

Code Summary Report

OrthoCarolina Program - 2633626061

Resident: Fellow 1

Done between 8/1/2017 and 7/31/2018



Area: HAND SURGERY Type: Amputation

Code	Code Count	Code Type	Description
26952	1	CPT	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with local advancement flaps (V-Y, hood)
26951	30	CPT	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with direct closure
26910	6	CPT	Amputation, metacarpal, with finger or thumb (ray amputation), single, with or without interosseous transfer
25907	1	CPT	Amputation, forearm, through radius and ulna; secondary closure or scar revision
25900	2	CPT	Amputation, forearm, through radius and ulna;

Area: HAND SURGERY Type: Congenital

Code	Code Count	Code Type	Description
26561	1	CPT	Repair of syndactyly (web finger) each web space; with skin flaps and grafts
26560	1	CPT	Repair of syndactyly (web finger) each web space; with skin flaps

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

Code	Code Count	Code Type	Description
26160	29	CPT	Excision of lesion of tendon sheath or joint capsule (eg, cyst, mucous cyst, or ganglion), hand or finger
26055	75	CPT	Tendon sheath incision (eg, for trigger finger)
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	2	CPT	Excision of ganglion, wrist (dorsal or volar); recurrent
25111	6	CPT	Excision of ganglion, wrist (dorsal or volar); primary
25000	15	CPT	Incision, extensor tendon sheath, wrist (eg, de Quervains disease)
24105	1	CPT	Excision, olecranon bursa

Area: HAND SURGERY Type: Dupuytren's

Code	Code Count	Code Type	Description
26125	3	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	3	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	1	CPT	Fasciectomy, palm only, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)
26040	2	CPT	Fasciotomy, palmar (eg, Dupuytren's contracture); percutaneous

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

Code	Code Count	Code Type	Description
25575	2	CPT	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius AND ulna
25574	3	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	3	CPT	Open treatment of radial shaft fracture, includes internal fixation, when performed
25405	3	CPT	Repair of nonunion or malunion, radius OR ulna; with autograft (includes obtaining graft)
24685	12	CPT	Open treatment of ulnar fracture, proximal end (eg, olecranon or coronoid process[es]), includes internal fixation, when performed
24666	2	CPT	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed; with radial head prosthetic replacement
24665	3	CPT	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed;
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
24615	2	CPT	Open treatment of acute or chronic elbow dislocation
24587	2	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	6	CPT	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius);
24545	1	CPT	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; without intercondylar extension
24516	1	CPT	Treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws
24515	5	CPT	Open treatment of humeral shaft fracture with plate/screws, with or without cerclage
23615	1	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	4	CPT	Arthroplasty, radial head; with implant
24363	5	CPT	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (eg, total elbow)
24300	1	CPT	Manipulation, elbow, under anesthesia
24149	1	CPT	Radical resection of capsule, soft tissue, and heterotopic bone, elbow, with contracture release (separate procedure)
24006	1	CPT	Arthrotomy of the elbow, with capsular excision for capsular release (separate procedure)
23472	3	CPT	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))

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

Code	Code Count	Code Type	Description
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
26756	2	CPT	Percutaneous skeletal fixation of distal phalangeal fracture, finger or thumb, each
26735	15	CPT	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, includes internal fixation, when performed, each
26727	9	CPT	Percutaneous skeletal fixation of unstable phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with manipulation, each
26686	1	CPT	Open treatment of carpometacarpal dislocation, other than thumb; complex, multiple, or delayed reduction
26685	2	CPT	Open treatment of carpometacarpal dislocation, other than thumb; includes internal fixation, when performed, each joint
26676	4	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
26650	3	CPT	Percutaneous skeletal fixation of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation
26615	11	CPT	Open treatment of metacarpal fracture, single, includes internal fixation, when performed, each bone
26608	1	CPT	Percutaneous skeletal fixation of metacarpal fracture, each bone
26540	3	CPT	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint
26340	4	CPT	Manipulation, finger joint, under anesthesia, each joint

