibial, posterior tibial, peroneal artery or other distal vessels
35571	C	Bypass graft, with vein; popliteal-tibial, -peroneal artery or other distal vessels
35583	C	In-situ vein bypass; femoral-popliteal
35585	C	In-situ vein bypass; femoral-anterior tibial, posterior tibial, or peroneal artery
35587	C	In-situ vein bypass; popliteal-tibial, peroneal
35600	C	HARVEST OF UPPER EXTREMITY ARTERY, ONE SEGMENT, FOR CORONARY ARTERY BYPASS PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
35601	C	Bypass graft, with other than vein; common carotid-ipsilateral internal carotid
35606	C	Bypass graft, with other than vein; carotid-subclavian
35612	C	Bypass graft, with other than vein; subclavian-subclavian
35616	C	Bypass graft, with other than vein; subclavian-axillary
35621	C	Bypass graft, with other than vein; axillary-femoral
35623	C	Bypass graft, with other than vein; axillary-popliteal or -tibial
35626	C	Bypass graft, with other than vein; aortosubclavian or carotid
35631	C	Bypass graft, with other than vein; aortoceliac, aortomesenteric, aortorenal
35636	C	Bypass graft, with other than vein; splenorenal (splenic to renal arterial anastomosis)
35637	C	Bypass graft, with other than vein; aortoiliac
35638	C	Bypass graft, with other than vein; aortobi-iliac
35642	C	Bypass graft, with other than vein; carotid-vertebral
35645	C	Bypass graft, with other than vein; subclavian-vertebral
35646	C	Bypass graft, with other than vein; aortobifemoral
35647	C	Bypass graft, with other than vein; aortofemoral

35650	C	Bypass graft, with other than vein; axillary-axillary
35651	C	Bypass graft, with other than vein; aortofemoral-popliteal
35654	C	Bypass graft, with other than vein; axillary-femoral-femoral
35656	C	Bypass graft, with other than vein; femoral-popliteal
35661	C	Bypass graft, with other than vein; femoral-femoral
35663	C	Bypass graft, with other than vein; ilioliac
35665	C	Bypass graft, with other than vein; iliofemoral
35666	C	Bypass graft, with other than vein; femoral-anterior tibial, posterior tibial, or peroneal artery
35671	C	Bypass graft, with other than vein; popliteal-tibial or -peroneal artery
35681	C	Bypass graft; composite, prosthetic and vein (List separately in addition to code for primary procedure)
35682	C	Bypass graft; autogenous composite, two segments of veins from two locations (List separately in addition to code for primary procedure)
35683	C	Bypass graft; autogenous composite, three or more segments of vein from two or more locations (List separately in addition to code for primary procedure)
35691	C	Transposition and/or reimplantation; vertebral to carotid artery
35693	C	Transposition and/or reimplantation; vertebral to subclavian artery
35694	C	Transposition and/or reimplantation; subclavian to carotid artery
35695	C	Transposition and/or reimplantation; carotid to subclavian artery
35697	C	Reimplantation, visceral artery to infrarenal aortic prosthesis, each artery (List separately in addition to code for primary procedure)
35700	C	Reoperation, femoral-popliteal or femoral (popliteal)-anterior tibial, posterior tibial, peroneal artery, or other distal vessels, more than one month after original operation (List separately in addition to code for primary procedure)
35701	C	Exploration (not followed by surgical repair), with or without lysis of artery; carotid artery
35721	C	Exploration (not followed by surgical repair), with or without lysis of artery; femoral artery
35741	C	Exploration (not followed by surgical repair), with or without lysis of artery; popliteal artery
35800	C	Exploration for postoperative hemorrhage, thrombosis or infection; neck
35820	C	Exploration for postoperative hemorrhage, thrombosis or infection; chest
35840	C	Exploration for postoperative hemorrhage, thrombosis or infection; abdomen
35870	C	Repair of graft-enteric fistula
35901	C	Excision of infected graft; neck
35905	C	Excision of infected graft; thorax
35907	C	Excision of infected graft; abdomen
36660	C	Catheterization, umbilical artery, newborn, for diagnosis or therapy
36822	C	Insertion of cannula(s) for prolonged extracorporeal circulation for cardiopulmonary insufficiency (ECMO) (separate procedure)
36823	C	Insertion of arterial and venous cannula(s) for isolated extracorporeal circulation including regional chemotherapy perfusion to an extremity, with or without hyperthermia, with removal of cannula(s) and repair of arteriotomy and venotomy sites
37140	C	Venous anastomosis, open; portocaval
37145	C	Venous anastomosis, open; renoportal
37160	C	Venous anastomosis, open; caval-mesenteric
37180	C	Venous anastomosis, open; splenorenal, proximal
37181	C	Venous anastomosis, open; splenorenal, distal (selective decompression of esophagogastric varices, any technique)
37182	C	Insertion of transvenous intrahepatic portosystemic shunt(s) (TIPS) (includes venous access, hepatic and portal vein catheterization, portography with hemodynamic evaluation, intrahepatic tract formation/dilatation, stent placement and all associated imaging guidance and documentation)
37215	C	Transcatheter placement of intravascular stent(s), cervical carotid artery, percutaneous; with distal embolic protection
37616	C	Ligation, major artery (eg, post-traumatic, rupture); chest
37617	C	Ligation, major artery (eg, post-traumatic, rupture); abdomen
37618	C	Ligation, major artery (eg, post-traumatic, rupture); extremity
37660	C	Ligation of common iliac vein
37788	C	Penile revascularization, artery, with or without vein graft
38100	C	Splenectomy; total (separate procedure)
38101	C	Splenectomy; partial (separate procedure)
38102	C	Splenectomy; total, en bloc for extensive disease, in conjunction with other procedure (List in addition to code for primary procedure)
38115	C	Repair of ruptured spleen (splenorrhaphy) with or without partial splenectomy
38380	C	Suture and/or ligation of thoracic duct; cervical approach
38381	C	Suture and/or ligation of thoracic duct; thoracic approach
38382	C	Suture and/or ligation of thoracic duct; abdominal approach
38562	C	Limited lymphadenectomy for staging (separate procedure); pelvic and para-aortic
38564	C	Limited lymphadenectomy for staging (separate procedure); retroperitoneal (aortic and/or splenic)
38724	C	Cervical lymphadenectomy (modified radical neck dissection)
38746	C	Thoracic lymphadenectomy, regional, including mediastinal and peritracheal nodes (List separately in addition to code for primary procedure)
38747	C	Abdominal lymphadenectomy, regional, including celiac, gastric, portal, peripancreatic, with or without para-aortic and vena caval nodes (List separately in addition to code for primary procedure)
38765	C	Inguinofemoral lymphadenectomy, superficial, in continuity with pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes (separate procedure)
38770	C	Pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes (separate procedure)

38780	C	Retroperitoneal transabdominal lymphadenectomy, extensive, including pelvic, aortic, and renal nodes (separate procedure)
39000	C	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; cervical approach
39010	C	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; transthoracic approach, including either transthoracic or median sternotomy
39200	C	Excision of mediastinal cyst
39220	C	Excision of mediastinal tumor
39499	C	Unlisted procedure, mediastinum
39501	C	Repair, laceration of diaphragm, any approach
39502	C	Repair, paraesophageal hiatus hernia, transabdominal, with or without fundoplasty, vagotomy, and/or pyloroplasty, except neonatal
39503	C	Repair, neonatal diaphragmatic hernia, with or without chest tube insertion and with or without creation of ventral hernia
39520	C	Repair, diaphragmatic hernia (esophageal hiatal); transthoracic
39530	C	Repair, diaphragmatic hernia (esophageal hiatal); combined, thoracoabdominal
39531	C	Repair, diaphragmatic hernia (esophageal hiatal); combined, thoracoabdominal, with dilation of stricture (with or without gastroplasty)
39540	C	Repair, diaphragmatic hernia (other than neonatal), traumatic; acute
39541	C	Repair, diaphragmatic hernia (other than neonatal), traumatic; chronic
39545	C	Imbrication of diaphragm for eventration, transthoracic or transabdominal, paralytic or nonparalytic
39560	C	Resection, diaphragm; with simple repair (eg, primary suture)
39561	C	Resection, diaphragm; with complex repair (eg, prosthetic material, local muscle flap)
39599	C	Unlisted procedure, diaphragm
		<b>Digestive System Chapter</b>
41130	C	Glossectomy; hemiglossectomy
41135	C	Glossectomy; partial, with unilateral radical neck dissection
41140	C	Glossectomy; complete or total, with or without tracheostomy, without radical neck dissection
41145	C	Glossectomy; complete or total, with or without tracheostomy, with unilateral radical neck dissection
41150	C	Glossectomy; composite procedure with resection floor of mouth and mandibular resection, without radical neck dissection
41153	C	Glossectomy; composite procedure with resection floor of mouth, with suprahyoid neck dissection
41155	C	Glossectomy; composite procedure with resection floor of mouth, mandibular resection, and radical neck dissection (Commando type)
42426	C	Excision of parotid tumor or parotid gland; total, with unilateral radical neck dissection
42845	C	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with other flap
42894	C	Resection of pharyngeal wall requiring closure with myocutaneous flap
42953	C	Pharyngoesophageal repair
42961	C	Control oropharyngeal hemorrhage, primary or secondary (eg, post-tonsillectomy); complicated, requiring hospitalization
42971	C	Control of nasopharyngeal hemorrhage, primary or secondary (eg, postadenoidectomy); complicated, requiring hospitalization
43045	C	Esophagotomy, thoracic approach, with removal of foreign body
43100	C	Excision of lesion, esophagus, with primary repair; cervical approach
43101	C	Excision of lesion, esophagus, with primary repair; thoracic or abdominal approach
43107	C	Total or near total esophagectomy, without thoracotomy; with pharyngogastrostomy or cervical esophagogastrostomy, with or without pyloroplasty (transhiatal)
43108	C	Total or near total esophagectomy, without thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation and anastomosis(es)
43112	C	Total or near total esophagectomy, with thoracotomy; with pharyngogastrostomy or cervical esophagogastrostomy, with or without pyloroplasty
43113	C	Total or near total esophagectomy, with thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)
43116	C	Partial esophagectomy, cervical, with free intestinal graft, including microvascular anastomosis, obtaining the graft and intestinal reconstruction
43117	C	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with thoracic esophagogastrostomy, with or without pyloroplasty (Ivor Lewis)
43118	C	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)
43121	C	Partial esophagectomy, distal two-thirds, with thoracotomy only, with or without proximal gastrectomy, with thoracic esophagogastrostomy, with or without pyloroplasty
43122	C	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with esophagogastrostomy, with or without pyloroplasty
43123	C	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)
43124	C	Total or partial esophagectomy, without reconstruction (any approach), with cervical esophagostomy
43135	C	Diverticulectomy of hypopharynx or esophagus, with or without myotomy; thoracic approach
43279	C	Esophagoplasty (plastic repair or reconstruction), cervical approach; without repair of tracheoesophageal fistula
43300	C	Esophagoplasty (plastic repair or reconstruction), cervical approach; with repair of tracheoesophageal fistula
43305	C	Esophagoplasty (plastic repair or reconstruction), thoracic approach; without repair of tracheoesophageal fistula

