**2014 OB GYN: Is the Surgery Medicare Inpatient Only or not?**

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***Perineum/Vulva***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
| 11004 | Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia and perineum | 56405 | Incision and drainage of vulva or perineal abscess |
| 11005 | Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; abdominal wall, with or without fascial closure | 56420 | Incision and drainage of Bartholin's gland abscess |
| 11006 | Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia, perineum and abdominal wall, with or without fascial closure | 56440 | Marsupialization of Bartholin's gland cyst |
|  |  | 56441 | Lysis of labial adhesions |
|  |  | 56442 | Hymenotomy, simple incision |
|  |  | 56501 | Destruction of lesion(s), vulva; simple (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery) |
|  |  | 56515 | Destruction of lesion(s), vulva; extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery) |
|  |  | 56605 | Biopsy of vulva or perineum (separate procedure); 1 lesion |
| 56630 | Vulvectomy, radical, partial; | 56620 | Vulvectomy simple; partial |
| 56631 | Vulvectomy, radical, partial; with unilateral inguinofemoral lymphadenectomy | 56625 | Vulvectomy simple; complete |
| 56632 | Vulvectomy, radical, partial; with bilateral inguinofemoral lymphadenectomy |  |  |
| 56633 | Vulvectomy, radical, complete; |  |  |
| 56634 | Vulvectomy, radical, complete; with unilateral inguinofemoral lymphadenectomy |  |  |
| 56637 | Vulvectomy, radical, complete; with bilateral inguinofemoral lymphadenectomy |  |  |
| 56640 | Vulvectomy, radical, complete, with inguinofemoral, iliac, and pelvic lymphadenectomy | 56700 | Partial hymenectomy or revision of hymenal ring |
|  |  | 56740 | Excision of Bartholin's gland or cyst |
|  |  | 56800 | Plastic repair of introitus |
|  |  | 56805 | Clitoroplasty for intersex state |
|  |  | 56810 | Perineoplasty, repair of perineum, nonobstetrical (separate procedure) |
|  |  | 56820 | Colposcopy of the vulva; |
|  |  | 56821 | Colposcopy of the vulva; with biopsy(s) |

