



# Code Summary Report

OrthoCarolina Program - 2633626061

Resident: *Fellow 2*

Done between 8/1/2018 and 7/31/2019

## Area: HAND SURGERY Type: Amputation

Code	Code Count	Code Type	Description
26952	2	CPT	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with local advancement flaps (V-Y, hood)
26951	27	CPT	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with direct closure
26910	19	CPT	Amputation, metacarpal, with finger or thumb (ray amputation), single, with or without interosseous transfer
25905	1	CPT	Amputation, forearm, through radius and ulna; open, circular (guillotine)
25900	2	CPT	Amputation, forearm, through radius and ulna;
24900	2	CPT	Amputation, arm through humerus; with primary closure

## Area: HAND SURGERY Type: Congenital

Code	Code Count	Code Type	Description
26587	1	CPT	Reconstruction of polydactylous digit, soft tissue and bone
26561	1	CPT	Repair of syndactyly (web finger) each web space; with skin flaps and grafts
26550	2	CPT	Pollicization of a digit

## Area: HAND SURGERY Type: Decompression of tendon sheath/synovectomy/ganglions

Code	Code Count	Code Type	Description
26160	14	CPT	Excision of lesion of tendon sheath or joint capsule (eg, cyst, mucous cyst, or ganglion), hand or finger
26055	60	CPT	Tendon sheath incision (eg, for trigger finger)
25118	5	CPT	Synovectomy, extensor tendon sheath, wrist, single compartment;
25116	1	CPT	Radical excision of bursa, synovia of wrist, or forearm tendon sheaths (eg, tenosynovitis, fungus, Tbc, or other granulomas, rheumatoid arthritis); extensors, with or without transposition of dorsal retinaculum
25115	1	CPT	Radical excision of bursa, synovia of wrist, or forearm tendon sheaths (eg, tenosynovitis, fungus, Tbc, or other granulomas, rheumatoid arthritis); flexors
25112	5	CPT	Excision of ganglion, wrist (dorsal or volar); recurrent
25111	13	CPT	Excision of ganglion, wrist (dorsal or volar); primary
25000	10	CPT	Incision, extensor tendon sheath, wrist (eg, de Quervains disease)

**Area: HAND SURGERY Type: Dupuytren's**

Code	Code Count	Code Type	Description
26125	1	CPT	Fasciectomy, partial palmar with release of single digit including proximal interphalangeal joint, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft); each additional digit (List separately in addition to code for primary procedure)
26123	10	CPT	Fasciectomy, partial palmar with release of single digit including proximal interphalangeal joint, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft);
26121	6	CPT	Fasciectomy, palm only, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)
26045	2	CPT	Fasciotomy, palmar (eg, Dupuytren's contracture); open, partial
26040	1	CPT	Fasciotomy, palmar (eg, Dupuytren's contracture); percutaneous
20527	3	CPT	Injection, enzyme (eg, collagenase), palmar fascial cord (ie, Dupuytren's contracture)

**Area: HAND SURGERY Type: Forearm & proximal fracture/dislocation**

Code	Code Count	Code Type	Description
25575	3	CPT	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius AND ulna
25574	1	CPT	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius OR ulna
25545	1	CPT	Open treatment of ulnar shaft fracture, includes internal fixation, when performed
25515	1	CPT	Open treatment of radial shaft fracture, includes internal fixation, when performed
25405	2	CPT	Repair of nonunion or malunion, radius OR ulna; with autograft (includes obtaining graft)
24685	5	CPT	Open treatment of ulnar fracture, proximal end (eg, olecranon or coronoid process[es]), includes internal fixation, when performed
24666	1	CPT	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed; with radial head prosthetic replacement
24635	1	CPT	Open treatment of Monteggia type of fracture dislocation at elbow (fracture proximal end of ulna with dislocation of radial head), includes internal fixation, when performed
24587	1	CPT	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius); with implant arthroplasty
24586	4	CPT	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius);
24546	1	CPT	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; with intercondylar extension
24545	1	CPT	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; without intercondylar extension
24515	3	CPT	Open treatment of humeral shaft fracture with plate/screws, with or without cerclage
23615	2	CPT	Open treatment of proximal humeral (surgical or anatomical neck) fracture, includes internal fixation, when performed, includes repair of tuberosity(s), when performed;