43310	C	Esophagoplasty (plastic repair or reconstruction), thoracic approach; with repair of tracheoesophageal fistula
43312	C	Esophagoplasty for congenital defect (plastic repair or reconstruction), thoracic approach; without repair of congenital tracheoesophageal fistula
43313	C	Esophagoplasty for congenital defect (plastic repair or reconstruction), thoracic approach; with repair of congenital tracheoesophageal fistula
43314	C	Esophagogastrostomy (cardioplasty), with or without vagotomy and pyloroplasty, transabdominal or transthoracic approach
43320	C	Esophagogastric fundoplasty (eg, Nissen, Belsey IV, Hill procedures)
43324	C	Esophagogastric fundoplasty; with fundic patch (Thal-Nissen procedure)
43325	C	Esophagogastric fundoplasty; with gastroplasty (eg, Collis)
43326	C	Esophagomyotomy (Heller type); abdominal approach
43330	C	Esophagomyotomy (Heller type); thoracic approach
43331	C	Esophagojejunostomy (without total gastrectomy); abdominal approach
43340	C	Esophagojejunostomy (without total gastrectomy); thoracic approach
43341	C	Esophagostomy, fistulization of esophagus, external; abdominal approach
43350	C	Esophagostomy, fistulization of esophagus, external; thoracic approach
43351	C	Esophagostomy, fistulization of esophagus, external; cervical approach
43352	C	Gastrointestinal reconstruction for previous esophagectomy, for obstructing esophageal lesion or fistula, or for previous esophageal exclusion; with stomach, with or without pyloroplasty
43360	C	Gastrointestinal reconstruction for previous esophagectomy, for obstructing esophageal lesion or fistula, or for previous esophageal exclusion; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)
43361	C	Ligation, direct, esophageal varices
43400	C	Transection of esophagus with repair, for esophageal varices
43401	C	Ligation or stapling at gastroesophageal junction for pre-existing esophageal perforation
43405	C	Suture of esophageal wound or injury; cervical approach
43410	C	Suture of esophageal wound or injury; transthoracic or transabdominal approach
43415	C	Closure of esophagostomy or fistula; cervical approach
43425	C	Closure of esophagostomy or fistula; transthoracic or transabdominal approach
43460	C	Esophagogastric tamponade, with balloon (Sengstaaken type)
43496	C	Free jejunum transfer with microvascular anastomosis
43500	C	Gastrotomy; with exploration or foreign body removal
43501	C	Gastrotomy; with suture repair of bleeding ulcer
43502	C	Gastrotomy; with suture repair of pre-existing esophagogastric laceration (eg, Mallory-Weiss)
43520	C	Pyloromyotomy, cutting of pyloric muscle (Fredet-Ramstedt type operation)
43605	C	Biopsy of stomach; by laparotomy
43610	C	Excision, local; ulcer or benign tumor of stomach
43611	C	Excision, local; malignant tumor of stomach
43620	C	Gastrectomy, total; with esophagoenterostomy
43621	C	Gastrectomy, total; with Roux-en-Y reconstruction
43622	C	Gastrectomy, total; with formation of intestinal pouch, any type
43631	C	Gastrectomy, partial, distal; with gastroduodenostomy
43632	C	Gastrectomy, partial, distal; with gastrojejunostomy
43633	C	Gastrectomy, partial, distal; with Roux-en-Y reconstruction
43634	C	Gastrectomy, partial, distal; with formation of intestinal pouch
43635	C	Vagotomy when performed with partial distal gastrectomy (List separately in addition to code(s) for primary procedure)
43640	C	Vagotomy including pyloroplasty, with or without gastrotomy; truncal or selective
43641	C	Vagotomy including pyloroplasty, with or without gastrotomy; parietal cell (highly selective)
43644	C	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)
43645	C	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption
43770	C	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; PLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (EG, GASTRIC BAND AND SUBCUTANEOUS PORT COMPONENTS)
43771	C	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REVISION OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY
43772	C	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY
43773	C	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL AND REPLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY
43774	C	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE AND SUBCUTANEOUS PORT COMPONENTS
43800	C	Pyloroplasty
43810	C	Gastroduodenostomy
43820	C	Gastrojejunostomy; without vagotomy
43825	C	Gastrojejunostomy; with vagotomy, any type
43832	C	Gastrotomy, open; with construction of gastric tube (eg, Janeway procedure)
43840	C	Gastrorrhaphy, suture of perforated duodenal or gastric ulcer, wound, or injury
43843	C	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty

43845	C	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)
43846	C	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy
43847	C	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption
43848	C	REVISION, OPEN, OF GASTRIC RESTRICTIVE PROCEDURE FOR MORBID OBESITY, OTHER THAN ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (SEPARATE PROCEDURE)
43850	C	Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; without vagotomy
43855	C	Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; with vagotomy
43860	C	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction, with or without partial gastrectomy or intestine resection; without vagotomy
43865	C	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction, with or without partial gastrectomy or intestine resection; with vagotomy
43880	C	Closure of gastrocolic fistula
43881	C	Implantation or replacement of gastric neurostimulator electrodes, antrum, open
43882	C	Revision or removal of gastric neurostimulator electrodes, antrum, open
44005	C	Enterolysis (freeing of intestinal adhesion) (separate procedure)
44010	C	Duodenotomy, for exploration, biopsy(s), or foreign body removal
44015	C	Tube or needle catheter jejunostomy for enteral alimentation, intraoperative, any method (List separately in addition to primary procedure)
44020	C	Enterotomy, small intestine, other than duodenum; for exploration, biopsy(s), or foreign body removal
44021	C	Enterotomy, small intestine, other than duodenum; for decompression (eg, Baker tube)
44025	C	Colotomy, for exploration, biopsy(s), or foreign body removal
44050	C	Reduction of volvulus, intussusception, internal hernia, by laparotomy
44055	C	Correction of malrotation by lysis of duodenal bands and/or reduction of midgut volvulus (eg, Ladd procedure)
44110	C	Excision of one or more lesions of small or large intestine not requiring anastomosis, exteriorization, or fistulization; single enterotomy
44111	C	Excision of one or more lesions of small or large intestine not requiring anastomosis, exteriorization, or fistulization; multiple enterotomies
44120	C	Enterectomy, resection of small intestine; single resection and anastomosis
44121	C	Enterectomy, resection of small intestine; each additional resection and anastomosis (List separately in addition to code for primary procedure)
44125	C	Enterectomy, resection of small intestine; with enterostomy
44126	C	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; without tapering
44127	C	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; with tapering
44128	C	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; each additional resection and anastomosis (List separately in addition to code for primary procedure)
44130	C	Enteroenterostomy, anastomosis of intestine, with or without cutaneous enterostomy (separate procedure)
44132	C	Donor enterectomy (including cold preservation), open; from cadaver donor
44133	C	Donor enterectomy (including cold preservation), open; partial, from living donor
44135	C	Intestinal allotransplantation; from cadaver donor
44136	C	Intestinal allotransplantation; from living donor
44137	C	Removal of transplanted intestinal allograft, complete
44139	C	Mobilization (take-down) of splenic flexure performed in conjunction with partial colectomy (List separately in addition to primary procedure)
44140	C	Colectomy, partial; with anastomosis
44141	C	Colectomy, partial; with skin level cecostomy or colostomy
44143	C	Colectomy, partial; with end colostomy and closure of distal segment (Hartmann type procedure)
44144	C	Colectomy, partial; with resection, with colostomy or ileostomy and creation of mucofistula
44145	C	Colectomy, partial; with coloproctostomy (low pelvic anastomosis)
44146	C	Colectomy, partial; with coloproctostomy (low pelvic anastomosis), with colostomy
44147	C	Colectomy, partial; abdominal and transanal approach
44150	C	Colectomy, total, abdominal, without proctectomy; with ileostomy or ileoproctostomy
44151	C	Colectomy, total, abdominal, without proctectomy; with continent ileostomy
44155	C	Colectomy, total, abdominal, with proctectomy; with ileostomy
44156	C	Colectomy, total, abdominal, with proctectomy; with continent ileostomy
44157	C	Colectomy, total, abdominal, with proctectomy; with ileoanal anastomosis, includes loop ileostomy, and rectal mucosectomy, when performed
44158	C	Colectomy, total, abdominal, with proctectomy; with ileoanal anastomosis, creation of ileal reservoir (S or J), includes loop ileostomy, and rectal mucosectomy, when performed
44160	C	Colectomy, partial, with removal of terminal ileum with ileocolostomy
44187	C	Laparoscopy, surgical; ileostomy or jejunostomy, non-tube
44188	C	Laparoscopy, surgical, colostomy or skin level cecostomy
44202	C	Laparoscopy, surgical; enterectomy, resection of small intestine, single resection and anastomosis
44203	C	Laparoscopy, surgical; each additional small intestine resection and anastomosis (List separately in addition to code for primary procedure)

