

ANNEX 11. LIST OF ALTERNATIVE DOCUMENTS FOR RECORD OF OPERATIVE OR SURGICAL TECHNIQUE

RVS CODE	DESCRIPTION	REQUIREMENT
77401	Radiation treatment delivery (Linear Accelerator)	none ; operating room and anesthesia records are waived
77401	Radiation treatment delivery (Cobalt Accelerator)	none ; operating room and anesthesia records are waived
90945	Dialysis procedure other than hemodialysis (e.g. peritoneal, hemofiltration)	none ; operating room and anesthesia records are waived
96408	Chemotherapy administration	none ; operating room and anesthesia records are waived
79000	Radiopharmaceutical (radioactive iodine) therapy	none ; operating room and anesthesia records are waived
12001	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less	doctor's order and/or nurse's notes indicating performance of the procedure
12002	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.6 cm to 7.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12004	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 7.6 cm to 12.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12005	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 12.6 cm to 20.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12006	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 20.1 cm to 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12007	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); over 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12011	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less	doctor's order and/or nurse's notes indicating performance of the procedure
12013	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12014	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12015	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12016	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12017	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12018	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; over 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure

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RVS CODE	DESCRIPTION	REQUIREMENT
12031	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); 2.5 cm or less	doctor's order and/or nurse's notes indicating performance of the procedure
12032	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); 2.6 cm to 7.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12034	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); 7.6 cm to 12.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12035	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); 12.6 cm to 20.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12036	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); 20.1 cm to 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12037	Layer closure of wounds of scalp, axillae, trunk, and/or extremities (excluding hands and feet); over 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12041	Layer closure of wounds of neck, hands, feet and/or external genitalia; 2.5 cm or less	doctor's order and/or nurse's notes indicating performance of the procedure
12042	Layer closure of wounds of neck, hands, feet and/or external genitalia; 2.6 cm to 7.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12044	Layer closure of wounds of neck, hands, feet and/or external genitalia; 7.6 cm to 12.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12045	Layer closure of wounds of neck, hands, feet and/or external genitalia; 12.6 cm to 20.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12046	Layer closure of wounds of neck, hands, feet and/or external genitalia; 20.1 cm to 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12047	Layer closure of wounds of neck, hands, feet and/or external genitalia; over 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12051	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less	doctor's order and/or nurse's notes indicating performance of the procedure
12052	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12053	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12054	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12055	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
12056	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure

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RVS CODE	DESCRIPTION	REQUIREMENT
12057	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; over 30.0 cm	doctor's order and/or nurse's notes indicating performance of the procedure
31600	Tracheostomy, planned ;	doctor's order and/or nurse's notes indicating performance of the procedure
31601	Tracheostomy, planned ; under two years	doctor's order and/or nurse's notes indicating performance of the procedure
31603	Tracheostomy, emergency procedure; transtracheal	doctor's order and/or nurse's notes indicating performance of the procedure
31605	Tracheostomy, emergency procedure; cricothyroid membrane	doctor's order and/or nurse's notes indicating performance of the procedure