**Area: HAND SURGERY Type: Forearm/elbow/shoulder reconstruction, releases**

Code	Code Count	Code Type	Description
24366	1	CPT	Arthroplasty, radial head; with implant
24363	2	CPT	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (eg, total elbow)
24164	1	CPT	Removal of prosthesis, includes debridement and synovectomy when performed; radial head
24160	2	CPT	Removal of prosthesis, includes debridement and synovectomy when performed; humeral and ulnar components
24149	2	CPT	Radical resection of capsule, soft tissue, and heterotopic bone, elbow, with contracture release (separate procedure)
24006	3	CPT	Arthrotomy of the elbow, with capsular excision for capsular release (separate procedure)
23472	5	CPT	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))

**Area: HAND SURGERY    Type: Hand fractures/dislocation/ligament injury**

<b>Code</b>	<b>Code Count</b>	<b>Code Type</b>	<b>Description</b>
26785	3	CPT	Open treatment of interphalangeal joint dislocation, includes internal fixation, when performed, single
26776	1	CPT	Percutaneous skeletal fixation of interphalangeal joint dislocation, single, with manipulation
26765	2	CPT	Open treatment of distal phalangeal fracture, finger or thumb, includes internal fixation, when performed, each
26746	6	CPT	Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, includes internal fixation, when performed, each
26735	19	CPT	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, includes internal fixation, when performed, each
26727	5	CPT	Percutaneous skeletal fixation of unstable phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with manipulation, each
26715	2	CPT	Open treatment of metacarpophalangeal dislocation, single, includes internal fixation, when performed
26686	1	CPT	Open treatment of carpometacarpal dislocation, other than thumb; complex, multiple, or delayed reduction
26685	1	CPT	Open treatment of carpometacarpal dislocation, other than thumb; includes internal fixation, when performed, each joint
26676	5	CPT	Percutaneous skeletal fixation of carpometacarpal dislocation, other than thumb, with manipulation, each joint
26665	1	CPT	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), includes internal fixation, when performed
26615	17	CPT	Open treatment of metacarpal fracture, single, includes internal fixation, when performed, each bone
26608	2	CPT	Percutaneous skeletal fixation of metacarpal fracture, each bone
26541	1	CPT	Reconstruction, collateral ligament, metacarpophalangeal joint, single; with tendon or fascial graft (includes obtaining graft)
26540	6	CPT	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint

**Area: HAND SURGERY Type: Hand reconstruction, releases, etc.**

Code	Code Count	Code Type	Description
26862	1	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26861	2	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation; each additional interphalangeal joint (List separately in addition to code for primary procedure)
26860	8	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation;
26852	1	CPT	Arthrodesis, metacarpophalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26850	2	CPT	Arthrodesis, metacarpophalangeal joint, with or without internal fixation;
26841	1	CPT	Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation;
26567	2	CPT	Osteotomy; phalanx of finger, each
26565	1	CPT	Osteotomy; metacarpal, each
26545	1	CPT	Reconstruction, collateral ligament, interphalangeal joint, single, including graft, each joint
26540	3	CPT	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint
26536	1	CPT	Arthroplasty, interphalangeal joint; with prosthetic implant, each joint
26535	1	CPT	Arthroplasty, interphalangeal joint; each joint
26531	1	CPT	Arthroplasty, metacarpophalangeal joint; with prosthetic implant, each joint
26530	1	CPT	Arthroplasty, metacarpophalangeal joint; each joint
26525	4	CPT	Capsulectomy or capsulotomy; interphalangeal joint, each joint
26520	2	CPT	Capsulectomy or capsulotomy; metacarpophalangeal joint, each joint
26516	3	CPT	Capsulodesis, metacarpophalangeal joint; single digit
26340	4	CPT	Manipulation, finger joint, under anesthesia, each joint
26135	1	CPT	Synovectomy, metacarpophalangeal joint including intrinsic release and extensor hood reconstruction, each digit
25447	19	CPT	Arthroplasty, interposition, intercarpal or carpometacarpal joints
25445	2	CPT	Arthroplasty with prosthetic replacement; trapezium