44204	C	Laparoscopy, surgical; colectomy, partial, with anastomosis
44205	C	Laparoscopy, surgical; colectomy, partial, with removal of terminal ileum with ileocolostomy
44210	C	Laparoscopy, surgical; colectomy, total, abdominal, without proctectomy, with ileostomy or ileoproctostomy
44211	C	Laparoscopy, surgical; colectomy, total, abdominal, with proctectomy, with ileoanal anastomosis, creation of ileal reservoir (S or J), with loop ileostomy, includes rectal mucosectomy, when performed
44212	C	Laparoscopy, surgical; colectomy, total, abdominal, with proctectomy, with ileostomy
44227	C	Laparoscopy, surgical, closure of enterostomy, large or small intestine, with resection and anastomosis
44300	C	PLACEMENT, ENTEROSTOMY OR CECOSTOMY, TUBE OPEN (EG, FOR FEEDING OR DECOMPRESSION) (SEPARATE PROCEDURE)
44310	C	Ileostomy or jejunostomy, non-tube
44314	C	Revision of ileostomy; complicated (reconstruction in-depth) (separate procedure)
44316	C	Continent ileostomy (Kock procedure) (separate procedure)
44320	C	Colostomy or skin level cecostomy;
44322	C	Colostomy or skin level cecostomy; with multiple biopsies (eg, for congenital megacolon) (separate procedure)
44345	C	Revision of colostomy; complicated (reconstruction in-depth) (separate procedure)
44346	C	Revision of colostomy; with repair of paracolostomy hernia (separate procedure)
44602	C	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; single perforation
44603	C	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; multiple perforations
44604	C	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); without colostomy
44605	C	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); with colostomy
44615	C	Intestinal stricturoplasty (enterotomy and enterorrhaphy) with or without dilation, for intestinal obstruction
44620	C	Closure of enterostomy, large or small intestine;
44625	C	Closure of enterostomy, large or small intestine; with resection and anastomosis other than colorectal
44626	C	Closure of enterostomy, large or small intestine; with resection and colorectal anastomosis (eg, closure of Hartmann type procedure)
44640	C	Closure of intestinal cutaneous fistula
44650	C	Closure of enteroenteric or enterocolic fistula
44660	C	Closure of enterovesical fistula; without intestinal or bladder resection
44661	C	Closure of enterovesical fistula; with intestine and/or bladder resection
44680	C	Intestinal plication (separate procedure)
44700	C	Exclusion of small intestine from pelvis by mesh or other prosthesis, or native tissue (eg, bladder or omentum)
44715	C	Backbench standard preparation of cadaver or living donor intestine allograft prior to transplantation, including mobilization and fashioning of the superior mesenteric artery and vein
44720	C	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; venous anastomosis, each
44721	C	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; arterial anastomosis, each
44800	C	Excision of Meckel's diverticulum (diverticulectomy) or omphalomesenteric duct
44820	C	Excision of lesion of mesentery (separate procedure)
44850	C	Suture of mesentery (separate procedure)
44899	C	Unlisted procedure, Meckel's diverticulum and the mesentery
44900	C	Incision and drainage of appendiceal abscess; open
44950	C	Appendectomy;
44955	C	Appendectomy; when done for indicated purpose at time of other major procedure (not as separate procedure) (List separately in addition to code for primary procedure)
44960	C	Appendectomy; for ruptured appendix with abscess or generalized peritonitis
45110	C	Proctectomy; complete, combined abdominoperineal, with colostomy
45111	C	Proctectomy; partial resection of rectum, transabdominal approach
45112	C	Proctectomy, combined abdominoperineal, pull-through procedure (eg, colo-anal anastomosis)
45113	C	Proctectomy, partial, with rectal mucosectomy, ileoanal anastomosis, creation of ileal reservoir (S or J), with or without loop ileostomy
45114	C	Proctectomy, partial, with anastomosis; abdominal and transsacral approach
45116	C	Proctectomy, partial, with anastomosis; transsacral approach only (Kraske type)
45119	C	Proctectomy, combined abdominoperineal pull-through procedure (eg, colo-anal anastomosis), with creation of colonic reservoir (eg, J-pouch), with diverting enterostomy when performed
45120	C	Proctectomy, complete (for congenital megacolon), abdominal and perineal approach; with pull-through procedure and anastomosis (eg, Swenson, Duhamel, or Soave type operation)
45121	C	Proctectomy, complete (for congenital megacolon), abdominal and perineal approach; with subtotal or total colectomy, with multiple biopsies
45123	C	Proctectomy, partial, without anastomosis, perineal approach
45126	C	Pelvic exenteration for colorectal malignancy, with proctectomy (with or without colostomy), with removal of bladder and ureteral transplantations, and/or hysterectomy, or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), or any combination thereof
45130	C	Excision of rectal procidentia, with anastomosis; perineal approach
45135	C	Excision of rectal procidentia, with anastomosis; abdominal and perineal approach
45136	C	Excision of ileoanal reservoir with ileostomy
45395	C	Laparoscopy, surgical; proctectomy, complete, combined abdominoperineal, with colostomy

45397	C	Laparoscopy, surgical; proctectomy, combined abdominoperineal pull-through procedure (eg, colo-anal anastomosis), with creation of colonic reservoir (eg, J-pouch), with diverting enterostomy, when performed
45400	C	Laparoscopy, surgical; proctopexy (for prolapse)
45402	C	Laparoscopy, surgical; proctopexy (for prolapse), with sigmoid resection
45540	C	Proctopexy (eg, for prolapse); abdominal approach
45550	C	Proctopexy (eg, for prolapse); with sigmoid resection, abdominal approach
45562	C	Exploration, repair, and presacral drainage for rectal injury;
45563	C	Exploration, repair, and presacral drainage for rectal injury; with colostomy
45800	C	Closure of rectovesical fistula;
45805	C	Closure of rectovesical fistula; with colostomy
45820	C	Closure of rectourethral fistula;
45825	C	Closure of rectourethral fistula; with colostomy
46705	C	Anoplasty, plastic operation for stricture; infant
46710	C	Repair of ileoanal pouch fistula/sinus (eg, perineal or vaginal), pouch advancement; transperineal approach
46712	C	Repair of ileoanal pouch fistula/sinus (eg, perineal or vaginal), pouch advancement; combined transperineal and transabdominal approach
46715	C	Repair of low imperforate anus; with anoperineal fistula (cut-back procedure)
46716	C	Repair of low imperforate anus; with transposition of anoperineal or anovestibular fistula
46730	C	Repair of high imperforate anus without fistula; perineal or sacroperineal approach
46735	C	Repair of high imperforate anus without fistula; combined transabdominal and sacroperineal approaches
46740	C	Repair of high imperforate anus with rectourethral or rectovaginal fistula; perineal or sacroperineal approach
46742	C	Repair of high imperforate anus with rectourethral or rectovaginal fistula; combined transabdominal and sacroperineal approaches
46744	C	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, sacroperineal approach
46746	C	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, combined abdominal and sacroperineal approach;
46748	C	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, combined abdominal and sacroperineal approach; with vaginal lengthening by intestinal graft or pedicle flaps
46751	C	Sphincteroplasty, anal, for incontinence or prolapse; child
47010	C	Hepatotomy; for open drainage of abscess or cyst, one or two stages
47015	C	Laparotomy, with aspiration and/or injection of hepatic parasitic (eg, amoebic or echinococcal) cyst(s) or abscess(es)
47100	C	Biopsy of liver, wedge
47120	C	Hepatectomy, resection of liver; partial lobectomy
47122	C	Hepatectomy, resection of liver; trisegmentectomy
47125	C	Hepatectomy, resection of liver; total left lobectomy
47130	C	Hepatectomy, resection of liver; total right lobectomy
47133	C	Donor hepatectomy (including cold preservation), from cadaver donor
47135	C	Liver allotransplantation; orthotopic, partial or whole, from cadaver or living donor, any age
47136	C	Liver allotransplantation; heterotopic, partial or whole, from cadaver or living donor, any age
47140	C	Donor hepatectomy (including cold preservation), from living donor; left lateral segment only (segments II and III)
47141	C	Donor hepatectomy (including cold preservation), from living donor; total left lobectomy (segments II, III and IV)
47142	C	Donor hepatectomy (including cold preservation), from living donor; total right lobectomy (segments V, VI, VII and VIII)
47143	C	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; without trisegment or lobe split
47144	C	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with trisegment split of whole liver graft into two partial liver grafts (ie, left lateral segment (segments II and III) and right trisegment (segments I and IV through VIII))
47145	C	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with lobe split of whole liver graft into two partial liver grafts (ie, left lobe (segments II, III, and IV) and right lobe (segments I and V through VIII))
47146	C	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; venous anastomosis, each
47147	C	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; arterial anastomosis, each
47300	C	Marsupialization of cyst or abscess of liver
47350	C	Management of liver hemorrhage; simple suture of liver wound or injury
47360	C	Management of liver hemorrhage; complex suture of liver wound or injury, with or without hepatic artery ligation
47361	C	Management of liver hemorrhage; exploration of hepatic wound, extensive debridement, coagulation and/or suture, with or without packing of liver
47362	C	Management of liver hemorrhage; re-exploration of hepatic wound for removal of packing
47380	C	Ablation, open, of one or more liver tumor(s); radiofrequency
47381	C	Ablation, open, of one or more liver tumor(s); cryosurgical
47400	C	Hepaticotomy or hepaticostomy with exploration, drainage, or removal of calculus
47420	C	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy; without transduodenal sphincterotomy or sphincteroplasty
47425	C	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy; with transduodenal sphincterotomy or sphincteroplasty
47460	C	Transduodenal sphincterotomy or sphincteroplasty, with or without transduodenal extraction of calculus (separate procedure)