31610	Tracheostomy, fenestration procedure with skin flaps	doctor's order and/or nurse's notes indicating performance of the procedure
32000	Thoracentesis, puncture of pleural cavity for aspiration, initial or subsequent	doctor's order and/or nurse's notes indicating performance of the procedure
32002	Thoracentesis w/ insertion of tube w/ or w/o water seal (e.g., for pneumothorax)	doctor's order and/or nurse's notes indicating performance of the procedure
32020	Tube thoracostomy w/ or w/o water seal (e.g., for abscess, hemothorax, empyema)	doctor's order and/or nurse's notes indicating performance of the procedure
36640	Arterial catheterization for prolonged infusion therapy (chemotherapy), cutdown	doctor's order and/or nurse's notes indicating performance of the procedure
36488	Placement of central venous catheter (subclavian, jugular, or other vein) (e.g., for central venous pressure, hyperalimentation, hemodialysis, or chemotherapy); percutaneous or cutdown	doctor's order and/or nurse's notes indicating performance of the procedure
38220	Bone marrow aspiration and/or biopsy	doctor's order and/or nurse's notes indicating performance of the procedure
49080	Peritoneocentesis, abdominal paracentesis, or peritoneal lavage (diagnostic or therapeutic)	doctor's order and/or nurse's notes indicating performance of the procedure
62270	Spinal puncture, lumbar, diagnostic	doctor's order and/or nurse's notes indicating performance of the procedure
31231	Nasal endoscopy, diagnostic, unilateral or bilateral	official report
31233	Nasal/sinus endoscopy, diagnostic w/ maxillary sinusoscopy (via inferior meatus or canine fossa puncture)	official report
31235	Nasal/sinus endoscopy, diagnostic w/ sphenoid sinusoscopy (via puncture of sphenoidal face or cannulation of ostium)	official report
31237	Nasal/sinus endoscopy, surgical; w/ biopsy, polypectomy or debridement	official report
31238	Nasal/sinus endoscopy, surgical; w/ control of epistaxis	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
31239	Nasal/sinus endoscopy, surgical; w/ dacrylocystorhinostomy	official report
31240	Nasal/sinus endoscopy, surgical; w/ concha bullosa resection	official report
31254	Nasal/sinus endoscopy, surgical; w/ ethmoidectomy, partial (anterior)	official report
31255	Nasal/sinus endoscopy, surgical; w/ ethmoidectomy, total (anterior and posterior)	official report
31256	Nasal/sinus endoscopy, surgical, w/ maxillary antrostomy	official report
31267	Nasal/sinus endoscopy, surgical, w/ removal of tissue from maxillary sinus	official report
31276	Nasal/sinus endoscopy, surgical w/ frontal sinus exploration, w/ or w/o removal of tissue from frontal sinus	official report
31287	Nasal/sinus endoscopy, surgical, w/ sphenoidotomy	official report
31288	Nasal/sinus endoscopy, surgical, w/ removal of tissue from the sphenoid sinus	official report
31290	Nasal/sinus endoscopy, surgical, w/ repair of cerebrospinal fluid leak; ethmoid region	official report
31291	Nasal/sinus endoscopy, surgical, sphenoid region	official report
31292	Nasal/sinus endoscopy, surgical; w/ medial or inferior orbital wall decompression	official report
31293	Nasal/sinus endoscopy, surgical; w/ medial orbital wall and inferior orbital wall decompression	official report
31294	Nasal/sinus endoscopy, surgical; w/ optic nerve decompression	official report
31515	Laryngoscopy direct, w/ or w/o tracheoscopy; for aspiration	official report
31520	Laryngoscopy direct, w/ or w/o tracheoscopy; diagnostic, newborn	official report
31525	Laryngoscopy direct, w/ or w/o tracheoscopy; diagnostic, except newborn	official report
31526	Laryngoscopy direct, w/ or w/o tracheoscopy; diagnostic, w/ operating microscope	official report
31527	Laryngoscopy direct, w/ or w/o tracheoscopy; w/ insertion of obturator	official report
31528	Laryngoscopy direct, w/ or w/o tracheoscopy; w/ dilatation, initial	official report
31529	Laryngoscopy direct, w/ or w/o tracheoscopy; w/ dilatation, subsequent	official report
31530	Laryngoscopy, direct, operative, w/ foreign body removal;	official report
31531	Laryngoscopy, direct, operative, w/ foreign body removal; w/ operating microscope	official report
31535	Laryngoscopy, direct, operative, w/ biopsy;	official report
31536	Laryngoscopy, direct, operative, w/ biopsy; w/ operating microscope	official report
31540	Laryngoscopy, direct, operative, w/ excision of tumor and/or stripping of vocal cords or epiglottis;	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
31541	Laryngoscopy, direct, operative, w/ excision of tumor and/or stripping of vocal cords or epiglottis; w/ operating microscope	official report
31560	Laryngoscopy, direct, operative, w/ arytenoidectomy;	official report
31561	Laryngoscopy, direct, operative, w/ arytenoidectomy; w/ operating microscope	official report
31570	Laryngoscopy, direct, w/ injection into vocal cord(s), therapeutic;	official report