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

Code	Code Count	Code Type	Description
26861	7	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation; each additional interphalangeal joint (List separately in addition to code for primary procedure)
26860	10	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation;
26852	2	CPT	Arthrodesis, metacarpophalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26850	1	CPT	Arthrodesis, metacarpophalangeal joint, with or without internal fixation;
26548	1	CPT	Repair and reconstruction, finger, volar plate, interphalangeal joint
26535	2	CPT	Arthroplasty, interphalangeal joint; each joint
26525	7	CPT	Capsulectomy or capsulotomy; interphalangeal joint, each joint
26520	5	CPT	Capsulectomy or capsulotomy; metacarpophalangeal joint, each joint
26340	5	CPT	Manipulation, finger joint, under anesthesia, each joint
25447	30	CPT	Arthroplasty, interposition, intercarpal or carpometacarpal joints

Area: HAND SURGERY Type: Nerve decompression

Code	Code Count	Code Type	Description
64722	4	CPT	Decompression; unspecified nerve(s) (specify)
64721	107	CPT	Neuroplasty and/or transposition; median nerve at carpal tunnel
64719	4	CPT	Neuroplasty and/or transposition; ulnar nerve at wrist
64718	24	CPT	Neuroplasty and/or transposition; ulnar nerve at elbow
64713	11	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	64	CPT	Neuroplasty, major peripheral nerve, arm or leg, open; other than specified
64704	2	CPT	Neuroplasty; nerve of hand or foot
64702	1	CPT	Neuroplasty; digital, 1 or both, same digit
29848	20	CPT	Endoscopy, wrist, surgical, with release of transverse carpal ligament

Area: HAND SURGERY Type: Nerve injury

Code	Code Count	Code Type	Description
64910	5	CPT	Nerve repair; with synthetic conduit or vein allograft (eg, nerve tube), each nerve
64905	71	CPT	Nerve pedicle transfer; first stage
64902	1	CPT	Nerve graft, each additional nerve; multiple strands (cable) (List separately in addition to code for primary procedure)
64898	4	CPT	Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; more than 4 cm length
64897	1	CPT	Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; up to 4 cm length
64896	1	CPT	Nerve graft (includes obtaining graft), multiple strands (cable), hand or foot; more than 4 cm length
64895	1	CPT	Nerve graft (includes obtaining graft), multiple strands (cable), hand or foot; up to 4 cm length
64874	16	CPT	Suture of nerve; requiring extensive mobilization, or transposition of nerve (List separately in addition to code for nerve suture)
64861	1	CPT	Suture of; brachial plexus
64857	2	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; without transposition
64856	4	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; including transposition
64836	1	CPT	Suture of 1 nerve; ulnar motor
64832	1	CPT	Suture of digital nerve, hand or foot; each additional digital nerve (List separately in addition to code for primary procedure)
64831	13	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	3	CPT	Excision of neuroma; major peripheral nerve, except sciatic

Area: HAND SURGERY Type: Tendon/muscle

Code	Code Count	Code Type	Description
26418	7	CPT	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon
26412	1	CPT	Repair, extensor tendon, hand, primary or secondary; with free graft (includes obtaining graft), each tendon
26410	12	CPT	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon
26357	2	CPT	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); secondary, without free graft, each tendon
26356	12	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	9	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
25275	2	CPT	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)
25270	7	CPT	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle
25260	7	CPT	Repair, tendon or muscle, flexor, forearm and/or wrist; primary, single, each tendon or muscle
24342	2	CPT	Reinsertion of ruptured biceps or triceps tendon, distal, with or without tendon graft
24341	2	CPT	Repair, tendon or muscle, upper arm or elbow, each tendon or muscle, primary or secondary (excludes rotator cuff)
24305	2	CPT	Tendon lengthening, upper arm or elbow, each tendon