***Vagina***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 57000 | Colpotomy; with exploration |
|  |  | 57010 | Colpotomy; with drainage of pelvic abscess |
|  |  | 57020 | Colpocentesis (separate procedure) |
|  |  | 57022 | Incision and drainage of vaginal hematoma; obstetrical/postpartum |
|  |  | 57023 | Incision and drainage of vaginal hematoma; non-obstetrical (eg, post-trauma, spontaneous bleeding) |
|  |  | 57061 | Destruction of vaginal lesion(s); simple (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery) |
|  |  | 57065 | Destruction of vaginal lesion(s); extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery) |
|  |  | 57100 | Biopsy of vaginal mucosa; simple (separate procedure) |
|  |  | 57105 | Biopsy of vaginal mucosa; extensive, requiring suture (including cysts) |
|  |  | 57106 | Vaginectomy, partial removal of vaginal wall; |
| 57110 | Vaginectomy, complete removal of vaginal wall; | 57107 | Vaginectomy, partial removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) |
| 57111 | Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) |  |  |
| 57112 | Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy) | 57109 | Vaginectomy, partial removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy) |
|  |  | 57120 | Colpocleisis (Le Fort type) |
|  |  | 57130 | Excision of vaginal septum |
|  |  | 57135 | Excision of vaginal cyst or tumor |
|  |  | 57150 | Irrigation of vagina and/or application of medicament for treatment of bacterial, parasitic, or fungoid disease |
|  |  | 57155 | Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy |
|  |  | 57156 | Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy |
|  |  | 57160 | Fitting and insertion of pessary or other intravaginal support device |
|  |  | 57170 | Diaphragm or cervical cap fitting with instructions |
|  |  | 57180 | Introduction of any hemostatic agent or pack for spontaneous or traumatic nonobstetrical vaginal hemorrhage (separate procedure) |
|  |  | 57200 | Colporrhaphy, suture of injury of vagina (nonobstetrical) |
|  |  | 57210 | Colpoperineorrhaphy, suture of injury of vagina and/or perineum (nonobstetrical) |
|  |  | 57220 | Plastic operation on urethral sphincter, vaginal approach (eg, Kelly urethral plication) |
|  |  | 57230 | Plastic repair of urethrocele |
|  |  | 57240 | Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele |
|  |  | 57250 | Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy |
|  |  | 57260 | Combined anteroposterior colporrhaphy; |
|  |  | 57265 | Combined anteroposterior colporrhaphy; with enterocele repair |
| 57270 | Repair of enterocele, abdominal approach (separate procedure) | 57268 | Repair of enterocele, vaginal approach (separate procedure) |
| 57280 | Colpopexy, abdominal approach | 57282 | Colpopexy, vaginal; extra-peritoneal approach (sacrospinous, iliococcygeus) |
|  |  | 57283 | Colpopexy, vaginal; intra-peritoneal approach (uterosacral, levator myorrhaphy) |
|  |  | 57284 | Paravaginal defect repair (including repair of cystocele, if performed); open abdominal approach |
|  |  | 57285 | Paravaginal defect repair (including repair of cystocele, if performed); vaginal approach |
|  |  | 57287 | Removal or revision of sling for stress incontinence (eg, fascia or synthetic) |
|  |  | 57288 | Sling operation for stress incontinence (eg, fascia or synthetic) |
|  |  | 57289 | Pereyra procedure, including anterior colporrhaphy |
|  |  | 57291 | Construction of artificial vagina; without graft |
|  |  | 57292 | Construction of artificial vagina; with graft |
| 57296 | Revision (including removal) of prosthetic vaginal graft; open abdominal approach | 57295 | Revision (including removal) of prosthetic vaginal graft; vaginal approach |
| 57305 | Closure of rectovaginal fistula; abdominal approach | 57300 | Closure of rectovaginal fistula; vaginal or transanal approach |
| 57307 | Closure of rectovaginal fistula; abdominal approach, with concomitant colostomy |  |  |
| 57308 | Closure of rectovaginal fistula; transperineal approach, with perineal body reconstruction, with or without levator plication | 57310 | Closure of urethrovaginal fistula; |
| 57311 | Closure of urethrovaginal fistula; with bulbocavernosus transplant | 57320 | Closure of vesicovaginal fistula; vaginal approach |
|  |  | 57330 | Closure of vesicovaginal fistula; transvesical and vaginal approach |
|  |  | 57335 | Vaginoplasty for intersex state |
|  |  | 57400 | Dilation of vagina under anesthesia (other than local) |
|  |  | 57410 | Pelvic examination under anesthesia (other than local) |
|  |  | 57415 | Removal of impacted vaginal foreign body (separate procedure) under anesthesia (other than local) |
|  |  | 57420 | Colposcopy of the entire vagina, with cervix if present; |
|  |  | 57421 | Colposcopy of the entire vagina, with cervix if present; with biopsy(s) of vagina/cervix |
|  |  | 57423 | Paravaginal defect repair (including repair of cystocele, if performed), laparoscopic approach |
|  |  | 57425 | Laparoscopy, surgical, colpopexy (suspension of vaginal apex) |
|  |  | 57426 | Revision (including removal) of prosthetic vaginal graft, laparoscopic approach |