31571	Laryngoscopy, direct, w/ injection into vocal cord(s), therapeutic; w/ operating microscope	official report
31575	Laryngoscopy, flexible fiberoptic; diagnostic	official report
31576	Laryngoscopy, flexible fiberoptic; w/ biopsy	official report
31577	Laryngoscopy, flexible fiberoptic; w/ removal of foreign body	official report
31578	Laryngoscopy, flexible fiberoptic; w/ removal of lesion	official report
31579	Laryngoscopy, flexible or rigid fiberoptic, w/ stroboscopy	official report
31622	Bronchoscopy; diagnostic, (flexible or rigid), w/ or w/o cell washing or brushing	official report
31625	Bronchoscopy; w/ biopsy	official report
31628	Bronchoscopy; w/ transbronchial lung biopsy, w/ or w/o fluoroscopic guidance	official report
31629	Bronchoscopy; w/ transbronchial needle aspiration biopsy	official report
31630	Bronchoscopy; w/ tracheal or bronchial dilation or closed reduction of fracture	official report
31631	Bronchoscopy; w/ tracheal dilation and placement of tracheal stent	official report
31635	Bronchoscopy; w/ removal of foreign body	official report
31636	Bronchoscopy; diagnostic, (flexible or rigid),w/ placement of bronchial stents	official report
31640	Bronchoscopy; w/ excision of tumor	official report
31641	Bronchoscopy; w/ destruction of tumor or relief of stenosis by any method other than excision (e.g., laser)	official report
31643	Bronchoscopy; w/ placement of catheters for intracavitary radioelement application	official report
31645	Bronchoscopy; w/ therapeutic aspiration of tracheobronchial tree, (e.g., drainage of lung abscess)	official report
32601	Thoracoscopy, diagnostic ; lungs and pleural space, w/o biopsy	official report
32602	Thoracoscopy, diagnostic ; lungs and pleural space, w/ biopsy	official report
32603	Thoracoscopy, diagnostic ; pericardial sac, w/o biopsy	official report
32604	Thoracoscopy, diagnostic ; pericardial sac, w/ biopsy	official report
32605	Thoracoscopy, diagnostic ; mediastinal space, w/o biopsy	official report
32606	Thoracoscopy, diagnostic ; mediastinal space, w/ biopsy	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
32650	Thoracoscopy, surgical; w/ pleurodesis, any method	official report
32651	Thoracoscopy, surgical; w/ partial pulmonary decortication	official report
32652	Thoracoscopy, surgical; w/ total pulmonary decortication, including intrapleural pneumonolysis	official report
32653	Thoracoscopy, surgical; w/ removal of intrapleural foreign body or fibrin deposit	official report
32654	Thoracoscopy, surgical; w/ control of traumatic hemorrhage	official report
32655	Thoracoscopy, surgical; w/ excision-plectomy of bullae, including any pleural procedure	official report
32656	Thoracoscopy, surgical; w/ parietal pleurectomy	official report
32658	Thoracoscopy, surgical; w/ removal of clot or foreign body from pericardial sac	official report
32659	Thoracoscopy, surgical; w/ creation of pericardial window or partial resection of pericardial sac for drainage	official report
32660	Thoracoscopy, surgical; w/ total pericardiectomy	official report
32661	Thoracoscopy, surgical; w/ excision of pericardial cyst, tumor, or mass	official report
32662	Thoracoscopy, surgical; w/ excision of mediastinal cyst, tumor, or mass	official report
32663	Thoracoscopy, surgical; w/ lobectomy, total or segmental	official report
32664	Thoracoscopy, surgical; w/ thoracic sympathectomy	official report
32665	Thoracoscopy, surgical; w/ esophagomyotomy (Heller type)	official report
43200	Esophagoscopy, rigid or flexible; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
43202	Esophagoscopy, rigid or flexible; w/ biopsy, single or multiple	official report
43204	Esophagoscopy, rigid or flexible; w/ injection sclerosis of esophageal varices	official report
43205	Esophagoscopy, rigid or flexible; w/ band ligation of esophageal varices	official report
43215	Esophagoscopy, rigid or flexible; w/ removal of foreign body	official report
43216	Esophagoscopy, rigid or flexible; w/ removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	official report
43217	Esophagoscopy, rigid or flexible; w/ removal of tumor(s), polyp(s), or other lesion(s) by snare technique	official report
43219	Esophagoscopy, rigid or flexible; w/ insertion of plastic tube or stent	official report
43220	Esophagoscopy, rigid or flexible; w/ balloon dilation (less than 30 mm diameter)	official report
43226	Esophagoscopy, rigid or flexible; w/ insertion of guide wire followed by dilation over guide wire	official report
43227	Esophagoscopy, rigid or flexible; w/ control of bleeding, any method	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
43228	Esophagoscopy, rigid or flexible; w/ ablation of tumor(s) polyp(s), or other lesion(s), not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
43234	Upper gastrointestinal endoscopy, simple primary examination (e.g. w/ small diameter flexible endoscope)	official report
43235	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
