

Code Summary Report

OrthoCarolina Program - 2633626061

Resident: Fellow 2

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



Area: HAND SURGERY Type: Amputation

Code	Code Count	Code Type	Description
26952	7	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	5	CPT	Amputation, metacarpal, with finger or thumb (ray amputation), single, with or without interosseous transfer
25931	1	CPT	Transmetacarpal amputation; re-amputation
25927	1	CPT	Transmetacarpal amputation;
25909	1	CPT	Amputation, forearm, through radius and ulna; re-amputation
25900	4	CPT	Amputation, forearm, through radius and ulna;
24925	1	CPT	Amputation, arm through humerus; secondary closure or scar revision
24920	1	CPT	Amputation, arm through humerus; open, circular (guillotine)

Area: HAND SURGERY Type: Congenital

Code	Code Count	Code Type	Description
26560	1	CPT	Repair of syndactyly (web finger) each web space; with skin flaps
26550	1	CPT	Pollicization of a digit

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

Code	Code Count	Code Type	Description
26160	18	CPT	Excision of lesion of tendon sheath or joint capsule (eg, cyst, mucous cyst, or ganglion), hand or finger
26055	78	CPT	Tendon sheath incision (eg, for trigger finger)
25118	1	CPT	Synovectomy, extensor tendon sheath, wrist, single compartment;
25116	2	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	5	CPT	Radical excision of bursa, synovia of wrist, or forearm tendon sheaths (eg, tenosynovitis, fungus, Tbc, or other granulomas, rheumatoid arthritis); flexors
25112	1	CPT	Excision of ganglion, wrist (dorsal or volar); recurrent
25111	29	CPT	Excision of ganglion, wrist (dorsal or volar); primary
25000	15	CPT	Incision, extensor tendon sheath, wrist (eg, de Quervains disease)
24105	5	CPT	Excision, olecranon bursa

Area: HAND SURGERY Type: Dupuytren's

Code	Code Count	Code Type	Description
26125	9	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	7	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	3	CPT	Fasciectomy, palm only, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)
26045	1	CPT	Fasciotomy, palmar (eg, Dupuytren's contracture); open, partial
26040	1	CPT	Fasciotomy, palmar (eg, Dupuytren's contracture); percutaneous

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

Code	Code Count	Code Type	Description
25652	1	CPT	Open treatment of ulnar styloid fracture
25575	6	CPT	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius AND ulna
25574	2	CPT	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius OR ulna
25545	3	CPT	Open treatment of ulnar shaft fracture, includes internal fixation, when performed
25515	2	CPT	Open treatment of radial shaft fracture, includes internal fixation, when performed
25420	2	CPT	Repair of nonunion or malunion, radius AND ulna; with autograft (includes obtaining graft)
25415	2	CPT	Repair of nonunion or malunion, radius AND ulna; without graft (eg, compression technique)
25405	3	CPT	Repair of nonunion or malunion, radius OR ulna; with autograft (includes obtaining graft)
25400	3	CPT	Repair of nonunion or malunion, radius OR ulna; without graft (eg, compression technique)
24685	2	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
24665	1	CPT	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed;
24635	3	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	3	CPT	Open treatment of acute or chronic elbow dislocation
24586	4	CPT	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius);
24579	1	CPT	Open treatment of humeral condylar fracture, medial or lateral, includes internal fixation, when performed
24575	1	CPT	Open treatment of humeral epicondylar fracture, medial or lateral, includes internal fixation, when performed
24546	2	CPT	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; with intercondylar extension
24515	6	CPT	Open treatment of humeral shaft fracture with plate/screws, with or without cerclage
23615	7	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
25490	2	CPT	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; radius
24366	2	CPT	Arthroplasty, radial head; with implant
24365	1	CPT	Arthroplasty, radial head;
24363	4	CPT	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (eg, total elbow)
24361	1	CPT	Arthroplasty, elbow; with distal humeral prosthetic replacement
24160	1	CPT	Removal of prosthesis, includes debridement and synovectomy when performed; humeral and ulnar components
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