***Cervix***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 57452 | Colposcopy of the cervix including upper/adjacent vagina; |
|  |  | 57454 | Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix and endocervical curettage |
|  |  | 57455 | Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix |
|  |  | 57456 | Colposcopy of the cervix including upper/adjacent vagina; with endocervical curettage |
|  |  | 57460 | Colposcopy of the cervix including upper/adjacent vagina; with loop electrode biopsy(s) of the cervix |
|  |  | 57461 | Colposcopy of the cervix including upper/adjacent vagina; with loop electrode conization of the cervix |
|  |  | 57500 | Biopsy of cervix, single or multiple, or local excision of lesion, with or without fulguration (separate procedure) |
|  |  | 57505 | Endocervical curettage (not done as part of a dilation and curettage) |
|  |  | 57510 | Cautery of cervix; electro or thermal |
|  |  | 57511 | Cautery of cervix; cryocautery, initial or repeat |
|  |  | 57513 | Cautery of cervix; laser ablation |
|  |  | 57520 | Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; cold knife or laser |
|  |  | 57522 | Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; loop electrode excision |
| 57531 | Radical trachelectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling biopsy, with or without removal of tube(s), with or without removal of ovary(s) | 57530 | Trachelectomy (cervicectomy), amputation of cervix (separate procedure) |
| 57540 | Excision of cervical stump, abdominal approach; |  |  |
| 57545 | Excision of cervical stump, abdominal approach; with pelvic floor repair | 57550 | Excision of cervical stump, vaginal approach; |
|  |  | 57555 | Excision of cervical stump, vaginal approach; with anterior and/or posterior repair |
|  |  | 57556 | Excision of cervical stump, vaginal approach; with repair of enterocele |
|  |  | 57558 | Dilation and curettage of cervical stump |
|  |  | 57700 | Cerclage of uterine cervix, nonobstetrical |
|  |  | 57720 | Trachelorrhaphy, plastic repair of uterine cervix, vaginal approach |
|  |  | 57800 | Dilation of cervical canal, instrumental (separate procedure) |

***Uterine/Endometrial***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 0071T | Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue |
|  |  | 0072T | Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue |
|  |  | 0336T | Laparoscopy, surgical, ablation of uterine fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency |
|  |  | 58100 | Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure) |
|  |  | 58120 | Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical) |
| 58140 | Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; abdominal approach | 58145 | Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; vaginal approach |
| 58146 | Myomectomy, excision of fibroid tumor(s) of uterus, 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g, abdominal approach |  |  |
| 58150 | Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); |  |  |
| 58152 | Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocystopexy (eg, Marshall-Marchetti-Krantz, Burch) |  |  |
| 58180 | Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s) |  |  |
| 58200 | Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s) |  |  |
| 58210 | Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s) |  |  |
| 58240 | Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof | 58260 | Vaginal hysterectomy, for uterus 250 g or less; |
|  |  | 58262 | Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s) |
| 58267 | Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control | 58263 | Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele |
| 58275 | Vaginal hysterectomy, with total or partial vaginectomy; | 58270 | Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele |
| 58280 | Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele |  |  |
| 58285 | Vaginal hysterectomy, radical (Schauta type operation) | 58290 | Vaginal hysterectomy, for uterus greater than 250 g; |
|  |  | 58291 | Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s) |
| 58293 | Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control | 58292 | Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele |
|  |  | 58294 | Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele |
|  |  | 58301 | Removal of intrauterine device (IUD) |
|  |  | 58345 | Transcervical introduction of fallopian tube catheter for diagnosis and/or re-establishing patency (any method), with or without hysterosalpingography |
|  |  | 58346 | Insertion of Heyman capsules for clinical brachytherapy |
|  |  | 58353 | Endometrial ablation, thermal, without hysteroscopic guidance |
| 58400 | Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; (separate procedure) | 58356 | Endometrial cryoablation with ultrasonic guidance, including endometrial curettage, when performed |
| 58410 | Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; with presacral sympathectomy |  |  |
| 58520 | Hysterorrhaphy, repair of ruptured uterus (nonobstetrical) |  |  |
| 58540 | Hysteroplasty, repair of uterine anomaly (Strassman type) | 58541 | Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; |
|  |  | 58542 | Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s) |
|  |  | 58543 | Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; |
|  |  | 58544 | Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s) |
|  |  | 58545 | Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas |
| 58548 | Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed | 58546 | Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g |
|  |  | 58550 | Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; |
|  |  | 58552 | Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s) |
|  |  | 58553 | Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; |
|  |  | 58554 | Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s) |
|  |  | 58555 | Hysteroscopy, diagnostic (separate procedure) |
|  |  | 58558 | Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D & C |
|  |  | 58559 | Hysteroscopy, surgical; with lysis of intrauterine adhesions (any method) |
|  |  | 58560 | Hysteroscopy, surgical; with division or resection of intrauterine septum (any method) |
|  |  | 58561 | Hysteroscopy, surgical; with removal of leiomyomata |
|  |  | 58562 | Hysteroscopy, surgical; with removal of impacted foreign body |
|  |  | 58563 | Hysteroscopy, surgical; with endometrial ablation (eg, endometrial resection, electrosurgical ablation, thermoablation) |
|  |  | 58565 | Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants |
|  |  | 58570 | Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; |
|  |  | 58571 | Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s) |
|  |  | 58572 | Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; |
|  |  | 58573 | Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s) |
|  |  | 58578 | Unlisted laparoscopy procedure, uterus |
|  |  | 58579 | Unlisted hysteroscopy procedure, uterus |

