

FEMALE GENITAL SYSTEM

CPT codes from this section of the CPT coding system are used to report invasive and surgical procedures performed on the perineum; vulva and introitus; vagina; cervix uteri; corpus uteri; oviduct and ovarium. In vitro fertilization is also coded using CPT codes 58970-58976 from this section.

When coding the removal of multiple vulva or perineal lesions, multiple lesions are coded with multiple codes.

When coding for the insertion of vaginal pessaries, code for the pessary itself (A4560) if purchased by the physician's office.

Select the code describing the excision procedure performed on the specific anatomic site to report LEEP (Loop Electrosurgical Excision Procedure) performed on an anatomic site other than the cervix (57460 and 57522).

Do not code pelvic examination under anesthesia (57410) when D & C or cervical circumferential biopsies with D & Cs are performed. In fact, pelvic examinations under anesthesia (57410) should not be coded separately when any other procedures are performed.

For pelvic laparotomy, use 49000. For excision or destruction of endometriomas, open method, see 49200, 49201. For paracentesis, see 49080, 49081. For secondary closure of abdominal wall evisceration or disruption, use 49900. For fulguration or excision of lesions, laparoscopic approach, use 58662. For chemotherapy, see 96400-96549.

VULVA, PERINEUM AND INTROITUS

56405 Incision and drainage of vulva or perineal abscess

Medicare Policies: minor surgical procedure-followup period is 10 days, standard payment adjustment rules for multiple procedures apply, 150% payment adjustment for bilateral procedures does not apply, assistant surgeon is not paid

Linked Diagnosis Codes:

- 221.2** Benign neoplasm of vulva
- 239.5** Neoplasm of unspecified nature of other genitourinary organs
- 616.10** Vaginitis and vulvovaginitis unspecified
- 616.2** Cyst of bartholin's gland
- 616.3** Abscess of bartholin's gland
- 616.4** Other abscess of vulva
- 616.50** Ulceration of vulva unspecified
- 616.9** Unspecified inflammatory disease of cervix vagina and vulva
- 624.8** Other specified noninflammatory disorders of vulva and perineum
- 624.9** Unspecified noninflammatory disorder of vulva and perineum
- 625.8** Other specified symptoms associated with female genital organs
- 627.2** Symptomatic menopausal or female climacteric states
- 629.8*** Other specified disorders of female genital organs
- 682.2** Cellulitis and abscess of trunk
- 682.9** Cellulitis and abscess of unspecified sites

704.8 Other specified diseases of hair and hair follicles

706.2 Sebaceous cyst

NCCI Column 2 codes with modifier indicators:

00940^N, 36000^A, 36410^A, 37202^A, 56440^A, 56605^N, 56820^N, 57100^A, 57180^A, 57500^A, 62318^A, 62319^A, 64415^A, 64416^A, 64417^A, 64430^A, 64435^A, 64450^A, 64470^A, 64475^A, 69990^N, 90760^A, 90765^A, 90772^A, 90774^A, 90775^A, J2001^A

56420 Incision and drainage of bartholin's gland abscess

For incision and drainage of Skene's gland abscess or cyst, see 53060.

Medicare Policies: minor surgical procedure-followup period is 10 days, standard payment adjustment rules for multiple procedures apply, 150% payment adjustment for bilateral procedures does not apply, assistant surgeon is not paid

Linked Diagnosis Codes:

616.2 Cyst of bartholin's gland

616.3 Abscess of bartholin's gland

616.4 Other abscess of vulva

NCCI Column 2 codes with modifier indicators:

00940^N, 36000^A, 36410^A, 37202^A, 56405^A, 56440^A, 56605^N, 56820^N, 57100^A, 57180^A, 57500^A, 62318^A, 62319^A, 64415^A, 64416^A, 64417^A, 64430^A, 64435^A, 64450^A, 64470^A, 64475^A, 69990^N, 90760^A, 90765^A, 90772^A, 90774^A, 90775^A, J2001^A

56440 Marsupialization of bartholin's gland cyst

Medicare Policies: minor surgical procedure-followup period is 10 days, standard payment adjustment rules for multiple procedures apply, 150% payment adjustment for bilateral procedures does not apply, assistant surgeon is not paid

Linked Diagnosis Codes:

616.2 Cyst of bartholin's gland

616.3 Abscess of bartholin's gland

NCCI Column 2 codes with modifier indicators:

00940^N, 36000^A, 36410^A, 37202^A, 56605^N, 56820^N, 57100^A, 57180^A, 57500^A, 62318^A, 62319^A, 64415^A, 64416^A, 64417^A, 64430^A, 64435^A, 64450^A, 64470^A, 64475^A, 69990^N, 90760^A, 90765^A, 90772^A, 90774^A, 90775^A, J2001^A

56441 Lysis of labial adhesions

Medicare Policies: minor surgical procedure-followup period is 10 days, standard payment adjustment rules for multiple procedures apply, 150% payment adjustment for bilateral procedures does not apply, payment for assistant surgeon subject to documentation of medical necessity