**Area: HAND SURGERY Type: Nerve decompression**

Code	Code Count	Code Type	Description
64721	95	CPT	Neuroplasty and/or transposition; median nerve at carpal tunnel
64719	3	CPT	Neuroplasty and/or transposition; ulnar nerve at wrist
64718	28	CPT	Neuroplasty and/or transposition; ulnar nerve at elbow
64713	5	CPT	Neuroplasty, major peripheral nerve, arm or leg, open; brachial plexus
64712	2	CPT	Neuroplasty, major peripheral nerve, arm or leg, open; sciatic nerve
64708	29	CPT	Neuroplasty, major peripheral nerve, arm or leg, open; other than specified
64702	9	CPT	Neuroplasty; digital, 1 or both, same digit
29848	17	CPT	Endoscopy, wrist, surgical, with release of transverse carpal ligament

**Area: HAND SURGERY    Type: Nerve injury**

<b>Code</b>	<b>Code Count</b>	<b>Code Type</b>	<b>Description</b>
64911	1	CPT	Nerve repair; with autogenous vein graft (includes harvest of vein graft), each nerve
64910	3	CPT	Nerve repair; with synthetic conduit or vein allograft (eg, nerve tube), each nerve
64905	51	CPT	Nerve pedicle transfer; first stage
64893	5	CPT	Nerve graft (includes obtaining graft), single strand, arm or leg; more than 4 cm length
64892	5	CPT	Nerve graft (includes obtaining graft), single strand, arm or leg; up to 4 cm length
64874	8	CPT	Suture of nerve; requiring extensive mobilization, or transposition of nerve (List separately in addition to code for nerve suture)
64859	9	CPT	Suture of each additional major peripheral nerve (List separately in addition to code for primary procedure)
64857	22	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; without transposition
64856	17	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; including transposition
64836	1	CPT	Suture of 1 nerve; ulnar motor
64834	3	CPT	Suture of 1 nerve; hand or foot, common sensory nerve
64832	1	CPT	Suture of digital nerve, hand or foot; each additional digital nerve (List separately in addition to code for primary procedure)
64831	4	CPT	Suture of digital nerve, hand or foot; 1 nerve
64787	1	CPT	Implantation of nerve end into bone or muscle (List separately in addition to neuroma excision)
64784	9	CPT	Excision of neuroma; major peripheral nerve, except sciatic
64776	5	CPT	Excision of neuroma; digital nerve, 1 or both, same digit
64774	1	CPT	Excision of neuroma; cutaneous nerve, surgically identifiable