Code	Code Count	Code Type	Description
26785	1	CPT	Open treatment of interphalangeal joint dislocation, includes internal fixation, when performed, single
26765	6	CPT	Open treatment of distal phalangeal fracture, finger or thumb, includes internal fixation, when performed, each
26756	1	CPT	Percutaneous skeletal fixation of distal phalangeal fracture, finger or thumb, each
26746	4	CPT	Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, includes internal fixation, when performed, each
26735	21	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
26715	1	CPT	Open treatment of metacarpophalangeal dislocation, single, includes internal fixation, when performed
26686	3	CPT	Open treatment of carpometacarpal dislocation, other than thumb; complex, multiple, or delayed reduction
26676	6	CPT	Percutaneous skeletal fixation of carpometacarpal dislocation, other than thumb, with manipulation, each joint
26665	2	CPT	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), includes internal fixation, when performed
26650	1	CPT	Percutaneous skeletal fixation of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation
26615	13	CPT	Open treatment of metacarpal fracture, single, includes internal fixation, when performed, each bone
26608	10	CPT	Percutaneous skeletal fixation of metacarpal fracture, each bone
26546	2	CPT	Repair non-union, metacarpal or phalanx (includes obtaining bone graft with or without external or internal fixation)
26541	4	CPT	Reconstruction, collateral ligament, metacarpophalangeal joint, single; with tendon or fascial graft (includes obtaining graft)
26540	3	CPT	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint

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

Code	Code Count	Code Type	Description
26862	2	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)
26861	3	CPT	Arthrodesis, interphalangeal joint, with or without internal fixation; each additional interphalangeal joint (List separately in addition to code for primary procedure)
26860	12	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	2	CPT	Arthrodesis, metacarpophalangeal joint, with or without internal fixation;
26593	7	CPT	Release, intrinsic muscles of hand, each muscle
26567	1	CPT	Osteotomy; phalanx of finger, each
26541	1	CPT	Reconstruction, collateral ligament, metacarpophalangeal joint, single; with tendon or fascial graft (includes obtaining graft)
26540	2	CPT	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint
26535	1	CPT	Arthroplasty, interphalangeal joint; each joint
26531	6	CPT	Arthroplasty, metacarpophalangeal joint; with prosthetic implant, each joint
26525	3	CPT	Capsulectomy or capsulotomy; interphalangeal joint, each joint
26520	8	CPT	Capsulectomy or capsulotomy; metacarpophalangeal joint, each joint
26500	1	CPT	Reconstruction of tendon pulley, each tendon; with local tissues (separate procedure)
25447	26	CPT	Arthroplasty, interposition, intercarpal or carpometacarpal joints

Area: HAND SURGERY Type: Nerve decompression

Code	Code Count	Code Type	Description
64722	2	CPT	Decompression; unspecified nerve(s) (specify)
64721	116	CPT	Neuroplasty and/or transposition; median nerve at carpal tunnel
64719	8	CPT	Neuroplasty and/or transposition; ulnar nerve at wrist
64718	40	CPT	Neuroplasty and/or transposition; ulnar nerve at elbow
64713	6	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	41	CPT	Neuroplasty, major peripheral nerve, arm or leg, open; other than specified
64704	4	CPT	Neuroplasty; nerve of hand or foot
64702	3	CPT	Neuroplasty; digital, 1 or both, same digit
29848	10	CPT	Endoscopy, wrist, surgical, with release of transverse carpal ligament