43239	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ biopsy, single or multiple	official report
43241	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ transendoscopic tube or catheter placement	official report
43243	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ injection sclerosis of esophageal and/or gastric varices	official report
43244	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ band ligation of esophageal and/or gastric varices	official report
43245	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ dilation of gastric outlet for obstruction, any method	official report
43246	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ directed placement of percutaneous gastrostomy tube	official report
43247	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ removal or foreign body	official report
43248	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ insertion of guide wire followed by dilation of esophagus over guide wire	official report
43249	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ balloon dilation of esophagus (less than 30 mm diameter)	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
43250	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	official report
43251	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ removal of tumor(s), polyp(s), or other lesion(s) by snare technique	official report
43255	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ control of bleeding, any method	official report
43258	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
43259	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; w/ endoscopic ultrasound examination	official report
44360	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
44361	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ biopsy, single or multiple	official report
44363	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ removal of foreign body	official report
44364	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ removal of tumor(s), polyp(s), or other lesions(s) by snare technique	official report
44365	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	official report
44366	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ control of bleeding, any method	official report
44369	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
44372	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ placement of percutaneous jejunostomy tube	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
44373	Small intestinal endoscopy, enteroscopy, beyond second portion of duodenum, not including ileum; w/ conversion of percutaneous gastrostomy tube to percutaneous jejunostomy tube	official report
44376	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
44377	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum;w/ biopsy, single or multiple	official report
44378	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum;w/ control of bleeding, any method	official report
44380	Ileoscopy, through stoma; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
44382	Ileoscopy, through stoma; w/ biopsy, single or multiple	official report
44385	Endoscopic evaluation of small intestinal (abdominal or pelvic) pouch; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
44386	Endoscopic evaluation of small intestinal (abdominal or pelvic) pouch; w/ biopsy, single or multiple	official report
44388	Colonoscopy through stoma; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
44389	Colonoscopy through stoma; w/ biopsy, single or multiple	official report
44390	Colonoscopy through stoma; w/ removal of foreign body	official report
44391	Colonoscopy through stoma; w/ control of bleeding, any method	official report
44392	Colonoscopy through stoma; w/ removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	official report
44393	Colonoscopy through stoma; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
44394	Colonoscopy through stoma; w/ removal of tumor(s), polyp(s), or other lesion(s) by snare technique	official report
45355	Colonoscopy, rigid or flexible, transabdominal via colotomy, single or multiple	official report
45378	Colonoscopy, flexible, proximal to splenic flexure; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing, w/ or w/o colon decompression	official report
45379	Colonoscopy, flexible, proximal to splenic flexure; w/ removal of foreign body	official report
45380	Colonoscopy, flexible, proximal to splenic flexure; w/ biopsy, single or multiple	official report
45382	Colonoscopy, flexible, proximal to splenic flexure; w/ control of bleeding, any method	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
45383	Colonoscopy, flexible, proximal to splenic flexure; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
45384	Colonoscopy, flexible, proximal to splenic flexure; w/ removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	official report