**Area: HAND SURGERY Type: Tendon/muscle**

Code	Code Count	Code Type	Description
26485	3	CPT	Transfer or transplant of tendon, palmar; without free tendon graft, each tendon
26437	1	CPT	Realignment of extensor tendon, hand, each tendon
26426	4	CPT	Repair of extensor tendon, central slip, secondary (eg, boutonniere deformity); using local tissue(s), including lateral band(s), each finger
26418	9	CPT	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon
26410	7	CPT	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon
26390	1	CPT	Excision flexor tendon, with implantation of synthetic rod for delayed tendon graft, hand or finger, each rod
26372	1	CPT	Repair or advancement of profundus tendon, with intact superficialis tendon; secondary with free graft (includes obtaining graft), each tendon
26358	2	CPT	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); secondary, with free graft (includes obtaining graft), each tendon
26356	14	CPT	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); primary, without free graft, each tendon
26352	1	CPT	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); secondary with free graft (includes obtaining graft), each tendon
26350	7	CPT	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); primary or secondary without free graft, each tendon
26180	5	CPT	Excision of tendon, finger, flexor or extensor, each tendon
25280	1	CPT	Lengthening or shortening of flexor or extensor tendon, forearm and/or wrist, single, each tendon
25275	2	CPT	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)
25270	12	CPT	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle
25260	20	CPT	Repair, tendon or muscle, flexor, forearm and/or wrist; primary, single, each tendon or muscle
24342	6	CPT	Reinsertion of ruptured biceps or triceps tendon, distal, with or without tendon graft
24305	1	CPT	Tendon lengthening, upper arm or elbow, each tendon

**Area: HAND SURGERY Type: Tumor/osteomyelitis**

Code	Code Count	Code Type	Description
26215	1	CPT	Excision or curettage of bone cyst or benign tumor of proximal, middle, or distal phalanx of finger; with autograft (includes obtaining graft)
26205	1	CPT	Excision or curettage of bone cyst or benign tumor of metacarpal; with autograft (includes obtaining graft)
26116	5	CPT	Excision, tumor, soft tissue, or vascular malformation, of hand or finger, subfascial (eg, intramuscular); less than 1.5 cm
26115	4	CPT	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; less than 1.5 cm
25145	1	CPT	Sequestrectomy (eg, for osteomyelitis or bone abscess), forearm and/or wrist
25130	1	CPT	Excision or curettage of bone cyst or benign tumor of carpal bones;
24076	1	CPT	Excision, tumor, soft tissue of upper arm or elbow area, subfascial (eg, intramuscular); less than 5 cm
20205	3	CPT	Biopsy, muscle; deep
11755	1	CPT	Biopsy of nail unit (eg, plate, bed, matrix, hyponychium, proximal and lateral nail folds) (separate procedure)
11424	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm
11423	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm
11421	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm
11420	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less

**Area: HAND SURGERY    Type: Vascular repair/reconstruction/replantation/microvascular**

<b>Code</b>	<b>Code Count</b>	<b>Code Type</b>	<b>Description</b>
35207	2	CPT	Repair blood vessel, direct; hand, finger
35206	3	CPT	Repair blood vessel, direct; upper extremity
20827	1	CPT	Replantation, thumb (includes distal tip to MP joint), complete amputation
15757	2	CPT	Free skin flap with microvascular anastomosis
15756	7	CPT	Free muscle or myocutaneous flap with microvascular anastomosis

**Area: HAND SURGERY    Type: Wound closure with graft**

<b>Code</b>	<b>Code Count</b>	<b>Code Type</b>	<b>Description</b>
15240	1	CPT	Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; 20 sq cm or less
15221	1	CPT	Full thickness graft, free, including direct closure of donor site, scalp, arms, and/or legs; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)
15220	1	CPT	Full thickness graft, free, including direct closure of donor site, scalp, arms, and/or legs; 20 sq cm or less
15101	2	CPT	Split-thickness autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)
15100	11	CPT	Split-thickness autograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children (except 15050)

**Area: HAND SURGERY    Type: Wound closure without graft**

<b>Code</b>	<b>Code Count</b>	<b>Code Type</b>	<b>Description</b>
13160	1	CPT	Secondary closure of surgical wound or dehiscence, extensive or complicated
13121	1	CPT	Repair, complex, scalp, arms, and/or legs; 2.6 cm to 7.5 cm