Area: HAND SURGERY Type: Nerve injury

Code	Code Count	Code Type	Description
64910	1	CPT	Nerve repair; with synthetic conduit or vein allograft (eg, nerve tube), each nerve
64905	37	CPT	Nerve pedicle transfer; first stage
64897	1	CPT	Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; up to 4 cm length
64892	4	CPT	Nerve graft (includes obtaining graft), single strand, arm or leg; up to 4 cm length
64876	2	CPT	Suture of nerve; requiring shortening of bone of extremity (List separately in addition to code for nerve suture)
64874	9	CPT	Suture of nerve; requiring extensive mobilization, or transposition of nerve (List separately in addition to code for nerve suture)
64861	3	CPT	Suture of; brachial plexus
64859	3	CPT	Suture of each additional major peripheral nerve (List separately in addition to code for primary procedure)
64857	13	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; without transposition
64856	27	CPT	Suture of major peripheral nerve, arm or leg, except sciatic; including transposition
64837	2	CPT	Suture of each additional nerve, hand or foot (List separately in addition to code for primary procedure)
64836	2	CPT	Suture of 1 nerve; ulnar motor
64834	1	CPT	Suture of 1 nerve; hand or foot, common sensory nerve
64832	6	CPT	Suture of digital nerve, hand or foot; each additional digital nerve (List separately in addition to code for primary procedure)
64831	23	CPT	Suture of digital nerve, hand or foot; 1 nerve
64784	1	CPT	Excision of neuroma; major peripheral nerve, except sciatic
64783	1	CPT	Excision of neuroma; hand or foot, each additional nerve, except same digit (List separately in addition to code for primary procedure)
64782	6	CPT	Excision of neuroma; hand or foot, except digital nerve
64776	1	CPT	Excision of neuroma; digital nerve, 1 or both, same digit

Area: HAND SURGERY Type: Tendon/muscle

Code	Code Count	Code Type	Description
26591	3	CPT	Repair, intrinsic muscles of hand, each muscle
26485	2	CPT	Transfer or transplant of tendon, palmar; without free tendon graft, each tendon
26478	4	CPT	Lengthening of tendon, flexor, hand or finger, each tendon
26437	3	CPT	Realignment of extensor tendon, hand, each tendon
26432	1	CPT	Closed treatment of distal extensor tendon insertion, with or without percutaneous pinning (eg, mallet finger)
26426	1	CPT	Repair of extensor tendon, central slip, secondary (eg, boutonniere deformity); using local tissue(s), including lateral band(s), each finger
26418	17	CPT	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon
26410	22	CPT	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon
26392	1	CPT	Removal of synthetic rod and insertion of flexor tendon graft, hand or finger (includes obtaining graft), each rod
26390	1	CPT	Excision flexor tendon, with implantation of synthetic rod for delayed tendon graft, hand or finger, each rod
26370	1	CPT	Repair or advancement of profundus tendon, with intact superficialis tendon; primary, each tendon
26357	1	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	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	11	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	6	CPT	Excision of tendon, finger, flexor or extensor, each tendon
25315	1	CPT	Flexor origin slide (eg, for cerebral palsy, Volkmann contracture), forearm and/or wrist;
25280	1	CPT	Lengthening or shortening of flexor or extensor tendon, forearm and/or wrist, single, each tendon
25275	4	CPT	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)
25272	4	CPT	Repair, tendon or muscle, extensor, forearm and/or wrist; secondary, single, each tendon or muscle
25270	14	CPT	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle
25260	26	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
24341	4	CPT	Repair, tendon or muscle, upper arm or elbow, each tendon or muscle, primary or secondary (excludes rotator cuff)
24305	1	CPT	Tendon lengthening, upper arm or elbow, each tendon
20926	1	CPT	Tissue grafts, other (eg, paratenon, fat, dermis)

Area: HAND SURGERY Type: Tumor/osteomyelitis

Code	Code Count	Code Type	Description
26230	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); metacarpal
26210	4	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	12	CPT	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; less than 1.5 cm
25150	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); ulna
25135	1	CPT	Excision or curettage of bone cyst or benign tumor of carpal bones; with autograft (includes obtaining graft)
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	1	CPT	Excision, tumor, soft tissue of forearm and/or wrist area, subfascial (eg, intramuscular); less than 3 cm
25066	1	CPT	Biopsy, soft tissue of forearm and/or wrist; deep (subfascial or intramuscular)
24138	3	CPT	Sequestrectomy (eg, for osteomyelitis or bone abscess), olecranon process
24136	1	CPT	Sequestrectomy (eg, for osteomyelitis or bone abscess), radial head or neck
24126	1	CPT	Excision or curettage of bone cyst or benign tumor of head or neck of radius or olecranon process; with allograft
24076	1	CPT	Excision, tumor, soft tissue of upper arm or elbow area, subfascial (eg, intramuscular); less than 5 cm
20205	1	CPT	Biopsy, muscle; deep
20200	1	CPT	Biopsy, muscle; superficial
11755	1	CPT	Biopsy of nail unit (eg, plate, bed, matrix, hyponychium, proximal and lateral nail folds) (separate procedure)
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
11400	1	CPT	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.5 cm or less