Area: HAND SURGERY Type: Tumor/osteomyelitis

Code	Code Count	Code Type	Description
26236	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); distal phalanx of finger
26230	2	CPT	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); metacarpal
26210	1	CPT	Excision or curettage of bone cyst or benign tumor of proximal, middle, or distal phalanx of finger;
26116	7	CPT	Excision, tumor, soft tissue, or vascular malformation, of hand or finger, subfascial (eg, intramuscular); less than 1.5 cm
26115	7	CPT	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; less than 1.5 cm
25135	2	CPT	Excision or curettage of bone cyst or benign tumor of carpal bones; with autograft (includes obtaining graft)
25126	1	CPT	Excision or curettage of bone cyst or benign tumor of radius or ulna (excluding head or neck of radius and olecranon process); with allograft
25125	1	CPT	Excision or curettage of bone cyst or benign tumor of radius or ulna (excluding head or neck of radius and olecranon process); with autograft (includes obtaining graft)
25076	3	CPT	Excision, tumor, soft tissue of forearm and/or wrist area, subfascial (eg, intramuscular); less than 3 cm
25075	3	CPT	Excision, tumor, soft tissue of forearm and/or wrist area, subcutaneous; less than 3 cm
11755	1	CPT	Biopsy of nail unit (eg, plate, bed, matrix, hyponychium, proximal and lateral nail folds) (separate procedure)
11426	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 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
11403	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 2.1 to 3.0 cm
11402	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 1.1 to 2.0 cm
11100	1	CPT	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion

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

Code	Code Count	Code Type	Description
64823	1	CPT	Sympathectomy; superficial palmar arch
64820	2	CPT	Sympathectomy; digital arteries, each digit
37618	1	CPT	Ligation, major artery (eg, post-traumatic, rupture); extremity
35236	1	CPT	Repair blood vessel with vein graft; upper extremity
35207	3	CPT	Repair blood vessel, direct; hand, finger
20816	2	CPT	Replantation, digit, excluding thumb (includes metacarpophalangeal joint to insertion of flexor sublimis tendon), complete amputation
15757	1	CPT	Free skin flap with microvascular anastomosis
15756	2	CPT	Free muscle or myocutaneous flap with microvascular anastomosis

Area: HAND SURGERY Type: Wound closure with graft

Code	Code Count	Code Type	Description
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
15120	1	CPT	Split-thickness autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 100 sq cm or less, or 1% of body area of infants and children (except 15050)
15101	8	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	13	CPT	Split-thickness autograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children (except 15050)
15050	2	CPT	Pinch graft, single or multiple, to cover small ulcer, tip of digit, or other minimal open area (except on face), up to defect size 2 cm diameter

Area: HAND SURGERY Type: Wound closure without graft

Code	Code Count	Code Type	Description
13160	3	CPT	Secondary closure of surgical wound or dehiscence, extensive or complicated
13131	1	CPT	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; 1.1 cm to 2.5 cm
13121	1	CPT	Repair, complex, scalp, arms, and/or legs; 2.6 cm to 7.5 cm
13120	1	CPT	Repair, complex, scalp, arms, and/or legs; 1.1 cm to 2.5 cm
12001	2	CPT	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less