**Area: HAND SURGERY Type: Wound I&D fasciotomy/wound preparation**

Code	Code Count	Code Type	Description
26037	1	CPT	Decompressive fasciotomy, hand (excludes 26035)
26035	4	CPT	Decompression fingers and/or hand, injection injury (eg, grease gun)
26020	6	CPT	Drainage of tendon sheath, digit and/or palm, each
26011	3	CPT	Drainage of finger abscess; complicated (eg, felon)
25028	1	CPT	Incision and drainage, forearm and/or wrist; deep abscess or hematoma
25025	1	CPT	Decompression fasciotomy, forearm and/or wrist, flexor AND extensor compartment; with debridement of nonviable muscle and/or nerve
25024	1	CPT	Decompression fasciotomy, forearm and/or wrist, flexor AND extensor compartment; without debridement of nonviable muscle and/or nerve
25023	1	CPT	Decompression fasciotomy, forearm and/or wrist, flexor OR extensor compartment; with debridement of nonviable muscle and/or nerve
25020	1	CPT	Decompression fasciotomy, forearm and/or wrist, flexor OR extensor compartment; without debridement of nonviable muscle and/or nerve
23930	1	CPT	Incision and drainage, upper arm or elbow area; deep abscess or hematoma
20525	2	CPT	Removal of foreign body in muscle or tendon sheath; deep or complicated
20103	1	CPT	Exploration of penetrating wound (separate procedure); extremity
15005	1	CPT	Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar (including subcutaneous tissues), or incisional release of scar contracture, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet and/or multiple digits; each additional 100 sq cm, or part thereof, or each additional 1% of body area of infants and children (List separately in addition to code for primary procedure)
15004	15	CPT	Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar (including subcutaneous tissues), or incisional release of scar contracture, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet and/or multiple digits; first 100 sq cm or 1% of body area of infants and children
15002	1	CPT	Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar (including subcutaneous tissues), or incisional release of scar contracture, trunk, arms, legs; first 100 sq cm or 1% of body area of infants and children
11044	3	CPT	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); first 20 sq cm or less
11043	4	CPT	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); first 20 sq cm or less
11042	5	CPT	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq cm or less
11012	27	CPT	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin, subcutaneous tissue, muscle fascia, muscle, and bone
11011	1	CPT	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin, subcutaneous tissue, muscle fascia, and muscle
11000	1	CPT	Debridement of extensive eczematous or infected skin; up to 10% of body surface
10180	1	CPT	Incision and drainage, complex, postoperative wound infection
10140	1	CPT	Incision and drainage of hematoma, seroma or fluid collection
10061	2	CPT	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); complicated or multiple
10060	3	CPT	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single



**Area: HAND SURGERY Type: Wound reconstruction with flap**

Code	Code Count	Code Type	Description
15738	8	CPT	Muscle, myocutaneous, or fasciocutaneous flap; lower extremity
15736	8	CPT	Muscle, myocutaneous, or fasciocutaneous flap; upper extremity
15734	1	CPT	Muscle, myocutaneous, or fasciocutaneous flap; trunk
15570	1	CPT	Formation of direct or tubed pedicle, with or without transfer; trunk
14350	3	CPT	Filletted finger or toe flap, including preparation of recipient site
14041	2	CPT	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10.1 sq cm to 30.0 sq cm
14040	14	CPT	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10 sq cm or less
14021	1	CPT	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10.1 sq cm to 30.0 sq cm
14020	3	CPT	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10 sq cm or less