***Fallopian Tube/Ovary***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 58350 | Chromotubation of oviduct, including materials |
| 58605 | Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure) | 58600 | Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral |
| 58611 | Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure) | 58615 | Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach |
| 58700 | Salpingectomy, complete or partial, unilateral or bilateral (separate procedure) | 58661 | Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy) |
| 58720 | Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure) | 58662 | Laparoscopy, surgical; with fulguration or excision of lesions of the ovary, pelvic viscera, or peritoneal surface by any method |
| 58740 | Lysis of adhesions (salpingolysis, ovariolysis) | 58660 | Laparoscopy, surgical; with lysis of adhesions (salpingolysis, ovariolysis) (separate procedure) |
| 58750 | Tubotubal anastomosis | 58670 | Laparoscopy, surgical; with fulguration of oviducts (with or without transection) |
| 58752 | Tubouterine implantation | 58671 | Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring) |
| 58760 | Fimbrioplasty | 58672 | Laparoscopy, surgical; with fimbrioplasty |
|  |  | 58673 | Laparoscopy, surgical; with salpingostomy (salpingoneostomy) |
|  |  | 58679 | Unlisted laparoscopy procedure, oviduct, ovary |
|  |  | 58770 | Salpingostomy (salpingoneostomy) |
|  |  | 58800 | Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); vaginal approach |
|  |  | 58805 | Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); abdominal approach |
| 58822 | Drainage of ovarian abscess; abdominal approach | 58820 | Drainage of ovarian abscess; vaginal approach, open |
| 58825 | Transposition, ovary(s) | 58900 | Biopsy of ovary, unilateral or bilateral (separate procedure) |
|  |  | 58920 | Wedge resection or bisection of ovary, unilateral or bilateral |
| 58940 | Oophorectomy, partial or total, unilateral or bilateral; | 58925 | Ovarian cystectomy, unilateral or bilateral |
|  |  | 58999 | Unlisted procedure, female genital system (nonobstetrical) |

***Gynecologic Oncology***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
| 58943 | Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy |  |  |
| 58950 | Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; |  |  |
| 58951 | Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy |  |  |
| 58952 | Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors) |  |  |
| 58953 | Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; |  |  |
| 58954 | Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy |  |  |
| 58956 | Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy |  |  |
| 58957 | Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; |  |  |
| 58958 | Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy |  |  |
| 58960 | Laparotomy, for staging or restaging of ovarian, tubal, or primary peritoneal malignancy (second look), with or without omentectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneum, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy |  |  |