47480	C	Cholecystotomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure)
47550	C	Biliary endoscopy, intraoperative (choledochoscopy) (List separately in addition to code for primary procedure)
47570	C	Laparoscopy, surgical; cholecystoenterostomy
47600	C	Cholecystectomy;
47605	C	Cholecystectomy; with cholangiography
47610	C	Cholecystectomy with exploration of common duct;
47612	C	Cholecystectomy with exploration of common duct; with choledochenterostomy
47620	C	Cholecystectomy with exploration of common duct; with transduodenal sphincterotomy or sphincteroplasty, with or without cholangiography
47700	C	Exploration for congenital atresia of bile ducts, without repair, with or without liver biopsy, with or without cholangiography
47701	C	Portoenterostomy (eg, Kasai procedure)
47711	C	Excision of bile duct tumor, with or without primary repair of bile duct; extrahepatic
47712	C	Excision of bile duct tumor, with or without primary repair of bile duct; intrahepatic
47715	C	Excision of choledochal cyst
47720	C	Cholecystoenterostomy; direct
47721	C	Cholecystoenterostomy; with gastroenterostomy
47740	C	Cholecystoenterostomy; Roux-en-Y
47741	C	Cholecystoenterostomy; Roux-en-Y with gastroenterostomy
47760	C	Anastomosis, of extrahepatic biliary ducts and gastrointestinal tract
47765	C	Anastomosis, of intrahepatic ducts and gastrointestinal tract
47780	C	Anastomosis, Roux-en-Y, of extrahepatic biliary ducts and gastrointestinal tract
47785	C	Anastomosis, Roux-en-Y, of intrahepatic biliary ducts and gastrointestinal tract
47800	C	Reconstruction, plastic, of extrahepatic biliary ducts with end-to-end anastomosis
47801	C	Placement of choledochal stent
47802	C	U-tube hepaticoenterostomy
47900	C	Suture of extrahepatic biliary duct for pre-existing injury (separate procedure)
48000	C	Placement of drains, peripancreatic, for acute pancreatitis;
48001	C	Placement of drains, peripancreatic, for acute pancreatitis; with cholecystostomy, gastrostomy, and jejunostomy
48020	C	Removal of pancreatic calculus
48100	C	Biopsy of pancreas, open (eg, fine needle aspiration, needle core biopsy, wedge biopsy)
48105	C	Resection or debridement of pancreas and peripancreatic tissue for acute necrotizing pancreatitis
48120	C	Excision of lesion of pancreas (eg, cyst, adenoma)
48140	C	Pancreatectomy, distal subtotal, with or without splenectomy; without pancreaticojejunostomy
48145	C	Pancreatectomy, distal subtotal, with or without splenectomy; with pancreaticojejunostomy
48146	C	Pancreatectomy, distal, near-total with preservation of duodenum (Child-type procedure)
48148	C	Excision of ampulla of Vater
48150	C	Pancreatectomy, proximal subtotal with total duodenectomy, partial gastrectomy, choledochenterostomy and gastrojejunostomy (Whipple-type procedure); with pancreaticojejunostomy
48152	C	Pancreatectomy, proximal subtotal with total duodenectomy, partial gastrectomy, choledochenterostomy and gastrojejunostomy (Whipple-type procedure); without pancreaticojejunostomy
48153	C	Pancreatectomy, proximal subtotal with near-total duodenectomy, choledochenterostomy and duodenojejunostomy (pylorus-sparing, Whipple-type procedure); with pancreaticojejunostomy
48154	C	Pancreatectomy, proximal subtotal with near-total duodenectomy, choledochenterostomy and duodenojejunostomy (pylorus-sparing, Whipple-type procedure); without pancreaticojejunostomy
48155	C	Pancreatectomy, total
48400	C	Injection procedure for intraoperative pancreatography (List separately in addition to code for primary procedure)
48500	C	Marsupialization of pancreatic cyst
48510	C	External drainage, pseudocyst of pancreas; open
48520	C	Internal anastomosis of pancreatic cyst to gastrointestinal tract; direct
48540	C	Internal anastomosis of pancreatic cyst to gastrointestinal tract; Roux-en-Y
48545	C	Pancreatorrhaphy for injury
48547	C	Duodenal exclusion with gastrojejunostomy for pancreatic injury
48548	C	Pancreaticojejunostomy, side-to-side anastomosis (Puestow-type operation)
48551	C	Backbench standard preparation of cadaver donor pancreas allograft prior to transplantation, including dissection of allograft from surrounding soft tissues, splenectomy, duodenotomy, ligation of bile duct, ligation of mesenteric vessels, and Y-graft arterial anastomoses from iliac artery to superior mesenteric artery and to splenic artery
48552	C	Backbench reconstruction of cadaver donor pancreas allograft prior to transplantation, venous anastomosis, each
48554	C	Transplantation of pancreatic allograft
48556	C	Removal of transplanted pancreatic allograft
49000	C	Exploratory laparotomy, exploratory celiotomy with or without biopsy(s) (separate procedure)
49002	C	Reopening of recent laparotomy
49010	C	Exploration, retroperitoneal area with or without biopsy(s) (separate procedure)
49020	C	Drainage of peritoneal abscess or localized peritonitis, exclusive of appendiceal abscess; open
49040	C	Drainage of subdiaphragmatic or subphrenic abscess; open
49060	C	Drainage of retroperitoneal abscess; open
49062	C	Drainage of extraperitoneal lymphocele to peritoneal cavity, open
49203	C	EXCISION OR DESTRUCTION, OPEN, INTRA-ABDOMINAL TUMORS, CYSTS OR ENDOMETRIOMAS, 1 OR MORE PERITONEAL, MESENTERIC, OR RETROPERITONEAL PRIMARY OR SECONDARY TUMORS; LARGEST TUMOR 5 CM DIAMETER OR LESS

49204	C	EXCISION OR DESTRUCTION, OPEN, INTRA-ABDOMINAL TUMORS, CYSTS OR ENDOMETRIOMAS, 1 OR MORE PERITONEAL, MESENTERIC, OR RETROPERITONEAL PRIMARY OR SECONDARY TUMORS; LARGEST TUMOR 5.1-10.0 CM DIAMETER
49205	C	EXCISION OR DESTRUCTION, OPEN, INTRA-ABDOMINAL TUMORS, CYSTS OR ENDOMETRIOMAS, 1 OR MORE PERITONEAL, MESENTERIC, OR RETROPERITONEAL PRIMARY OR SECONDARY TUMORS; LARGEST TUMOR GREATER THAN 10.0 CM DIAMETER
49215	C	Excision of presacral or sacrococcygeal tumor
49220	C	Staging laparotomy for Hodgkins disease or lymphoma (includes splenectomy, needle or open biopsies of both liver lobes, possibly also removal of abdominal nodes, abdominal node and/or bone marrow biopsies, ovarian repositioning)
49255	C	Omentectomy, epiploectomy, resection of omentum (separate procedure)
49425	C	Insertion of peritoneal-venous shunt
49428	C	Ligation of peritoneal-venous shunt
49605	C	Repair of large omphalocele or gastroschisis; with or without prosthesis
49606	C	Repair of large omphalocele or gastroschisis; with removal of prosthesis, final reduction and closure, in operating room
49610	C	Repair of omphalocele (Gross type operation); first stage
49611	C	Repair of omphalocele (Gross type operation); second stage
49900	C	Suture, secondary, of abdominal wall for evisceration or dehiscence
49904	C	Omental flap, extra-abdominal (eg, for reconstruction of sternal and chest wall defects)
49905	C	Omental flap, intra-abdominal (List separately in addition to code for primary procedure)
49906	C	Free omental flap with microvascular anastomosis
		<b>Urinary System Chapter</b>
50010	C	Renal exploration, not necessitating other specific procedures
50040	C	Nephrostomy, nephrotomy with drainage
50045	C	Nephrotomy, with exploration
50060	C	Nephrolithotomy; removal of calculus
50065	C	Nephrolithotomy; secondary surgical operation for calculus
50070	C	Nephrolithotomy; complicated by congenital kidney abnormality
50075	C	Nephrolithotomy; removal of large staghorn calculus filling renal pelvis and calyces (including anatrohic pyelolithotomy)
50100	C	Transection or repositioning of aberrant renal vessels (separate procedure)
50120	C	Pyelotomy; with exploration
50125	C	Pyelotomy; with drainage, pyelostomy
50130	C	Pyelotomy; with removal of calculus (pyelolithotomy, pelviolithotomy, including coagulum pyelolithotomy)
50135	C	Pyelotomy; complicated (eg, secondary operation, congenital kidney abnormality)
50205	C	Renal biopsy; by surgical exposure of kidney
50220	C	Nephrectomy, including partial ureterectomy, any open approach including rib resection;
50225	C	Nephrectomy, including partial ureterectomy, any open approach including rib resection; complicated because of previous surgery on same kidney
50230	C	Nephrectomy, including partial ureterectomy, any open approach including rib resection; radical, with regional lymphadenectomy and/or vena caval thrombectomy
50234	C	Nephrectomy with total ureterectomy and bladder cuff; through same incision
50236	C	Nephrectomy with total ureterectomy and bladder cuff; through separate incision
50240	C	Nephrectomy, partial
50250	C	Ablation, open, one or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound, if performed
50280	C	Excision or unroofing of cyst(s) of kidney
50290	C	Excision of perinephric cyst
50300	C	Donor nephrectomy (including cold preservation); from cadaver donor, unilateral or bilateral
50320	C	Donor nephrectomy (including cold preservation); open, from living donor
50323	C	Backbench standard preparation of cadaver donor renal allograft prior to transplantation, including dissection and removal of perinephric fat, diaphragmatic and retroperitoneal attachments, excision of adrenal gland, and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary
50325	C	Backbench standard preparation of living donor renal allograft (open or laparoscopic) prior to transplantation, including dissection and removal of perinephric fat and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary
50327	C	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; venous anastomosis, each
50328	C	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; arterial anastomosis, each
50329	C	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; ureteral anastomosis, each
50340	C	Recipient nephrectomy (separate procedure)
50360	C	Renal allotransplantation, implantation of graft; without recipient nephrectomy
50365	C	Renal allotransplantation, implantation of graft; with recipient nephrectomy
50370	C	Removal of transplanted renal allograft
50380	C	Renal autotransplantation, reimplantation of kidney
50400	C	Pyeloplasty (Foley Y-pyeloplasty), plastic operation on renal pelvis, with or without plastic operation on ureter, nephropexy, nephrostomy, pyelostomy, or ureteral splinting; simple
50405	C	Pyeloplasty (Foley Y-pyeloplasty), plastic operation on renal pelvis, with or without plastic operation on ureter, nephropexy, nephrostomy, pyelostomy, or ureteral splinting; complicated (congenital kidney abnormality, secondary pyeloplasty, solitary kidney, calycolplasty)
50500	C	Nephrorrhaphy, suture of kidney wound or injury