**Area: HAND SURGERY Type: Wrist fracture/dislocation**

Code	Code Count	Code Type	Description
25670	2	CPT	Open treatment of radiocarpal or intercarpal dislocation, 1 or more bones
25628	3	CPT	Open treatment of carpal scaphoid (navicular) fracture, includes internal fixation, when performed
25609	44	CPT	Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation of 3 or more fragments
25608	10	CPT	Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation of 2 fragments
25607	8	CPT	Open treatment of distal radial extra-articular fracture or epiphyseal separation, with internal fixation
25545	1	CPT	Open treatment of ulnar shaft fracture, includes internal fixation, when performed
25526	2	CPT	Open treatment of radial shaft fracture, includes internal fixation, when performed, and open treatment of distal radioulnar joint dislocation (Galeazzi fracture/ dislocation), includes internal fixation, when performed, includes repair of triangular fibrocartilage complex
25525	1	CPT	Open treatment of radial shaft fracture, includes internal fixation, when performed, and closed treatment of distal radioulnar joint dislocation (Galeazzi fracture/ dislocation), includes percutaneous skeletal fixation, when performed
25430	1	CPT	Insertion of vascular pedicle into carpal bone (eg, Hori procedure)
25320	10	CPT	Capsulorrhaphy or reconstruction, wrist, open (eg, capsulodesis, ligament repair, tendon transfer or graft) (includes synovectomy, capsulotomy and open reduction) for carpal instability
25240	1	CPT	Excision distal ulna partial or complete (eg, Darrach type or matched resection)
25107	2	CPT	Arthrotomy, distal radioulnar joint including repair of triangular cartilage, complex

**Area: HAND SURGERY Type: Wrist reconstruction, releases, arthrodesis, etc.**

Code	Code Count	Code Type	Description
25825	8	CPT	Arthrodesis, wrist; with autograft (includes obtaining graft)
25810	1	CPT	Arthrodesis, wrist; with iliac or other autograft (includes obtaining graft)
25800	2	CPT	Arthrodesis, wrist; complete, without bone graft (includes radiocarpal and/or intercarpal and/or carpometacarpal joints)
25440	6	CPT	Repair of nonunion, scaphoid carpal (navicular) bone, with or without radial styloidectomy (includes obtaining graft and necessary fixation)
25431	2	CPT	Repair of nonunion of carpal bone (excluding carpal scaphoid (navicular)) (includes obtaining graft and necessary fixation), each bone
25390	2	CPT	Osteoplasty, radius OR ulna; shortening
25350	1	CPT	Osteotomy, radius; distal third
25337	2	CPT	Reconstruction for stabilization of unstable distal ulna or distal radioulnar joint, secondary by soft tissue stabilization (eg, tendon transfer, tendon graft or weave, or tenodesis) with or without open reduction of distal radioulnar joint
25320	1	CPT	Capsulorrhaphy or reconstruction, wrist, open (eg, capsulodesis, ligament repair, tendon transfer or graft) (includes synovectomy, capsulotomy and open reduction) for carpal instability
25259	2	CPT	Manipulation, wrist, under anesthesia
25230	2	CPT	Radial styloidectomy (separate procedure)
25215	4	CPT	Carpectomy; all bones of proximal row
25210	12	CPT	Carpectomy; 1 bone
25105	1	CPT	Arthrotomy, wrist joint; with synovectomy
25085	1	CPT	Capsulotomy, wrist (eg, contracture)

**Area: ARTHROSCOPY Type: Elbow**

Code	Code Count	Code Type	Description
29838	2	CPT	Arthroscopy, elbow, surgical; debridement, extensive
29836	1	CPT	Arthroscopy, elbow, surgical; synovectomy, complete
29834	1	CPT	Arthroscopy, elbow, surgical; with removal of loose body or foreign body

**Area: ARTHROSCOPY Type: Shoulder**

Code	Code Count	Code Type	Description
29828	2	CPT	Arthroscopy, shoulder, surgical; biceps tenodesis
29827	10	CPT	Arthroscopy, shoulder, surgical; with rotator cuff repair
29826	10	CPT	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (List separately in addition to code for primary procedure)
29825	1	CPT	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation
29823	14	CPT	Arthroscopy, shoulder, surgical; debridement, extensive
29821	2	CPT	Arthroscopy, shoulder, surgical; synovectomy, complete
29807	2	CPT	Arthroscopy, shoulder, surgical; repair of SLAP lesion
29806	3	CPT	Arthroscopy, shoulder, surgical; capsulorrhaphy
29805	1	CPT	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)