45385	Colonoscopy, flexible, proximal to splenic flexure; w/ removal of tumor(s), polyp(s), or other lesion(s) by snare technique	official report
46600	Anoscopy; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing	official report
46604	Anoscopy; w/ dilation, any method	official report
46606	Anoscopy; w/ biopsy, single or multiple	official report
46608	Anoscopy; w/ removal of foreign body	official report
46610	Anoscopy; w/ removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery	official report
46611	Anoscopy; w/ removal of single tumor, polyp or other lesion by snare technique	official report
46612	Anoscopy; w/ removal of multiple tumor, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique	official report
46614	Anoscopy; w/ control of bleeding, any method	official report
46615	Anoscopy; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	official report
47552	Biliary endoscopy, percutaneous via T- tube or other tract; diagnostic, w/ or w/o collection of specimen(s) by brushing and/or washing	official report
47553	Biliary endoscopy, percutaneous via T- tube or other tract; w/ biopsy, single or multiple	official report
47554	Biliary endoscopy, percutaneous via T- tube or other tract; w/ removal of stone(s)	official report
47555	Biliary endoscopy, percutaneous via T- tube or other tract; w/ dilation of biliary duct stricture(s) w/o stent	official report
47556	Biliary endoscopy, percutaneous via T- tube or other tract; w/ dilation of biliary duct stricture(s) w/ stent	official report
50551	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service;	official report
50553	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ ureteral catheterization, w/ or w/o dilation of ureter	official report
50555	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ biopsy	official report

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RVS CODE	DESCRIPTION	REQUIREMENT
50557	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ fulguration and/or incision. w/ or w/o biopsy	official report
50559	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ insertion of radioactive substance w/ or w/out biopsy and/or fulguration	official report
50561	Renal endoscopy through established nephrostomy or pyelostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ removal of foreign body or calculus	official report
50570	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service;	official report
50572	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ ureteral catheterization, w/ or w/o dilation of ureter	official report
50574	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ biopsy	official report
50575	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ endopyelotomy (includes cystoscopy, ureteroscopy, dilation of ureter and ureteral pelvic junction, incision of ureteral pelvic junction and insertion of endopyelotomy stent)	official report
50576	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ fulguration and/or incision. w/ or w/o biopsy	official report
50578	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ insertion of radioactive substance, w/ or w/o biopsy and/or fulguration	official report
50580	Renal endoscopy through nephrotomy or pyelotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ removal of foreign body or calculus	official report
50951	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service;	official report
50953	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ ureteral catheterization, w/ or w/o dilation of ureter	official report

ANNEX 11. LIST OF ALTERNATIVE DOCUMENTS FOR RECORD OF OPERATIVE OR SURGICAL TECHNIQUE		
RVS CODE	DESCRIPTION	REQUIREMENT
50955	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ biopsy	official report
50957	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ fulguration and/or incision. w/ or w/o biopsy	official report
50959	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ insertion of radioactive substance, w/ or w/o biopsy and/or fulguration (not including provision of material)	official report
50961	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ removal of foreign body or calculus	official report
50970	Ureteral endoscopy through ureterotomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service;	official report
50972	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ ureteral catheterization, w/ or w/o dilation of ureter	official report
50974	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ biopsy	official report
50976	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ fulguration and/or incision, w/ or w/o biopsy	official report
50978	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ insertion of radioactive substance, w/ or w/o biopsy and/or fulguration (not including provision of material)	official report
50980	Ureteral endoscopy through established ureterostomy, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service; w/ removal of foreign body or calculus	official report
50590	Lithotripsy, extracorporeal shock wave	official report