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

Code	Code Count	Code Type	Description
64822	1	CPT	Sympathectomy; ulnar artery
64821	1	CPT	Sympathectomy; radial artery
64820	1	CPT	Sympathectomy; digital arteries, each digit
35236	2	CPT	Repair blood vessel with vein graft; upper extremity
35207	3	CPT	Repair blood vessel, direct; hand, finger
35206	6	CPT	Repair blood vessel, direct; upper extremity
35045	1	CPT	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
15757	1	CPT	Free skin flap with microvascular anastomosis
15756	1	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
15220	1	CPT	Full thickness graft, free, including direct closure of donor site, scalp, arms, and/or legs; 20 sq cm or less
15101	21	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	14	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

Code	Code Count	Code Type	Description
13133	2	CPT	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; each additional 5 cm or less (List separately in addition to code for primary procedure)
13132	2	CPT	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; 2.6 cm to 7.5 cm
13131	1	CPT	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; 1.1 cm to 2.5 cm

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

Code	Code Count	Code Type	Description
26080	9	CPT	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; interphalangeal joint, each
26075	2	CPT	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; metacarpophalangeal joint, each
26037	1	CPT	Decompressive fasciotomy, hand (excludes 26035)
26034	1	CPT	Incision, bone cortex, hand or finger (eg, osteomyelitis or bone abscess)
26020	15	CPT	Drainage of tendon sheath, digit and/or palm, each
26011	2	CPT	Drainage of finger abscess; complicated (eg, felon)
23930	1	CPT	Incision and drainage, upper arm or elbow area; deep abscess or hematoma
20103	2	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	11	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	4	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	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; first 100 sq cm or 1% of body area of infants and children
11044	31	CPT	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); first 20 sq cm or less
11043	6	CPT	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); first 20 sq cm or less
11042	4	CPT	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq cm or less
11012	12	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
10061	41	CPT	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); complicated or multiple
10060	9	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	4	CPT	Muscle, myocutaneous, or fasciocutaneous flap; lower extremity
15736	7	CPT	Muscle, myocutaneous, or fasciocutaneous flap; upper extremity
15734	3	CPT	Muscle, myocutaneous, or fasciocutaneous flap; trunk
15574	1	CPT	Formation of direct or tubed pedicle, with or without transfer; forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands or feet
14350	1	CPT	Filletted finger or toe flap, including preparation of recipient site
14041	1	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

Area: HAND SURGERY Type: Wrist fracture/dislocation

Code	Code Count	Code Type	Description
25695	7	CPT	Open treatment of lunate dislocation
25685	2	CPT	Open treatment of trans-scaphoperilunar type of fracture dislocation
25670	2	CPT	Open treatment of radiocarpal or intercarpal dislocation, 1 or more bones
25652	3	CPT	Open treatment of ulnar styloid fracture
25651	1	CPT	Percutaneous skeletal fixation of ulnar styloid fracture
25645	7	CPT	Open treatment of carpal bone fracture (other than carpal scaphoid [navicular]), each bone
25628	6	CPT	Open treatment of carpal scaphoid (navicular) fracture, includes internal fixation, when performed
25609	72	CPT	Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation of 3 or more fragments
25608	16	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
25606	1	CPT	Percutaneous skeletal fixation of distal radial fracture or epiphyseal separation
25526	1	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
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	2	CPT	Excision distal ulna 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	2	CPT	Arthrodesis, wrist; limited, without bone graft (eg, intercarpal or radiocarpal)
25800	1	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)
25390	2	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
25320	2	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
25240	2	CPT	Excision distal ulna partial or complete (eg, Darrach type or matched resection)
25230	1	CPT	Radial styloidectomy (separate procedure)
25210	7	CPT	Carpectomy; 1 bone
25105	3	CPT	Arthrotomy, wrist joint; with synovectomy
25085	2	CPT	Capsulotomy, wrist (eg, contracture)