50520	C	Closure of nephrocutaneous or pyelocutaneous fistula
50525	C	Closure of nephrovisceral fistula (eg, renocolic), including visceral repair; abdominal approach
50526	C	Closure of nephrovisceral fistula (eg, renocolic), including visceral repair; thoracic approach
50540	C	Symphysiotomy for horseshoe kidney with or without pyeloplasty and/or other plastic procedure, unilateral or bilateral (one operation)
50545	C	Laparoscopy, surgical; radical nephrectomy (includes removal of Gerota's fascia and surrounding fatty tissue, removal of regional lymph nodes, and adrenalectomy)
50546	C	Laparoscopy, surgical; nephrectomy, including partial ureterectomy
50547	C	Laparoscopy, surgical; donor nephrectomy (including cold preservation), from living donor
50548	C	Laparoscopy, surgical; nephrectomy with total ureterectomy
50600	C	Ureterotomy with exploration or drainage (separate procedure)
50605	C	Ureterotomy for insertion of indwelling stent, all types
50610	C	Ureterolithotomy; upper one-third of ureter
50620	C	Ureterolithotomy; middle one-third of ureter
50630	C	Ureterolithotomy; lower one-third of ureter
50650	C	Ureterectomy, with bladder cuff (separate procedure)
50660	C	Ureterectomy, total, ectopic ureter, combination abdominal, vaginal and/or perineal approach
50700	C	Ureteroplasty, plastic operation on ureter (eg, stricture)
50715	C	Ureterolysis, with or without repositioning of ureter for retroperitoneal fibrosis
50722	C	Ureterolysis for ovarian vein syndrome
50725	C	Ureterolysis for retrocaval ureter, with reanastomosis of upper urinary tract or vena cava
50728	C	Revision of urinary-cutaneous anastomosis (any type urostomy); with repair of fascial defect and hernia
50740	C	Ureteropyelostomy, anastomosis of ureter and renal pelvis
50750	C	Ureterocalycostomy, anastomosis of ureter to renal calyx
50760	C	Ureteroureterostomy
50770	C	Transureteroureterostomy, anastomosis of ureter to contralateral ureter
50780	C	Ureteroneocystostomy; anastomosis of single ureter to bladder
50782	C	Ureteroneocystostomy; anastomosis of duplicated ureter to bladder
50783	C	Ureteroneocystostomy; with extensive ureteral tailoring
50785	C	Ureteroneocystostomy; with vesico-psoas hitch or bladder flap
50800	C	Ureteroenterostomy, direct anastomosis of ureter to intestine
50810	C	Ureterosigmoidostomy, with creation of sigmoid bladder and establishment of abdominal or perineal colostomy, including intestine anastomosis
50815	C	Ureterocolon conduit, including intestine anastomosis
50820	C	Ureteroileal conduit (ileal bladder), including intestine anastomosis (Bricker operation)
50825	C	Continent diversion, including intestine anastomosis using any segment of small and/or large intestine (Kock pouch or Camey enterocystoplasty)
50830	C	Urinary undiversion (eg, taking down of ureteroileal conduit, ureterosigmoidostomy or ureteroenterostomy with ureteroureterostomy or ureteroneocystostomy)
50840	C	Replacement of all or part of ureter by intestine segment, including intestine anastomosis
50845	C	Cutaneous appendico-vesicostomy
50860	C	Ureterostomy, transplantation of ureter to skin
50900	C	Ureterorrhaphy, suture of ureter (separate procedure)
50920	C	Closure of ureterocutaneous fistula
50930	C	Closure of ureterovisceral fistula (including visceral repair)
50940	C	Deligation of ureter
51060	C	Transvesical ureterolithotomy
51525	C	Cystotomy; for excision of bladder diverticulum, single or multiple (separate procedure)
51530	C	Cystotomy; for excision of bladder tumor
51550	C	Cystectomy, partial; simple
51555	C	Cystectomy, partial; complicated (eg, postradiation, previous surgery, difficult location)
51565	C	Cystectomy, partial, with reimplantation of ureter(s) into bladder (ureteroneocystostomy)
51570	C	Cystectomy, complete; (separate procedure)
51575	C	Cystectomy, complete; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes
51580	C	Cystectomy, complete, with ureterosigmoidostomy or ureterocutaneous transplantations;
51585	C	Cystectomy, complete, with ureterosigmoidostomy or ureterocutaneous transplantations; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes
51590	C	Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including intestine anastomosis;
51595	C	Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including intestine anastomosis; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes
51596	C	Cystectomy, complete, with continent diversion, any open technique, using any segment of small and/or large intestine to construct neobladder
51597	C	Pelvic exenteration, complete, for vesical, prostatic or urethral malignancy, with removal of bladder and ureteral transplantations, with or without hysterectomy and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof
51800	C	Cystoplasty or cystourethroplasty, plastic operation on bladder and/or vesical neck (anterior Y-plasty, vesical fundus resection), any procedure, with or without wedge resection of posterior vesical neck
51820	C	Cystourethroplasty with unilateral or bilateral ureteroneocystostomy
51840	C	Anterior vesicourethropexy, or urethropexy (eg, Marshall-Marchetti-Krantz, Burch); simple

51841	C	Anterior vesicourethropepy, or urethropepy (eg, Marshall-Marchetti-Krantz, Burch); complicated (eg, secondary repair)
51865	C	Cystorrhaphy, suture of bladder wound, injury or rupture; complicated
51900	C	Closure of vesicovaginal fistula, abdominal approach
51920	C	Closure of vesicouterine fistula;
51925	C	Closure of vesicouterine fistula; with hysterectomy
51940	C	Closure, exstrophy of bladder
51960	C	Enterocystoplasty, including intestinal anastomosis
51980	C	Cutaneous vesicostomy
53415	C	Urethroplasty, transpubic or perineal, one stage, for reconstruction or repair of prostatic or membranous urethra
53448	C	Removal and replacement of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff through an infected field at the same operative session including irrigation and debridement of infected tissue
		<b>Male Genital System</b>
54125	C	Amputation of penis; complete
54130	C	Amputation of penis, radical; with bilateral inguofemoral lymphadenectomy
54135	C	Amputation of penis, radical; in continuity with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes
54390	C	Plastic operation on penis for epispadias distal to external sphincter; with exstrophy of bladder
54411	C	Removal and replacement of all components of a multi-component inflatable penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue
54417	C	Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue
54430	C	Corpora cavernosa-corpora spongiosum shunt (priapism operation), unilateral or bilateral
54650	C	Orchiopexy, abdominal approach, for intra-abdominal testis (eg, Fowler-Stephens)
55605	C	Vesiculotomy; complicated
55650	C	Vesiculectomy, any approach
55801	C	Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy)
55810	C	Prostatectomy, perineal radical;
55812	C	Prostatectomy, perineal radical; with lymph node biopsy(s) (limited pelvic lymphadenectomy)
55815	C	Prostatectomy, perineal radical; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes
55821	C	Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); suprapubic, subtotal, one or two stages
55831	C	Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); retropubic, subtotal
55840	C	Prostatectomy, retropubic radical, with or without nerve sparing;
55842	C	Prostatectomy, retropubic radical, with or without nerve sparing; with lymph node biopsy(s) (limited pelvic lymphadenectomy)
55845	C	Prostatectomy, retropubic radical, with or without nerve sparing; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes
55862	C	Exposure of prostate, any approach, for insertion of radioactive substance; with lymph node biopsy(s) (limited pelvic lymphadenectomy)
55865	C	Exposure of prostate, any approach, for insertion of radioactive substance; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes
55866	C	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing
		<b>Female Genital System Chapter</b>
56630	C	Vulvectomy, radical, partial;
56631	C	Vulvectomy, radical, partial; with unilateral inguofemoral lymphadenectomy
56632	C	Vulvectomy, radical, partial; with bilateral inguofemoral lymphadenectomy
56633	C	Vulvectomy, radical, complete;
56634	C	Vulvectomy, radical, complete; with unilateral inguofemoral lymphadenectomy
56637	C	Vulvectomy, radical, complete; with bilateral inguofemoral lymphadenectomy
56640	C	Vulvectomy, radical, complete, with inguofemoral, iliac, and pelvic lymphadenectomy
57110	C	Vaginectomy, complete removal of vaginal wall;
57111	C	Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy)
57112	C	Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy)
57270	C	Repair of enterocele, abdominal approach (separate procedure)
57280	C	Colpopexy, abdominal approach
57296	C	Revision (including removal) of prosthetic vaginal graft; open abdominal approach
57305	C	Closure of rectovaginal fistula; abdominal approach
57307	C	Closure of rectovaginal fistula; abdominal approach, with concomitant colostomy
57308	C	Closure of rectovaginal fistula; transperineal approach, with perineal body reconstruction, with or without levator plication
57311	C	Closure of urethrovaginal fistula; with bulboavernosus transplant
57531	C	Radical trachelectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling biopsy, with or without removal of tube(s), with or without removal of ovary(s)
57540	C	Excision of cervical stump, abdominal approach;
57545	C	Excision of cervical stump, abdominal approach; with pelvic floor repair