46917	Destruction of lesion(s), anus (e.g., condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; laser surgery	official report

ANNEX 11. LIST OF ALTERNATIVE DOCUMENTS FOR RECORD OF OPERATIVE OR SURGICAL TECHNIQUE		
RVS CODE	DESCRIPTION	REQUIREMENT
52647	Non-contact laser coagulation of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included)	official report
52648	Contact laser vaporization w/ or w/o transurethral resection of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included)	official report
65855	Trabeculoplasty by laser surgery, one or more sessions (defined treatment series)	official report
65860	Severing adhesions of anterior segment, laser technique	official report
66761	Iridotomy/iridectomy by laser surgery (e.g., for glaucoma) (one or more sessions)	official report
66821	Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid) laser surgery (e.g., YAG laser) (one or more stages)	official report
66998	Release of scleral flap suture by laser suture lysis	official report
67031	Severing of vitreous strands, vitreous face adhesions, sheets, membranes or opacities, laser surgery (one or more stages)	official report
67039	Vitrectomy, mechanical, pars plana approach; w/ focal endolaser photocoagulation	official report
67040	Vitrectomy, mechanical, pars plana approach; w/ endolaser panretinal photocoagulation	official report
17000	Destruction by any method, including laser, w/ or w/o surgical curettement, all benign facial lesions or premalignant lesions in any location, or benign lesions other than cutaneous vascular proliferative lesions, including local anesthesia; any number of lesions	official report if laser specific surgery
17100	Destruction by any method, including laser, of benign skin lesions other than cutaneous vascular proliferative lesions on any area other than the face, including local anesthesia; any number of lesions	official report if laser specific surgery
17106	Destruction of cutaneous vascular proliferative lesions (e.g., laser technique)	official report if laser specific surgery
30117	Excision or destruction, any method (including laser), intranasal lesion; internal approach	official report if laser specific surgery
31641	Bronchoscopy; diagnostic, (flexible or rigid),w/ placement of bronchial stents w/ destruction of tumor or relief of stenosis by any method other than excision (e.g., laser)	official report if laser specific surgery

ANNEX 11. LIST OF ALTERNATIVE DOCUMENTS FOR RECORD OF OPERATIVE OR SURGICAL TECHNIQUE		
RVS CODE	DESCRIPTION	REQUIREMENT
45320	Proctosigmoidoscopy, rigid; diagnostic, w/ or w/o collection of specimen(s) by brushing or washing; w/ ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique (e.g., laser)	official report if laser specific surgery
52214	Cystourethroscopy, w/ fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	official report if laser specific surgery
52224	Cystourethroscopy, w/ fulguration (including cryosurgery or laser surgery) or treatment of MINOR (less than 0.5 cm) lesion(s) w/ or w/o biopsy	official report if laser specific surgery
52234	Cystourethroscopy, w/ fulguration (including cryosurgery or laser surgery) and/or resection of; SMALL bladder tumor(s) (0.5 cm to 2.0 cm)	official report if laser specific surgery
53852	Transurethral destruction of prostate tissue;by radiofrequency ablation i.e., Transurethral Needle Ablation (TUNA), transurethral laser incision of the prostate (TULIP)	official report if laser specific surgery
57520	Conization of cervix, w/ or w/o fulguration, w/ or w/o dilation and curettage, w/ or w/o repair; cold knife or laser	official report if laser specific surgery
67108	Repair of retinal detachment; scleral buckling (such as lamellar scleral dissection, imbrication or encircling procedure), w/ or w/o implant, w/ or w/o cryotherapy, photocoagulation, and drainage of subretinal fluid w/ vitrectomy, any method, w/ or w/o air or gas tamponade, focal endolaser photocoagulation, cryotherapy, drainage of subretinal fluid, scleral buckling, and/or removal of lens by same technique	official report if laser specific surgery
67210	Destruction of localized lesion of retina (e.g., maculopathy, choroidopathy, small tumors), one or more sessions; photocoagulation (laser or xenon arc)	official report if laser specific surgery
67220	Destruction of localized lesion of choroid (e.g., choroidal neovascularization); photocoagulation (e.g., laser), one or more sessions	official report if laser specific surgery
67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy), one or more sessions; photocoagulation (laser or xenon arc)	official report if laser specific surgery
67825	Repair of trichiasis; by electroepilation, electrosurgery, cryotherapy or laser surgery	official report if laser specific surgery
68760	Closure of the lacrimal punctum; by thermocauterization, ligation, or laser surgery	official report if laser specific surgery