Area: ARTHROSCOPY Type: Elbow

Code	Code Count	Code Type	Description
29838	5	CPT	Arthroscopy, elbow, surgical; debridement, extensive
29834	3	CPT	Arthroscopy, elbow, surgical; with removal of loose body or foreign body
29830	3	CPT	Arthroscopy, elbow, diagnostic, with or without synovial biopsy (separate procedure)

Area: ARTHROSCOPY Type: Shoulder

Code	Code Count	Code Type	Description
29828	1	CPT	Arthroscopy, shoulder, surgical; biceps tenodesis
29827	9	CPT	Arthroscopy, shoulder, surgical; with rotator cuff repair
29826	8	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	2	CPT	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation
29824	1	CPT	Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)
29823	6	CPT	Arthroscopy, shoulder, surgical; debridement, extensive
29807	1	CPT	Arthroscopy, shoulder, surgical; repair of SLAP lesion
29806	3	CPT	Arthroscopy, shoulder, surgical; capsulorrhaphy
29805	8	CPT	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)

Area: ARTHROSCOPY Type: Wrist

Code	Code Count	Code Type	Description
29846	4	CPT	Arthroscopy, wrist, surgical; excision and/or repair of triangular fibrocartilage and/or joint debridement
29845	7	CPT	Arthroscopy, wrist, surgical; synovectomy, complete
29844	3	CPT	Arthroscopy, wrist, surgical; synovectomy, partial
29840	9	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	5	CPT	Bone graft, any donor area; major or large
20900	3	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
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
26720	1	CPT	Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; without manipulation, each
26607	1	CPT	Closed treatment of metacarpal fracture, with manipulation, with external fixation, each bone
26605	1	CPT	Closed treatment of metacarpal fracture, single; with manipulation, each bone
25650	1	CPT	Closed treatment of ulnar styloid fracture
25630	1	CPT	Closed treatment of carpal bone fracture (excluding carpal scaphoid [navicular]); without manipulation, each bone
25600	1	CPT	Closed treatment of distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, includes closed treatment of fracture of ulnar styloid, when performed; 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	6	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)
20670	1	CPT	Removal of implant; superficial (eg, buried wire, pin or rod) (separate procedure)
11983	1	CPT	Removal with reinsertion, non-biodegradable drug delivery implant
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	8	CPT	Repair of nail bed
11750	3	CPT	Excision of nail and nail matrix, partial or complete (eg, ingrown or deformed nail), for permanent removal
11730	1	CPT	Avulsion of nail plate, partial or complete, simple; single