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

Code	Code Count	Code Type	Description
26080	3	CPT	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; interphalangeal joint, each
26075	3	CPT	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; metacarpophalangeal joint, each
26034	2	CPT	Incision, bone cortex, hand or finger (eg, osteomyelitis or bone abscess)
26030	2	CPT	Drainage of palmar bursa; multiple bursa
26025	1	CPT	Drainage of palmar bursa; single, bursa
26020	18	CPT	Drainage of tendon sheath; digit and/or palm, each
26011	3	CPT	Drainage of finger abscess; complicated (eg, felon)
26010	4	CPT	Drainage of finger abscess; simple
25040	1	CPT	Arthrotomy, radiocarpal or midcarpal joint, with exploration, drainage, or removal of foreign body
25028	3	CPT	Incision and drainage, forearm and/or wrist; deep abscess or hematoma
24495	1	CPT	Decompression fasciotomy, forearm, with brachial artery exploration
20520	1	CPT	Removal of foreign body in muscle or tendon sheath; simple
20103	3	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	5	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
15003	6	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; 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)
15002	9	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	23	CPT	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); first 20 sq cm or less
11043	19	CPT	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); first 20 sq cm or less
11042	1	CPT	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq cm or less
11012	25	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	2	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
11010	2	CPT	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin and subcutaneous tissues
10180	9	CPT	Incision and drainage, complex, postoperative wound infection
10061	5	CPT	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); complicated or multiple
10060	2	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
15750	2	CPT	Flap; neurovascular pedicle
15738	2	CPT	Muscle, myocutaneous, or fasciocutaneous flap; lower extremity
15736	8	CPT	Muscle, myocutaneous, or fasciocutaneous flap; upper extremity
15574	2	CPT	Formation of direct or tubed pedicle, with or without transfer; forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands or feet
14350	2	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	7	CPT	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10 sq cm or less
14021	4	CPT	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10.1 sq cm to 30.0 sq cm
14020	2	CPT	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10 sq cm or less
14000	3	CPT	Adjacent tissue transfer or rearrangement, trunk; defect 10 sq cm or less

Area: HAND SURGERY Type: Wrist fracture/dislocation

Code	Code Count	Code Type	Description
25695	1	CPT	Open treatment of lunate dislocation
25671	1	CPT	Percutaneous skeletal fixation of distal radioulnar dislocation
25645	4	CPT	Open treatment of carpal bone fracture (other than carpal scaphoid [navicular]), each bone
25628	7	CPT	Open treatment of carpal scaphoid (navicular) fracture, includes internal fixation, when performed
25609	57	CPT	Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation of 3 or more fragments
25608	5	CPT	Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation of 2 fragments
25607	5	CPT	Open treatment of distal radial extra-articular fracture or epiphyseal separation, with internal fixation
25545	2	CPT	Open treatment of ulnar shaft fracture, includes internal fixation, when performed
25430	2	CPT	Insertion of vascular pedicle into carpal bone (eg, Hori procedure)
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
25240	4	CPT	Excision distal uina partial or complete (eg, Darrach type or matched resection)
25107	1	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	2	CPT	Arthrodesis, wrist; with autograft (includes obtaining graft)
25820	1	CPT	Arthrodesis, wrist; limited, without bone graft (eg, intercarpal or radiocarpal)
25805	1	CPT	Arthrodesis, wrist; with sliding graft
25800	2	CPT	Arthrodesis, wrist; complete, without bone graft (includes radiocarpal and/or intercarpal and/or carpometacarpal joints)
25440	2	CPT	Repair of nonunion, scaphoid carpal (navicular) bone, with or without radial styloidectomy (includes obtaining graft and necessary fixation)
25390	4	CPT	Osteoplasty, radius OR ulna; shortening
25350	1	CPT	Osteotomy, radius; distal third
25337	1	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
25259	1	CPT	Manipulation, wrist, under anesthesia
25240	1	CPT	Excision distal ulna partial or complete (eg, Darrach type or matched resection)
25215	7	CPT	Carpectomy; all bones of proximal row
25210	2	CPT	Carpectomy; 1 bone
25107	1	CPT	Arthrotomy, distal radioulnar joint including repair of triangular cartilage, complex

Area: ARTHROSCOPY Type: Elbow

Code	Code Count	Code Type	Description
29838	2	CPT	Arthroscopy, elbow, surgical; debridement, extensive

Area: ARTHROSCOPY Type: Shoulder

Code	Code Count	Code Type	Description
29828	2	CPT	Arthroscopy, shoulder, surgical; biceps tenodesis
29827	5	CPT	Arthroscopy, shoulder, surgical; with rotator cuff repair
29826	7	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
29824	2	CPT	Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)
29823	10	CPT	Arthroscopy, shoulder, surgical; debridement, extensive
29822	1	CPT	Arthroscopy, shoulder, surgical; debridement, limited
29807	3	CPT	Arthroscopy, shoulder, surgical; repair of SLAP lesion
29806	1	CPT	Arthroscopy, shoulder, surgical; capsulorrhaphy