**Area: ARTHROSCOPY Type: Wrist**

Code	Code Count	Code Type	Description
29847	1	CPT	Arthroscopy, wrist, surgical; internal fixation for fracture or instability
29846	5	CPT	Arthroscopy, wrist, surgical; excision and/or repair of triangular fibrocartilage and/or joint debridement
29840	1	CPT	Arthroscopy, wrist, diagnostic, with or without synovial biopsy (separate procedure)

**Area: OTHER Type: Bone/cartilage/fascia grafts**

Code	Code Count	Code Type	Description
20902	1	CPT	Bone graft, any donor area; major or large
20900	1	CPT	Bone graft, any donor area; minor or small (eg, dowel or button)

**Area: OTHER Type: Closed treatment of fractures and dislocations**

Code	Code Count	Code Type	Description
26750	2	CPT	Closed treatment of distal phalangeal fracture, finger or thumb; without manipulation, each
26740	1	CPT	Closed treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint; without manipulation, each
26725	1	CPT	Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; with manipulation, with or without skin or skeletal traction, each
26605	2	CPT	Closed treatment of metacarpal fracture, single; with manipulation, each bone

**Area: OTHER Type: Miscellaneous insertion or removal of devices**

Code	Code Count	Code Type	Description
20692	1	CPT	Application of a multiplane (pins or wires in more than 1 plane), unilateral, external fixation system (eg, Ilizarov, Monticelli type)
20690	1	CPT	Application of a uniplane (pins or wires in 1 plane), unilateral, external fixation system
20680	35	CPT	Removal of implant; deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)
20670	2	CPT	Removal of implant; superficial (eg, buried wire, pin or rod) (separate procedure)
11981	4	CPT	Insertion, non-biodegradable drug delivery implant

**Area: OTHER Type: Nail surgery**

Code	Code Count	Code Type	Description
11760	1	CPT	Repair of nail bed
11750	2	CPT	Excision of nail and nail matrix, partial or complete (eg, ingrown or deformed nail), for permanent removal
11730	3	CPT	Avulsion of nail plate, partial or complete, simple; single

**Area: Non-Tracked Codes Type: Non-Tracked Codes**

Code	Code Count	Code Type	Description
99254	3	CPT	Inpatient consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 80 minutes are spent at the bedside and on the patient's hospital floor or unit.
97606	1	CPT	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters

