

Patient Name:\_\_\_\_\_ DOB\_\_\_\_\_ Date\_\_\_\_\_ Age\_\_\_\_\_

- ☐ - 57 Modifier: Initial decision for 90-day global same day surgery
- ☐ 46040 An abscessed area is noted in the deep perirectal tissues surrounding the anus. A small incision < 1cm is made over an area of pronounced fluctuance. A milking of the perirectal tissue is performed to drain as much pus as possible through the incision site, which relieves the pain. The area is then covered by a thick gauze pad and left to heal by secondary intention.
- ☐ 46200 A fissure, crack, or tear is noted in the distal anal canal, lined with grey fibrous tissue. With a palmar surface against the gluteal wall, the fissure was pulled outward. The entire pathologic tissue was vaporized and excised and the fissure base was cauterized.
- ☐ 46250 External hemorrhoidectomy ≥ 2 columns: A small excision of anoderm (about 5-10 mm round) is made with a scissors or CO2 laser. The hemorrhoid is then cored out sub-dermally (underneath the skin). The skin edges are trimmed to reduce skin tag formation. The area is then covered by a gauze pad and left to heal by secondary intention.
- ☐ 46255 Internal & external hemorrhoidectomy 1 column: ↓ see below
- ☐ 46260 Internal & external hemorrhoidectomy ≥ 2 columns:
  - In the hemorrhoid areas treated, a small excision of anoderm (about 5-10 mm round) is made with a scissors or a CO2 laser.
  - ☐ SUBDERMAL EXCISION: The hemorrhoid is then excised, cored out sub-dermally from underneath the skin and mucosa using a blunt dissection technique.
  - ☐ FULL EXCISION: The hemorrhoid is then excised completely, including the skin and mucosa using a blunt dissection technique.
  - Electro and or laser cautery is applied. A pressure dressing is then applied to compress dead space and prevent hematoma and seroma formation. The wound heals by secondary intention
- ☐ 46270 Fistulotomy Subcutaneous: A probe is inserted into an infected tunnel between the skin and the muscular opening at the end of the digestive tract (anus). A lengthwise incision is made along the top of the probe to open the anal fistula, draining any pus or other fluid, and merging the fistula tract with the anal canal to allow the fistula to heal. The area is then covered by a gauze pad and left to heal by secondary intention.
  - ☐ 46275 Fistulotomy Submuscular: Same as the above↑, with the difference being the depth of the probe insertion and incision, which included a small amount of sphincter muscle fibers.
- ☐ 46930 Destruction of internal hemorrhoid by thermal energy: CO2 infrared laser light is used as a heat source to quickly coagulate, or clot, vessels supplying blood to the hemorrhoid causing it to shrink and recede.
- ☐ 46945 Internal hemorrhoid vascular ligation through anoscope using 3-0 chromic, 1 column.
- ☐ 20552 Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s): Multiple trigger point injections to Sphincter muscle with taunt palpable band (Subcutaneous, Superficialis & Profundis) alleviated Myalgia by injection to area. 1cc\*
- ☐ 98925 Osteopathic manipulative treatment (OMT); 1-2 body regions involved: Physician applied Manual treatment to eliminate or alleviate somatic dysfunction. OMT to Pelvis with good results.

Rick Shacket, DO MD (H)\_\_\_\_\_