Area: ARTHROSCOPY Type: Wrist

Code	Code Count	Code Type	Description
29846	10	CPT	Arthroscopy, wrist, surgical; excision and/or repair of triangular fibrocartilage and/or joint debridement
29843	1	CPT	Arthroscopy, wrist, surgical; for infection, lavage and drainage

Area: OTHER Type: Bone/cartilage/fascia grafts

Code	Code Count	Code Type	Description
20902	2	CPT	Bone graft, any donor area; major or large

Area: OTHER Type: Closed treatment of fractures and dislocations

Code	Code Count	Code Type	Description
26725	2	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	1	CPT	Closed treatment of metacarpal fracture, single; with manipulation, each bone
25660	1	CPT	Closed treatment of radiocarpal or intercarpal dislocation, 1 or more bones, with manipulation
25635	1	CPT	Closed treatment of carpal bone fracture (excluding carpal scaphoid [navicular]); with manipulation, each bone
25630	3	CPT	Closed treatment of carpal bone fracture (excluding carpal scaphoid [navicular]); without manipulation, each bone
25622	1	CPT	Closed treatment of carpal scaphoid (navicular) fracture; without manipulation

Area: OTHER Type: Miscellaneous insertion or removal of devices

Code	Code Count	Code Type	Description
20692	2	CPT	Application of a multiplane (pins or wires in more than 1 plane), unilateral, external fixation system (eg, Ilizarov, Monticelli type)
20690	4	CPT	Application of a uniplane (pins or wires in 1 plane), unilateral, external fixation system
20680	41	CPT	Removal of implant; deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)
11982	1	CPT	Removal, non-biodegradable drug delivery implant
11981	3	CPT	Insertion, non-biodegradable drug delivery implant

Area: OTHER Type: Nail surgery

Code	Code Count	Code Type	Description
11760	6	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
11732	1	CPT	Avulsion of nail plate, partial or complete, simple; each additional nail plate (List separately in addition to code for primary procedure)

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

Code	Code Count	Code Type	Description
97606	16	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
97605	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 less than or equal to 50 square centimeters
76001	2	CPT	Fluoroscopy, physician or other qualified health care professional time more than 1 hour, assisting a nonradiologic physician or other qualified health care professional (eg, nephrostolithotomy, ERCP, bronchoscopy, transbronchial biopsy)
64913	3	CPT	Nerve repair; with nerve allograft, each additional strand (List separately in addition to code for primary procedure)
64772	2	CPT	Transection or avulsion of other spinal nerve, extradural
64643	1	CPT	Chemodenervation of one extremity; each additional extremity, 1-4 muscle(s) (List separately in addition to code for primary procedure)
64642	1	CPT	Chemodenervation of one extremity; 1-4 muscle(s)