58140	C	Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; abdominal approach
58146	C	Myomectomy, excision of fibroid tumor(s) of uterus, 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g, abdominal approach
58150	C	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s);
58152	C	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocystopexy (eg, Marshall-Marchetti-Krantz, Burch)
58180	C	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)
58200	C	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s)
58210	C	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s)
58240	C	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof
58267	C	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control
58275	C	Vaginal hysterectomy, with total or partial vaginectomy;
58280	C	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele
58285	C	Vaginal hysterectomy, radical (Schauta type operation)
58293	C	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control
58400	C	Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; (separate procedure)
58410	C	Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; with presacral sympathectomy
58520	C	Hysterorrhaphy, repair of ruptured uterus (nonobstetrical)
58540	C	Hysteroplasty, repair of uterine anomaly (Strassman type)
58548	C	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed
58605	C	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure)
58611	C	Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure)
58700	C	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)
58720	C	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure)
58740	C	Lysis of adhesions (salpingolysis, ovariolysis)
58750	C	Tubotubal anastomosis
58752	C	Tubouterine implantation
58760	C	Fimbrioplasty
58822	C	Drainage of ovarian abscess; abdominal approach
58825	C	Transposition, ovary(s)
58940	C	Oophorectomy, partial or total, unilateral or bilateral;
58943	C	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy
58950	C	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy;
58951	C	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy
58952	C	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors)
58953	C	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking;
58954	C	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy
58956	C	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy
58957	C	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed;
58958	C	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy
58960	C	Laparotomy, for staging or restaging of ovarian, tubal, or primary peritoneal malignancy (second look), with or without omentectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneum, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy
59120	C	Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach

59121	C	Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy
59130	C	Surgical treatment of ectopic pregnancy; abdominal pregnancy
59135	C	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy
59136	C	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus
59140	C	Surgical treatment of ectopic pregnancy; cervical, with evacuation
59325	C	Cerclage of cervix, during pregnancy; abdominal
59350	C	Hysterorrhaphy of ruptured uterus
59514	C	Cesarean delivery only;
59525	C	Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure)
59620	C	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery;
59830	C	Treatment of septic abortion, completed surgically
59850	C	Induced abortion, by one or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines;
59851	C	Induced abortion, by one or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation
59852	C	Induced abortion, by one or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed intra-amniotic injection)
59855	C	Induced abortion, by one or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines;
59856	C	Induced abortion, by one or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation
59857	C	Induced abortion, by one or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed medical evacuation)
<b>Endocrine System Chapter</b>		
60254	C	Thyroidectomy, total or subtotal for malignancy; with radical neck dissection
60270	C	Thyroidectomy, including substernal thyroid; sternal split or transthoracic approach
60505	C	Parathyroidectomy or exploration of parathyroid(s); with mediastinal exploration, sternal split or transthoracic approach
60521	C	Thymectomy, partial or total; sternal split or transthoracic approach, without radical mediastinal dissection (separate procedure)
60522	C	Thymectomy, partial or total; sternal split or transthoracic approach, with radical mediastinal dissection (separate procedure)
60540	C	Adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal (separate procedure);
60545	C	Adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal (separate procedure); with excision of adjacent retroperitoneal tumor
60600	C	Excision of carotid body tumor; without excision of carotid artery
60605	C	Excision of carotid body tumor; with excision of carotid artery
60650	C	Laparoscopy, surgical, with adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal
<b>Nervous System Chapter</b>		
61105	C	Twist drill hole for subdural or ventricular puncture
61107	C	Twist drill hole(s) for subdural, intracerebral, or ventricular puncture; for implanting ventricular catheter, pressure recording device, or other intracerebral monitoring device
61108	C	Twist drill hole(s) for subdural, intracerebral, or ventricular puncture; for evacuation and/or drainage of subdural hematoma
61120	C	Burr hole(s) for ventricular puncture (including injection of gas, contrast media, dye, or radioactive material)
61140	C	Burr hole(s) or trephine; with biopsy of brain or intracranial lesion
61150	C	Burr hole(s) or trephine; with drainage of brain abscess or cyst
61151	C	Burr hole(s) or trephine; with subsequent tapping (aspiration) of intracranial abscess or cyst
61154	C	Burr hole(s) with evacuation and/or drainage of hematoma, extradural or subdural
61156	C	Burr hole(s); with aspiration of hematoma or cyst, intracerebral
61210	C	Burr hole(s); for implanting ventricular catheter, reservoir, EEG electrode(s), pressure recording device, or other cerebral monitoring device (separate procedure)
61250	C	Burr hole(s) or trephine, supratentorial, exploratory, not followed by other surgery
61253	C	Burr hole(s) or trephine, infratentorial, unilateral or bilateral
61304	C	Craniectomy or craniotomy, exploratory; supratentorial
61305	C	Craniectomy or craniotomy, exploratory; infratentorial (posterior fossa)
61312	C	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; extradural or subdural
61313	C	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; intracerebral
61314	C	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; extradural or subdural
61315	C	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; intracerebellar
61316	C	Incision and subcutaneous placement of cranial bone graft (List separately in addition to code for primary procedure)
61320	C	Craniectomy or craniotomy, drainage of intracranial abscess; supratentorial
61321	C	Craniectomy or craniotomy, drainage of intracranial abscess; infratentorial
61322	C	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; without lobectomy

61323	C	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; with lobectomy
61332	C	Exploration of orbit (transcranial approach); with biopsy
61333	C	Exploration of orbit (transcranial approach); with removal of lesion
61340	C	Subtemporal cranial decompression (pseudotumor cerebri, slit ventricle syndrome)
61343	C	Craniectomy, suboccipital with cervical laminectomy for decompression of medulla and spinal cord, with or without dural graft (eg, Arnold-Chiari malformation)
61345	C	Other cranial decompression, posterior fossa
61440	C	Craniotomy for section of tentorium cerebelli (separate procedure)
61450	C	Craniectomy, subtemporal, for section, compression, or decompression of sensory root of gasserian ganglion
61458	C	Craniectomy, suboccipital; for exploration or decompression of cranial nerves
61460	C	Craniectomy, suboccipital; for section of one or more cranial nerves
61470	C	Craniectomy, suboccipital; for medullary tractotomy
61480	C	Craniectomy, suboccipital; for mesencephalic tractotomy or pedunculotomy
61490	C	Craniotomy for lobotomy, including cingulotomy
61500	C	Craniectomy; with excision of tumor or other bone lesion of skull
61501	C	Craniectomy; for osteomyelitis
61510	C	Craniectomy, trephination, bone flap craniotomy; for excision of brain tumor, supratentorial, except meningioma
61512	C	Craniectomy, trephination, bone flap craniotomy; for excision of meningioma, supratentorial
61514	C	Craniectomy, trephination, bone flap craniotomy; for excision of brain abscess, supratentorial
61516	C	Craniectomy, trephination, bone flap craniotomy; for excision or fenestration of cyst, supratentorial
61517	C	Implantation of brain intracavitary chemotherapy agent (List separately in addition to code for primary procedure)
61518	C	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; except meningioma, cerebellopontine angle tumor, or midline tumor at base of skull
61519	C	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; meningioma
61520	C	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; cerebellopontine angle tumor
61521	C	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; midline tumor at base of skull
61522	C	Craniectomy, infratentorial or posterior fossa; for excision of brain abscess
61524	C	Craniectomy, infratentorial or posterior fossa; for excision or fenestration of cyst
61526	C	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor;
61530	C	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor; combined with middle/posterior fossa craniotomy/craniectomy
61531	C	SUBDURAL IMPLANTATION OF STRIP ELECTRODES THROUGH ONE OR MORE BURR OR TREPHINE HOLE(S) FOR LONG-TERM SEIZURE MONITORING
61533	C	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR SUBDURAL IMPLANTATION OF AN ELECTRODE ARRAY, FOR LONG-TERM SEIZURE MONITORING
61534	C	Craniotomy with elevation of bone flap; for excision of epileptogenic focus without electrocorticography during surgery
61535	C	Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)
61536	C	Craniotomy with elevation of bone flap; for excision of cerebral epileptogenic focus, with electrocorticography during surgery (includes removal of electrode array)
61537	C	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, without electrocorticography during surgery
61538	C	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, with electrocorticography during surgery
61539	C	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, with electrocorticography during surgery
61540	C	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, without electrocorticography during surgery
61541	C	Craniotomy with elevation of bone flap; for transection of corpus callosum
61542	C	Craniotomy with elevation of bone flap; for total hemispherectomy
61543	C	Craniotomy with elevation of bone flap; for partial or subtotal (functional) hemispherectomy
61544	C	Craniotomy with elevation of bone flap; for excision or coagulation of choroid plexus
61545	C	Craniotomy with elevation of bone flap; for excision of craniopharyngioma
61546	C	Craniotomy for hypophysectomy or excision of pituitary tumor, intracranial approach
61548	C	Hypophysectomy or excision of pituitary tumor, transnasal or transseptal approach, nonstereotactic
61550	C	Craniectomy for craniosynostosis; single cranial suture
61552	C	Craniectomy for craniosynostosis; multiple cranial sutures
61556	C	Craniotomy for craniosynostosis; frontal or parietal bone flap
61557	C	Craniotomy for craniosynostosis; bifrontal bone flap
61558	C	Extensive craniectomy for multiple cranial suture craniosynostosis (eg, cloverleaf skull); not requiring bone grafts
61559	C	Extensive craniectomy for multiple cranial suture craniosynostosis (eg, cloverleaf skull); recontouring with multiple osteotomies and bone autografts (eg, barrel-stave procedure) (includes obtaining grafts)
61563	C	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); without optic nerve decompression
61564	C	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); with optic nerve decompression
61566	C	Craniotomy with elevation of bone flap; for selective amygdalohippocampectomy
61567	C	Craniotomy with elevation of bone flap; for multiple subpial transections, with electrocorticography during surgery
61570	C	Craniectomy or craniotomy; with excision of foreign body from brain
61571	C	Craniectomy or craniotomy; with treatment of penetrating wound of brain
61575	C	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion;