77002	2	CPT	Fluoroscopic guidance for needle placement (eg, biopsy, aspiration, injection, localization device) (List separately in addition to code for primary procedure)
69990	2	CPT	Microsurgical techniques, requiring use of operating microscope (List separately in addition to code for primary procedure)
64913	4	CPT	Nerve repair; with nerve allograft, each additional strand (List separately in addition to code for primary procedure)
64912	3	CPT	Nerve repair; with nerve allograft, each nerve, first strand (cable)
64795	1	CPT	Biopsy of nerve
64792	1	CPT	Excision of neurofibroma or neurolemmoma; extensive (including malignant type)
64790	2	CPT	Excision of neurofibroma or neurolemmoma; major peripheral nerve
64788	2	CPT	Excision of neurofibroma or neurolemmoma; cutaneous nerve
64772	5	CPT	Transection or avulsion of other spinal nerve, extradural
64727	1	CPT	Internal neurolysis, requiring use of operating microscope (List separately in addition to code for neuroplasty) (Neuroplasty includes external neurolysis)
64642	1	CPT	Chemodenervation of one extremity; 1-4 muscle(s)
29055	2	CPT	Application, cast; shoulder spica
28825	1	CPT	Amputation, toe; interphalangeal joint
28820	1	CPT	Amputation, toe; metatarsophalangeal joint
28122	1	CPT	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); tarsal or metatarsal bone, except talus or calcaneus
28120	1	CPT	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); talus or calcaneus
27880	5	CPT	Amputation, leg, through tibia and fibula;
27641	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy), bone (eg, osteomyelitis); fibula
27640	2	CPT	Partial excision (craterization, saucerization, or diaphysectomy), bone (eg, osteomyelitis); tibia
27614	2	CPT	Biopsy, soft tissue of leg or ankle area; deep (subfascial or intramuscular)
27385	1	CPT	Suture of quadriceps or hamstring muscle rupture; primary
26498	4	CPT	Transfer of tendon to restore intrinsic function; all 4 fingers
26497	1	CPT	Transfer of tendon to restore intrinsic function; ring and small finger
26492	2	CPT	Opponensplasty; tendon transfer with graft (includes obtaining graft), each tendon
26480	21	CPT	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; without free graft, each tendon
26455	6	CPT	Tenotomy, flexor, finger, open, each tendon
26450	8	CPT	Tenotomy, flexor, palm, open, each tendon
26445	2	CPT	Tenolysis, extensor tendon, hand OR finger, each tendon
26440	12	CPT	Tenolysis, flexor tendon; palm OR finger, each tendon
26145	3	CPT	Synovectomy, tendon sheath, radical (tenosynovectomy), flexor tendon, palm and/or finger, each tendon
25449	1	CPT	Revision of arthroplasty, including removal of implant, wrist joint
25360	3	CPT	Osteotomy; ulna
25355	1	CPT	Osteotomy, radius; middle or proximal third
25310	5	CPT	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; each tendon
25295	4	CPT	Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon
25290	3	CPT	Tenotomy, open, flexor or extensor tendon, forearm and/or wrist, single, each tendon
24400	1	CPT	Osteotomy, humerus, with or without internal fixation
24371	1	CPT	Revision of total elbow arthroplasty, including allograft when performed; humeral and ulnar component
24359	1	CPT	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); debridement, soft tissue and/or bone, open with tendon repair or reattachment

24358	2	CPT	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); debridement, soft tissue and/or bone, open
24346	1	CPT	Reconstruction medial collateral ligament, elbow, with tendon graft (includes harvesting of graft)
24345	1	CPT	Repair medial collateral ligament, elbow, with local tissue
24344	2	CPT	Reconstruction lateral collateral ligament, elbow, with tendon graft (includes harvesting of graft)
24343	3	CPT	Repair lateral collateral ligament, elbow, with local tissue
24301	7	CPT	Muscle or tendon transfer, any type, upper arm or elbow, single (excluding 24320-24331)
23802	4	CPT	Arthrodesis, glenohumeral joint; with autogenous graft (includes obtaining graft)
23800	1	CPT	Arthrodesis, glenohumeral joint;
23550	1	CPT	Open treatment of acromioclavicular dislocation, acute or chronic;
23515	1	CPT	Open treatment of clavicular fracture, includes internal fixation, when performed
23430	16	CPT	Tenodesis of long tendon of biceps
23397	2	CPT	Muscle transfer, any type, shoulder or upper arm; multiple
23395	5	CPT	Muscle transfer, any type, shoulder or upper arm; single
23150	1	CPT	Excision or curettage of bone cyst or benign tumor of proximal humerus;
20937	1	CPT	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)
20600	3	CPT	Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance
20526	1	CPT	Injection, therapeutic (eg, local anesthetic, corticosteroid), carpal tunnel
15860	4	CPT	Intravenous injection of agent (eg, fluorescein) to test vascular flow in flap or graft
15850	1	CPT	Removal of sutures under anesthesia (other than local), same surgeon
15275	1	CPT	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area
15274	3	CPT	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)
15273	6	CPT	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children
15272	2	CPT	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)
15271	6	CPT	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area
13122	1	CPT	Repair, complex, scalp, arms, and/or legs; each additional 5 cm or less (List separately in addition to code for primary procedure)
11046	4	CPT	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)