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

Code	Code Count	Code Type	Description
97606	2	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	3	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
76942	1	CPT	Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation
69990	8	CPT	Microsurgical techniques, requiring use of operating microscope (List separately in addition to code for primary procedure)
64912	1	CPT	Nerve repair; with nerve allograft, each nerve, first strand (cable)
64795	3	CPT	Biopsy of nerve
64772	3	CPT	Transection or avulsion of other spinal nerve, extradural
64450	1	CPT	Injection, anesthetic agent; other peripheral nerve or branch
28120	1	CPT	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); talus or calcaneus
27620	1	CPT	Arthrotomy, ankle, with joint exploration, with or without biopsy, with or without removal of loose or foreign body
27603	1	CPT	Incision and drainage, leg or ankle; deep abscess or hematoma
27303	1	CPT	Incision, deep, with opening of bone cortex, femur or knee (eg, osteomyelitis or bone abscess)
26510	3	CPT	Cross intrinsic transfer, each tendon
26496	1	CPT	Opponensplasty; other methods
26490	1	CPT	Opponensplasty; superficialis tendon transfer type, each tendon
26483	2	CPT	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; with free tendon graft (includes obtaining graft), each tendon
26480	24	CPT	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; without free graft, each tendon
26471	1	CPT	Tenodesis; of proximal interphalangeal joint, each joint
26449	2	CPT	Tenolysis, complex, extensor tendon, finger, including forearm, each tendon
26445	4	CPT	Tenolysis, extensor tendon, hand OR finger, each tendon
26440	5	CPT	Tenolysis, flexor tendon; palm OR finger, each tendon
26145	10	CPT	Synovectomy, tendon sheath, radical (tenosynovectomy), flexor tendon, palm and/or finger, each tendon
26113	1	CPT	Excision, tumor, soft tissue, or vascular malformation, of hand or finger, subfascial (eg, intramuscular); 1.5 cm or greater
25442	1	CPT	Arthroplasty with prosthetic replacement; distal ulna
25392	1	CPT	Osteoplasty, radius AND ulna; shortening (excluding 64876)
25360	1	CPT	Osteotomy; ulna
25312	2	CPT	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; with tendon graft(s) (includes obtaining graft), each tendon
25310	7	CPT	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; each tendon
25295	16	CPT	Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon
25101	1	CPT	Arthrotomy, wrist joint; with joint exploration, with or without biopsy, with or without removal of loose or foreign body
24435	1	CPT	Repair of nonunion or malunion, humerus; with iliac or other autograft (includes obtaining graft)
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	3	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
24346	2	CPT	Reconstruction medial collateral ligament, elbow, with tendon graft (includes harvesting of graft)

24344	1	CPT	Reconstruction lateral collateral ligament, elbow, with tendon graft (includes harvesting of graft)
24343	7	CPT	Repair lateral collateral ligament, elbow, with local tissue
24330	1	CPT	Flexor-plasty, elbow (eg, Steindler type advancement);
24301	3	CPT	Muscle or tendon transfer, any type, upper arm or elbow, single (excluding 24320-24331)
24101	1	CPT	Arthrotomy, elbow; with joint exploration, with or without biopsy, with or without removal of loose or foreign body
24100	1	CPT	Arthrotomy, elbow; with synovial biopsy only
24000	3	CPT	Arthrotomy, elbow, including exploration, drainage, or removal of foreign body
23800	3	CPT	Arthrodesis, glenohumeral joint;
23515	3	CPT	Open treatment of clavicular fracture, includes internal fixation, when performed
23480	1	CPT	Osteotomy, clavicle, with or without internal fixation;
23430	15	CPT	Tenodesis of long tendon of biceps
23395	2	CPT	Muscle transfer, any type, shoulder or upper arm; single
23335	1	CPT	Removal of prosthesis, includes debridement and synovectomy when performed; humeral and glenoid components (eg, total shoulder)
23182	1	CPT	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), scapula
23174	2	CPT	Sequestrectomy (eg, for osteomyelitis or bone abscess), humeral head to surgical neck
23172	1	CPT	Sequestrectomy (eg, for osteomyelitis or bone abscess), scapula
23031	1	CPT	Incision and drainage, shoulder area; infected bursa
20600	1	CPT	Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance
20526	5	CPT	Injection, therapeutic (eg, local anesthetic, corticosteroid), carpal tunnel
17999	3	CPT	Unlisted procedure, skin, mucous membrane and subcutaneous tissue
15860	11	CPT	Intravenous injection of agent (eg, fluorescein) to test vascular flow in flap or graft
15777	1	CPT	Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk) (List separately in addition to code for primary procedure)
14302	4	CPT	Adjacent tissue transfer or rearrangement, any area; each additional 30.0 sq cm, or part thereof (List separately in addition to code for primary procedure)
14301	4	CPT	Adjacent tissue transfer or rearrangement, any area; defect 30.1 sq cm to 60.0 sq cm
13102	1	CPT	Repair, complex, trunk; each additional 5 cm or less (List separately in addition to code for primary procedure)
11047	3	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	11	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	8	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)