61576	C	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion; requiring splitting of tongue and/or mandible (including tracheostomy)
61580	C	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, ethmoidectomy, sphenoidectomy, without maxillectomy or orbital exenteration
61581	C	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, orbital exenteration, ethmoidectomy, sphenoidectomy and/or maxillectomy
61582	C	Craniofacial approach to anterior cranial fossa; extradural, including unilateral or bifrontal craniotomy, elevation of frontal lobe(s), osteotomy of base of anterior cranial fossa
61583	C	Craniofacial approach to anterior cranial fossa; intradural, including unilateral or bifrontal craniotomy, elevation or resection of frontal lobe, osteotomy of base of anterior cranial fossa
61584	C	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); without orbital exenteration
61585	C	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); with orbital exenteration
61586	C	Bicoronal, transzygomatic and/or LeFort I osteotomy approach to anterior cranial fossa with or without internal fixation, without bone graft
61590	C	Infratemporal pre-auricular approach to middle cranial fossa (parapharyngeal space, infratemporal and midline skull base, nasopharynx), with or without disarticulation of the mandible, including parotidectomy, craniotomy, decompression and/or mobilization of the facial nerve and/or petrous carotid artery
61591	C	Infratemporal post-auricular approach to middle cranial fossa (internal auditory meatus, petrous apex, tentorium, cavernous sinus, parasellar area, infratemporal fossa) including mastoidectomy, resection of sigmoid sinus, with or without decompression and/or mobilization of contents of auditory canal or petrous carotid artery
61592	C	Orbitocranial zygomatic approach to middle cranial fossa (cavernous sinus and carotid artery, clivus, basilar artery or petrous apex) including osteotomy of zygoma, craniotomy, extra- or intradural elevation of temporal lobe
61595	C	Transtemporal approach to posterior cranial fossa, jugular foramen or midline skull base, including mastoidectomy, decompression of sigmoid sinus and/or facial nerve, with or without mobilization
61596	C	Transcochlear approach to posterior cranial fossa, jugular foramen or midline skull base, including labyrinthectomy, decompression, with or without mobilization of facial nerve and/or petrous carotid artery
61597	C	Transcondylar (far lateral) approach to posterior cranial fossa, jugular foramen or midline skull base, including occipital condylectomy, mastoidectomy, resection of C1-C3 vertebral body(s), decompression of vertebral artery, with or without mobilization
61598	C	Transpetrosal approach to posterior cranial fossa, clivus or foramen magnum, including ligation of superior petrosal sinus and/or sigmoid sinus
61600	C	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; extradural
61601	C	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; intradural, including dural repair, with or without graft
61605	C	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; extradural
61606	C	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; intradural, including dural repair, with or without graft
61607	C	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; extradural
61608	C	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; intradural, including dural repair, with or without graft
61609	C	Transection or ligation, carotid artery in cavernous sinus; without repair (List separately in addition to code for primary procedure)
61610	C	Transection or ligation, carotid artery in cavernous sinus; with repair by anastomosis or graft (List separately in addition to code for primary procedure)
61611	C	Transection or ligation, carotid artery in petrous canal; without repair (List separately in addition to code for primary procedure)
61612	C	Transection or ligation, carotid artery in petrous canal; with repair by anastomosis or graft (List separately in addition to code for primary procedure)
61613	C	Obliteration of carotid aneurysm, arteriovenous malformation, or carotid-cavernous fistula by dissection within cavernous sinus
61615	C	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; extradural
61616	C	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; intradural, including dural repair, with or without graft
61618	C	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by free tissue graft (eg, pericranium, fascia, tensor fascia lata, adipose tissue, homologous or synthetic grafts)
61619	C	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by local or regionalized vascularized pedicle flap or myocutaneous flap (including galea, temporalis, frontalis or occipitalis muscle)
61624	C	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; central nervous system (intracranial, spinal cord)
61630	C	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous
61635	C	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed
61680	C	Surgery of intracranial arteriovenous malformation; supratentorial, simple

61682	C	Surgery of intracranial arteriovenous malformation; supratentorial, complex
61684	C	Surgery of intracranial arteriovenous malformation; infratentorial, simple
61686	C	Surgery of intracranial arteriovenous malformation; infratentorial, complex
61690	C	Surgery of intracranial arteriovenous malformation; dural, simple
61692	C	Surgery of intracranial arteriovenous malformation; dural, complex
61697	C	Surgery of complex intracranial aneurysm, intracranial approach; carotid circulation
61698	C	Surgery of complex intracranial aneurysm, intracranial approach; vertebrobasilar circulation
61700	C	Surgery of simple intracranial aneurysm, intracranial approach; carotid circulation
61702	C	Surgery of simple intracranial aneurysm, intracranial approach; vertebrobasilar circulation
61703	C	Surgery of intracranial aneurysm, cervical approach by application of occluding clamp to cervical carotid artery (Selverstone-Crutchfield type)
61705	C	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial and cervical occlusion of carotid artery
61708	C	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial electrothrombosis
61710	C	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intra-arterial embolization, injection procedure, or balloon catheter
61711	C	Anastomosis, arterial, extracranial-intracranial (eg, middle cerebral/cortical) arteries
61735	C	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; subcortical structure(s) other than globus pallidus or thalamus
61750	C	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion;
61751	C	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion; with computed tomography and/or magnetic resonance guidance
61760	C	STEREOTACTIC IMPLANTATION OF DEPTH ELECTRODES INTO THE CEREBRUM FOR LONG-TERM SEIZURE MONITORING
61850	C	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical
61860	C	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical
61863	C	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array
61864	C	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)
61867	C	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array
61868	C	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)
61870	C	Craniectomy for implantation of neurostimulator electrodes, cerebellar; cortical
61875	C	Craniectomy for implantation of neurostimulator electrodes, cerebellar; subcortical
62005	C	Elevation of depressed skull fracture; compound or comminuted, extradural
62010	C	Elevation of depressed skull fracture; with repair of dura and/or debridement of brain
62100	C	Craniotomy for repair of dural/cerebrospinal fluid leak, including surgery for rhinorrhea/otorrhea
62115	C	Reduction of craniomegalic skull (eg, treated hydrocephalus); not requiring bone grafts or cranioplasty
62116	C	Reduction of craniomegalic skull (eg, treated hydrocephalus); with simple cranioplasty
62117	C	Reduction of craniomegalic skull (eg, treated hydrocephalus); requiring craniotomy and reconstruction with or without bone graft (includes obtaining grafts)
62120	C	Repair of encephalocele, skull vault, including cranioplasty
62121	C	Craniotomy for repair of encephalocele, skull base
62140	C	Cranioplasty for skull defect; up to 5 cm diameter
62141	C	Cranioplasty for skull defect; larger than 5 cm diameter
62142	C	Removal of bone flap or prosthetic plate of skull
62143	C	Replacement of bone flap or prosthetic plate of skull
62145	C	Cranioplasty for skull defect with reparative brain surgery
62146	C	Cranioplasty with autograft (includes obtaining bone grafts); up to 5 cm diameter
62147	C	Cranioplasty with autograft (includes obtaining bone grafts); larger than 5 cm diameter
62148	C	Incision and retrieval of subcutaneous cranial bone graft for cranioplasty (List separately in addition to code for primary procedure)
62161	C	Neuroendoscopy, intracranial; with dissection of adhesions, fenestration of septum pellucidum or intraventricular cysts (including placement, replacement, or removal of ventricular catheter)
62162	C	Neuroendoscopy, intracranial; with fenestration or excision of colloid cyst, including placement of external ventricular catheter for drainage
62163	C	Neuroendoscopy, intracranial; with retrieval of foreign body
62164	C	Neuroendoscopy, intracranial; with excision of brain tumor, including placement of external ventricular catheter for drainage
62165	C	Neuroendoscopy, intracranial; with excision of pituitary tumor, transnasal or trans-sphenoidal approach
62180	C	Ventriculocisternostomy (Torkildsen type operation)
62190	C	Creation of shunt; subarachnoid/subdural-atrial, -jugular, -auricular
62192	C	Creation of shunt; subarachnoid/subdural-peritoneal, -pleural, other terminus
62200	C	Ventriculocisternostomy, third ventricle;