***Assisted Reproductive Technology***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 0058T | Cryopreservation; reproductive tissue, ovarian |
|  |  | 0059T | Cryopreservation; oocyte(s) |
|  |  | 58321 | Artificial insemination; intra-cervical |
|  |  | 58322 | Artificial insemination; intra-uterine |
|  |  | 58323 | Sperm washing for artificial insemination |
|  |  | 58970 | Follicle puncture for oocyte retrieval, any method |
|  |  | 58974 | Embryo transfer, intrauterine |
|  |  | 58976 | Gamete, zygote, or embryo intrafallopian transfer, any method |
|  |  | 59866 | Multifetal pregnancy reduction(s) (MPR) |

***Obstetrical/Pregnancy***

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| Inpatient Only Procedure | | Not an Inpatient Only Procedure | |
|  |  | 59000 | Amniocentesis; diagnostic |
|  |  | 59001 | Amniocentesis; therapeutic amniotic fluid reduction (includes ultrasound guidance) |
|  |  | 59012 | Cordocentesis (intrauterine), any method |
|  |  | 59015 | Chorionic villus sampling, any method |
|  |  | 59020 | Fetal contraction stress test |
|  |  | 59025 | Fetal non-stress test |
|  |  | 59030 | Fetal scalp blood sampling |
|  |  | 59070 | Transabdominal amnioinfusion, including ultrasound guidance |
|  |  | 59072 | Fetal umbilical cord occlusion, including ultrasound guidance |
|  |  | 59074 | Fetal fluid drainage (eg, vesicocentesis, thoracocentesis, paracentesis), including ultrasound guidance |
|  |  | 59076 | Fetal shunt placement, including ultrasound guidance |
| 59120 | Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach | 59100 | Hysterotomy, abdominal (eg, for hydatidiform mole, abortion) |
| 59121 | Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy |  |  |
| 59130 | Surgical treatment of ectopic pregnancy; abdominal pregnancy |  |  |
| 59135 | Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy |  |  |
| 59136 | Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus |  |  |
| 59140 | Surgical treatment of ectopic pregnancy; cervical, with evacuation | 59150 | Laparoscopic treatment of ectopic pregnancy; without salpingectomy and/or oophorectomy |
|  |  | 59151 | Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy |
|  |  | 59160 | Curettage, postpartum |
|  |  | 59200 | Insertion of cervical dilator (eg, laminaria, prostaglandin) (separate procedure) |
|  |  | 59300 | Episiotomy or vaginal repair, by other than attending |
| 59325 | Cerclage of cervix, during pregnancy; abdominal | 59320 | Cerclage of cervix, during pregnancy; vaginal |
| 59350 | Hysterorrhaphy of ruptured uterus | 59409 | Vaginal delivery only (with or without episiotomy and/or forceps); |
|  |  | 59412 | External cephalic version, with or without tocolysis |
| 59514 | Cesarean delivery only; | 59414 | Delivery of placenta (separate procedure) |
| 59525 | Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure) | 59612 | Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps); |
| 59620 | Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery; | 59812 | Treatment of incomplete abortion, any trimester, completed surgically |
|  |  | 59820 | Treatment of missed abortion, completed surgically; first trimester |
| 59830 | Treatment of septic abortion, completed surgically | 59821 | Treatment of missed abortion, completed surgically; second trimester |
|  |  | 59840 | Induced abortion, by dilation and curettage |
| 59850 | Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; | 59841 | Induced abortion, by dilation and evacuation |
| 59851 | Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation |  |  |
| 59852 | Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed intra-amniotic injection) |  |  |
| 59855 | Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; |  |  |
| 59856 | Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation |  |  |
| 59857 | Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed medical evacuation) | 59866 | Multifetal pregnancy reduction(s) (MPR) |
|  |  | 59870 | Uterine evacuation and curettage for hydatidiform mole |
|  |  | 59871 | Removal of cerclage suture under anesthesia (other than local) |
|  |  | 59897 | Unlisted fetal invasive procedure, including ultrasound guidance, when performed |
|  |  | 59898 | Unlisted laparoscopy procedure, maternity care and delivery |
|  |  | 59899 | Unlisted procedure, maternity care and delivery |