29515	1	CPT	Application of short leg splint (calf to foot)
29125	1	CPT	Application of short arm splint (forearm to hand); static
29075	2	CPT	Application, cast; elbow to finger (short arm)
28515	1	CPT	Closed treatment of fracture, phalanx or phalanges, other than great toe; with manipulation, each
28505	1	CPT	Open treatment of fracture, great toe, phalanx or phalanges, includes internal fixation, when performed
27720	1	CPT	Repair of nonunion or malunion, tibia; without graft, (eg, compression technique)
27654	1	CPT	Repair, secondary, Achilles tendon, with or without graft
27641	2	CPT	Partial excision (craterization, saucerization, or diaphysectomy), bone (eg, osteomyelitis); fibula
27603	1	CPT	Incision and drainage, leg or ankle; deep abscess or hematoma
27580	1	CPT	Arthrodesis, knee, any technique
27385	2	CPT	Suture of quadriceps or hamstring muscle rupture; primary
27360	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy) bone, femur, proximal tibia and/or fibula (eg, osteomyelitis or bone abscess)
27310	2	CPT	Arthrotomy, knee, with exploration, drainage, or removal of foreign body (eg, infection)
27301	1	CPT	Incision and drainage, deep abscess, bursa, or hematoma, thigh or knee region
26498	1	CPT	Transfer of tendon to restore intrinsic function; all 4 fingers
26492	2	CPT	Opponensplasty; tendon transfer with graft (includes obtaining graft), each tendon
26489	1	CPT	Transfer or transplant of tendon, palmar; with free tendon graft (includes obtaining graft), each tendon
26480	25	CPT	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; without free graft, each tendon
26455	1	CPT	Tenotomy, flexor, finger, open, each tendon
26449	1	CPT	Tenolysis, complex, extensor tendon, finger, including forearm, each tendon
26445	6	CPT	Tenolysis, extensor tendon, hand OR finger, each tendon
26442	2	CPT	Tenolysis, flexor tendon; palm AND finger, each tendon
26440	7	CPT	Tenolysis, flexor tendon; palm OR finger, each tendon
26170	1	CPT	Excision of tendon, palm, flexor or extensor, single, each tendon
26145	2	CPT	Synovectomy, tendon sheath, radical (tenosynovectomy), flexor tendon, palm and/or finger, each tendon
26111	1	CPT	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; 1.5 cm or greater
26110	1	CPT	Arthrotomy with biopsy; interphalangeal joint, each
25442	1	CPT	Arthroplasty with prosthetic replacement; distal ulna
25355	1	CPT	Osteotomy, radius; middle or proximal third
25332	1	CPT	Arthroplasty, wrist, with or without interposition, with or without external or internal fixation
25310	1	CPT	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; each tendon
25295	6	CPT	Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon
24400	2	CPT	Osteotomy, humerus, with or without internal fixation
24370	3	CPT	Revision of total elbow arthroplasty, including allograft when performed; humeral or 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	1	CPT	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); debridement, soft tissue and/or bone, open
24345	1	CPT	Repair medial collateral ligament, elbow, with local tissue
24343	9	CPT	Repair lateral collateral ligament, elbow, with local tissue
24332	1	CPT	Tenolysis, triceps
24330	1	CPT	Flexor-plasty, elbow (eg, Steindler type advancement);

24310	2	CPT	Tenotomy, open, elbow to shoulder, each tendon
24301	2	CPT	Muscle or tendon transfer, any type, upper arm or elbow, single (excluding 24320-24331)
24102	1	CPT	Arthrotomy, elbow; with synovectomy
23800	1	CPT	Arthrodesis, glenohumeral joint;
23700	1	CPT	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)
23530	1	CPT	Open treatment of sternoclavicular dislocation, acute or chronic;
23515	1	CPT	Open treatment of clavicular fracture, includes internal fixation, when performed
23430	7	CPT	Tenodesis of long tendon of biceps
23397	1	CPT	Muscle transfer, any type, shoulder or upper arm; multiple
23395	3	CPT	Muscle transfer, any type, shoulder or upper arm; single
20600	1	CPT	Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance
15860	5	CPT	Intravenous injection of agent (eg, fluorescein) to test vascular flow in flap or graft
15847	1	CPT	Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical transposition and fascial plication) (List separately in addition to code for primary procedure)
14001	1	CPT	Adjacent tissue transfer or rearrangement, trunk; defect 10.1 sq cm to 30.0 sq cm
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)
13100	2	CPT	Repair, complex, trunk; 1.1 cm to 2.5 cm
11960	1	CPT	Insertion of tissue expander(s) for other than breast, including subsequent expansion
11047	2	CPT	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)
11046	15	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)
11045	1	CPT	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)
10121	2	CPT	Incision and removal of foreign body, subcutaneous tissues; complicated