62201	C	Ventriculocisternostomy, third ventricle; stereotactic, neuroendoscopic method
62220	C	Creation of shunt; ventriculo-atrial, -jugular, -auricular
62223	C	Creation of shunt; ventriculo-peritoneal, -pleural, other terminus
62256	C	Removal of complete cerebrospinal fluid shunt system; without replacement
62258	C	Removal of complete cerebrospinal fluid shunt system; with replacement by similar or other shunt at same operation
63043	C	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional cervical interspace (List separately in addition to code for primary procedure)
63044	C	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional lumbar interspace (List separately in addition to code for primary procedure)
63050	C	Laminoplasty, cervical, with decompression of the spinal cord, two or more vertebral segments;
63051	C	Laminoplasty, cervical, with decompression of the spinal cord, two or more vertebral segments; with reconstruction of the posterior bony elements (including the application of bridging bone graft and non-segmental fixation devices (eg, wire, suture, mini-plates), when performed)
63076	C	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; cervical, each additional interspace (List separately in addition to code for primary procedure)
63077	C	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; thoracic, single interspace
63078	C	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; thoracic, each additional interspace (List separately in addition to code for primary procedure)
63081	C	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, single segment
63082	C	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)
63085	C	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, single segment
63086	C	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, each additional segment (List separately in addition to code for primary procedure)
63087	C	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment
63088	C	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code for primary procedure)
63090	C	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment
63091	C	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately in addition to code for primary procedure)
63101	C	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic, single segment
63102	C	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); lumbar, single segment
63103	C	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic or lumbar, each additional segment (List separately in addition to code for primary procedure)
63170	C	Laminectomy with myelotomy (eg, Bischof or DREZ type), cervical, thoracic, or thoracolumbar
63172	C	Laminectomy with drainage of intramedullary cyst/syrinx; to subarachnoid space
63173	C	Laminectomy with drainage of intramedullary cyst/syrinx; to peritoneal or pleural space
63180	C	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; one or two segments
63182	C	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; more than two segments
63185	C	Laminectomy with rhizotomy; one or two segments
63190	C	Laminectomy with rhizotomy; more than two segments
63191	C	Laminectomy with section of spinal accessory nerve
63194	C	Laminectomy with cordotomy, with section of one spinothalamic tract, one stage; cervical
63195	C	Laminectomy with cordotomy, with section of one spinothalamic tract, one stage; thoracic
63196	C	Laminectomy with cordotomy, with section of both spinothalamic tracts, one stage; cervical
63197	C	Laminectomy with cordotomy, with section of both spinothalamic tracts, one stage; thoracic
63198	C	Laminectomy with cordotomy with section of both spinothalamic tracts, two stages within 14 days; cervical
63199	C	Laminectomy with cordotomy with section of both spinothalamic tracts, two stages within 14 days; thoracic
63200	C	Laminectomy, with release of tethered spinal cord, lumbar
63250	C	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; cervical
63251	C	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; thoracic
63252	C	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; thoracolumbar
63265	C	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; cervical
63266	C	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; thoracic
63267	C	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar

63268	C	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; sacral
63270	C	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; cervical
63271	C	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; thoracic
63272	C	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; lumbar
63273	C	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; sacral
63275	C	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, cervical
63276	C	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, thoracic
63277	C	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, lumbar
63278	C	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, sacral
63280	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, cervical
63281	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, thoracic
63282	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, lumbar
63283	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, sacral
63285	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, cervical
63286	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracic
63287	C	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracolumbar
63290	C	Laminectomy for biopsy/excision of intraspinal neoplasm; combined extradural-intradural lesion, any level
63295	C	Osteoplastic reconstruction of dorsal spinal elements, following primary intraspinal procedure (List separately in addition to code for primary procedure)
63300	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, cervical
63301	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by transthoracic approach
63302	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by thoracolumbar approach
63303	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, lumbar or sacral by transperitoneal or retroperitoneal approach
63304	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, cervical
63305	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by transthoracic approach
63306	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by thoracolumbar approach
63307	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, lumbar or sacral by transperitoneal or retroperitoneal approach
63308	C	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; each additional segment (List separately in addition to codes for single segment)
63700	C	Repair of meningocele; less than 5 cm diameter
63702	C	Repair of meningocele; larger than 5 cm diameter
63704	C	Repair of myelomeningocele; less than 5 cm diameter
63706	C	Repair of myelomeningocele; larger than 5 cm diameter
63707	C	Repair of dural/cerebrospinal fluid leak, not requiring laminectomy
63709	C	Repair of dural/cerebrospinal fluid leak or pseudomeningocele, with laminectomy
63710	C	Dural graft, spinal
63740	C	Creation of shunt, lumbar, subarachnoid-peritoneal, -pleural, or other; including laminectomy
64752	C	Transection or avulsion of; vagus nerve (vagotomy), transthoracic
64755	C	Transection or avulsion of; vagus nerves limited to proximal stomach (selective proximal vagotomy, proximal gastric vagotomy, parietal cell vagotomy, supra- or highly selective vagotomy)
64760	C	Transection or avulsion of; vagus nerve (vagotomy), abdominal
64809	C	Sympathectomy, thoracolumbar
64818	C	Sympathectomy, lumbar
64866	C	Anastomosis; facial-spinal accessory
64868	C	Anastomosis; facial-hypoglossal
		<b>Eye and Ocular Adnexa Chapter</b>
65273	C	Repair of laceration; conjunctiva, by mobilization and rearrangement, with hospitalization
		<b>Auditory System Chapter</b>
69155	C	Radical excision external auditory canal lesion; with neck dissection
69535	C	Resection temporal bone, external approach
69554	C	Excision aural glomus tumor; extended (extratemporal)
69950	C	Vestibular nerve section, transcranial approach
		<b>Radiology Chapter</b>
75900	C	Exchange of a previously placed intravascular catheter during thrombolytic therapy with contrast monitoring, radiological supervision and interpretation
75952	C	Endovascular repair of infrarenal abdominal aortic aneurysm or dissection, radiological supervision and interpretation
75953	C	Placement of proximal or distal extension prosthesis for endovascular repair of infrarenal aortic or iliac artery aneurysm, pseudoaneurysm, or dissection, radiological supervision and interpretation
75954	C	Endovascular repair of iliac artery aneurysm, pseudoaneurysm, arteriovenous malformation, or trauma, radiological supervision and interpretation

75956	C	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation
75957	C	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation
75958	C	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption), radiological supervision and interpretation
75959	C	Placement of distal extension prosthesis(s) (delayed) after endovascular repair of descending thoracic aorta, as needed, to level of celiac origin, radiological supervision and interpretation
<b>Medicine Chapter--Cardiovascular Section</b>		
92970	C	Cardioassist-method of circulatory assist; internal
92971	C	Cardioassist-method of circulatory assist; external
92975	C	Thrombolysis, coronary; by intracoronary infusion, including selective coronary angiography
92992	C	Atrial septectomy or septostomy; transvenous method, balloon (eg, Rashkind type) (includes cardiac catheterization)
92993	C	Atrial septectomy or septostomy; blade method (Park septostomy) (includes cardiac catheterization)
99190	C	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); each hour
99191	C	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); 45 minutes
99192	C	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); 30 minutes
0048T	C	Implantation of a ventricular assist device, extracorporeal, percutaneous transseptal access, single or dual cannulation
0050T	C	Prolonged extracorporeal percutaneous transseptal ventricular assist device, greater than 24 hours, each subsequent 24 hour period (List separately in addition to code for primary procedure)
0051T	C	Removal of a ventricular assist device, extracorporeal, percutaneous transseptal access, single or dual cannulation
0052T	C	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy
0053T	C	Replacement or repair of thoracic unit of a total replacement heart system (artificial heart)
0075T	C	Replacement or repair of implantable component or components of total replacement heart system (artificial heart), excluding thoracic unit
0076T	C	Transcatheter placement of extracranial vertebral or intrathoracic carotid artery stent(s), including radiologic supervision and interpretation, percutaneous; initial vessel
0077T	C	Transcatheter placement of extracranial vertebral or intrathoracic carotid artery stent(s), including radiologic supervision and interpretation, percutaneous; each additional vessel (List separately in addition to code for primary procedure)
0078T	C	Implanting and securing cerebral thermal perfusion probe, including twist drill or burr hole, to measure absolute cerebral tissue perfusion
0079T	C	Endovascular repair using prosthesis of abdominal aortic aneurysm, pseudoaneurysm or dissection, abdominal aorta involving visceral branches (superior mesenteric, celiac and/or renal artery(s))
0080T	C	Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch (List separately in addition to code for primary procedure)
0081T	C	Endovascular repair of abdominal aortic aneurysm, pseudoaneurysm or dissection, abdominal aorta involving visceral vessels (superior mesenteric, celiac or renal), using fenestrated modular bifurcated prosthesis (two docking limbs), radiological supervision and interpretation
0092T	C	Placement of visceral extension prosthesis for endovascular repair of abdominal aortic aneurysm involving visceral vessels, each visceral branch, radiological supervision and interpretation (List separately in addition to code for primary procedure)
0095T	C	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression) cervical; single interspace
0098T	C	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression) cervical; each additional interspace (List separately in addition to code for primary procedure)
0157T	C	Removal of total disc arthroplasty, anterior approach cervical; single interspace
0158T	C	Removal of total disc arthroplasty, anterior approach cervical; each additional interspace (List separately in addition to code for primary procedure)
0163T	C	Revision of total disc arthroplasty, anterior approach cervical; single interspace
0164T	C	Revision of total disc arthroplasty, anterior approach cervical; each additional interspace (List separately in addition to code for primary procedure)
0165T	C	Laparotomy, implantation or replacement of gastric stimulation electrodes, lesser curvature (ie, morbid obesity)
0166T	C	Laparotomy, revision or removal of gastric stimulation electrodes, lesser curvature (ie, morbid obesity)
0167T	C	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, each additional interspace
0169T	C	Removal of total disc arthroplasty, anterior approach, lumbar, each additional interspace
0184T	C	Revision of total disc arthroplasty, anterior approach, lumbar, each additional interspace
0195T	C	Transmyocardial transcatheter closure of ventricular septal defect, with implant; without cardiopulmonary bypass
0196T	C	Transmyocardial transcatheter closure of ventricular septal defect, with implant; with cardiopulmonary bypass

G0341	C	Stereotactic placement of infusion catheter(s) in the brain for delivery of therapeutic agent(s), including computerized stereotactic planning and burr hole(s)
G0342	C	EXCISION OF RECTAL TUMOR, TRANSANAL ENDOSCOPIC MICROSURGICAL APPROACH (IE, TEMS) (FOR NON-ENDOSCOPIC EXCISION OF RECTAL TUMOR, SEE 45160 OR 45170) (DO NOT REPORT 0184T IN CONJUNCTION WITH 45300-45327, 69990)
G0343	C	PERCUTANEOUS ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION
G0406	C	LAPAROSCOPY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION
G0407	C	LAPAROTOMY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION