

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PREAMBLE

- A. Corrective splints must be corrective to qualify for a benefit as such. The corrective splint listings are not applicable to simple immobilization such as with a Jones bandage or metal finger splint following soft tissue injury.
- B. The removal of a wire or pin or other device when used for traction or external fixation (except for rigid external fixators) in the treatment of a fracture or other orthopaedic procedure is to be included in the procedural fee (unless otherwise stated in the Schedule) unless a general anaesthetic is required, in which case a fee may be claimed. Removal of devices used for internal fixation more than 30 days after insertion may be claimed for in addition to the procedural benefit.
- C. The benefit for total joint replacement also includes denervation of the joint, all tenotomies and division and repair of muscle.
- D. The benefit for obtaining a bone graft is not to be claimed in cases of pseudoarthrosis repair, fusions or for listings in which bone grafting is included.
- E. For the supervision of limb fitting and 6 months post-operative care following amputation, claim visit fees. Amputation with immediate fitting to include supervision of final limb fitting, add 40% (E586).

Note:

Reconstruction or Arthroplasty Procedures: If other procedures are claimed, same joint, same time, e.g. debridement, synovectomy, tendon release etc., the Medical Consultant will assess the surgeon's claim.

# E554	- synovectomy requiring a minimum of 30 minutes to resect, to R236, R240, R241, R244, R281, R288, R436, R437, R438, R439, R440, R441, R443, R449, R453, R454, R456, R479, R481, R482, R483, R485, R486, R487, R488, R491, R493, R496, R497, R498, R499, R500, R509, R510 add	175.00
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Payment Rule:

Synovectomy codes other than E554 are not eligible for payment when rendered in addition to the codes listed above.

FRACTURES AND DISLOCATIONS

1. For fractures or dislocations requiring open or closed reduction or no reduction, the major pre-operative visit, i.e. consultation or appropriate assessment, may be claimed in addition to the listed benefits.
2. **OPEN REDUCTION** shall mean the treatment of a fracture and/or dislocation by either closed intramedullary fixation or by an operative procedure to expose the fracture. The benefits include fixation by internal or external devices.
3. **CLOSED REDUCTION** shall mean the reduction of a fracture or dislocation by non-operative methods (including traction).
4. **NO REDUCTION** shall mean the treatment of a fracture or dislocation by any other method and includes the use of the initial external support other than a simple splint. No reduction, rigid immobilization, means that the device used to achieve a rigid immobilization is custom-molded and is applied by the physician. In cases involving no reduction, application of a simple splint, such as a metal splint, is not billable as rigid immobilization (visit fees only apply).

MUSCULOSKELETAL SYSTEM

SURGICAL PROCEDURES

PREAMBLE

5. The service includes all related follow-up treatment by the physician for 2 weeks from the date of treatment of the fracture or dislocation except:
 - a. for the first and second post-treatment visits to a hospital in-patient;
 - b. for the subsequent visit by the MRP - day of discharge (C124);
 - c. for the first post-treatment visit when the patient is no longer a hospital in-patient;
 - d. if additional reductions are necessary;
 - e. if the patient is transferred to another surgeon;or
 - f. if the patient is a paraplegic.

[Commentary:

The first and second post-treatment visits in hospital for 2 weeks from the date of treatment of the fracture or dislocation are payable at the specialty specific subsequent visit fee.]

6. In multiple fractures or dislocations, the benefit for the major fracture or dislocation shall be 100% and the benefit for the other fractures or dislocations is 85%. When no procedural benefit is applicable, but that fracture or dislocation necessitates hospitalization or concurrent care over that demanded by the major injury, a visit benefit may be claimed in addition to other procedural benefits.
7. For repeat reductions (closed or open) for the same fracture or dislocation, the full benefit should be claimed for the final reduction and after care; previous reductions by the same surgeon should be claimed at 85%.
8. Emergency splinting of fractures in the emergency department should be on the basis of appropriate visit benefit, plus application of cast if appropriate.
9. Transferred cases:
 - a. When patients are transferred to a chronic or convalescent facility, additional visit benefits on a chronic care basis shall be allowed to other than the operating surgeon (and also to the surgeon after 2 weeks).
 - b. When patients are transferred to another physician for after care of fractures and dislocations treated by closed or no reduction, the physician rendering the initial care should claim 75% of the listed fee and the surgeon rendering subsequent care should claim visit fees except where otherwise specified. In cases involving open reduction, the percentage should be 80% for the surgeon providing the initial care.
 - c. In cases where the original physician's attempts to reduce a fracture or dislocation under general anaesthesia is unsuccessful, and the patient is referred to another physician for definitive care, the original physician should claim 75% of the listed fee.
10. Pseudoarthrosis may be allowed as the appropriate benefit after the fracture is 4 months old.
11. For fractures and dislocations not requiring reduction, visit fees apply unless a specific fee is listed. If the listed fee is less than the consultation, the consultation should be claimed under the fracture/dislocation fee code number.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

GENERAL FEES

Asst	Surg	Anae
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BONE/FASCIAL/DERMIS/GRAFTS

Autogenous

# E551	- separate incision add	86.30
# E552	- same incision add	58.45
# Z279	- different surgeon.	193.00

Homogenous

# E553	- bank add	25.15
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Allograft

# R200	- cadaver - per long bone, each	144.80
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Note:

Other donor allografts are payable at 85% of the listed excision fee.

FIXATION

# E547	- methyl methacrylate (not arthroplasty) add	59.40
# E555	- rigid external fixation (excluding casts) for closed reduction, to closed reduction fee add 50%	
# E544	- cast bracing with closed reduction, to closed reduction fee add 40%	
# E569	- percutaneous pinning, to closed reduction fee add 50%	
# E590	- rigid external fixation - pseudoarthrosis add	76.10

Removal of internal fixation device

# R267	- general anaesthetic	6	158.65	6
# R268	- local anaesthetic.	6	54.85	6
# R598	Removal of extensive external fixation device under general anaesthetic.		48.25	6

Adjustment of circumferential external fixation

# Z280	- without general anaesthetic	72.35	
# Z281	- with general anaesthetic.	145.70	6
# Z210	Insertion traction pin - excludes fractures and dislocations	33.35	

WOUND CARE

E550	- insertion of closed irrigation system during a surgical procedure for post-operative management. add	63.15	
# E556	- extensive debridement of compound fractures or dislocations, to reduction fee add 50%		2
# Z783	Secondary closure.	97.35	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

GENERAL FEES

		Asst	Surg	Anae
# R517	Excision of foreign body		107.70	6
# Z250	Chronic Electrical Stimulation (not to include T.E.N.S.) external or internal		193.00	6
# Z273	Muscle core biopsy using a 6mm or larger Bergstrom muscle biopsy needle or equivalent kit - includes one or more biopsies		63.35	

Note:

Z219 is not eligible for payment when rendered in addition to Z273.

CASTS

Application of plaster casts or corrective splints are not to be claimed if applied at the time of surgery (except for the application of a cast brace) or applied during the first 2 weeks for a fracture or dislocation when a procedural fee is applicable. The subsequent application of plaster casts may be claimed according to the following schedule.

Direct supervision requires the physical presence of the physician in the office in which the cast is applied at the time the cast is applied unless all conditions listed on page GP45 of the General Preamble (Delegated Procedures) are met.

Z201	Finger		10.25	
E584	- application of plaster cast outside hospital		11.15	
Z202	Hand		14.90	6
E584	- application of plaster cast outside hospital		11.15	
Z203	Arm, forearm or wrist		24.10	6
E584	- application of plaster cast outside hospital		11.15	
Z199	Foot		14.90	6
E584	- application of plaster cast outside hospital		11.15	
# Z213	Below knee, knee splints (Stove pipe, etc.)		24.10	6
# Z211	Whole leg (mid thigh to toes)		28.80	6
Z198	Toes		10.25	6
E584	- application of plaster cast outside hospital		11.15	
# Z205	Head and torso	6	97.35	6
# Z208	Shoulder spica	6	97.35	6
# Z206	Body cast	6	57.50	6
	Hip spica			
# Z207	- unilateral	6	97.35	6
# Z209	- bilateral	6	121.60	6
Z216	Wedging of casts in other than fracture treatment		10.25	
Z200	Application of Unna's paste		14.90	
Z873	Application of cast brace (must include hinge)		67.75	
Z204	Removal of plaster (not associated with fractures or dislocations within 2 weeks of initial treatment)		10.25	

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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AMPUTATION

# R606 Phalanx	161.45		6
# R608 Metacarpal or metaphalangeal joint	190.20		6
# E583 - each additional	94.60	add	
# R610 Trans. metacarpal 2nd or 5th ray	279.35		6
# R611 Hand - all metacarpals	6 289.50		6
# R612 Wrist	6 289.50		6
# R629 Revision of amputated finger tip	6 241.55		6

ARTHRODESIS

# R465 Finger-thumb	6 256.15		6
# R466 Wrist	6 389.75		6

ARTHROPLASTY

# E564 - revision of arthroplasty		add 35%	
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Wrist

# R437 - interposition	6 374.00		6
# R485 - total	6 426.90		6
# R479 - removal only	6 193.00		6

Hand - interposition

# R435 - single	6 254.35		6
# R436 - multiple	6 459.40		6
# R489 Single joint - total	6 290.55		6
# R209 Basal thumb - first carpometacarpal joint	6 363.05		6
# R449 Multiple joints - total maximum (arthrodesis and/or arthroplasties)	6 774.90		6
# R500 Removal only	6 144.80		6
# R236 Carpal replacement	6 322.05		6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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ARTHROSCOPY

# E595	- arthroscopy in association with surgery - same surgeon..... add		63.15	
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Note:

A maximum of 2 R codes may be billed in conjunction with E595 at any one sitting.

# Z218	Diagnostic arthroscopy (sole procedure).....	6	97.35	6
# R211	Synovial biopsy	6	43.60	
# R212	Removal of loose body, screw.....	6	192.00	6
# R213	Drilling of defect (includes removal of loose body).....	6	251.55	6

Debridement

# R221	- local	6	251.55	6
# R224	- total	6	326.55	6

Synovectomy

# R230	- partial	6	196.60	6
# R232	- total	6	481.70	6
# R233	Pinning of osteochondral fragment	6	251.55	6

ARTHROTOMY

# R409	Finger		168.00	6
# R410	Wrist	6	212.50	6

ASPIRATION/INJECTION

See Diagnostic and Therapeutic Procedures - Injections and Infusions.

BIOPSY

Bone

# Z230	- punch, x-ray control		72.35	6
# Z214	- open biopsy or taking of bone graft by other than operating surgeon.....	6	144.80	6

Joint

# E563	- via arthroscope		11.10	
	Z221 - needle.....		49.20	
# R409	- open finger		168.00	6
# R410	- open wrist	6	212.50	6

Soft tissue

# Z228	- open		97.35	6
Z219	Muscle needle biopsy, soft tissue, per site.....		25.15	

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

		Asst	Surg	Anae
DECOMPRESSION - DENERVATION				
# N290	Decompression median nerve at wrist (carpal tunnel syndrome)	6	156.75	6
# N285	Exploration and/or decompression and/or transposition and/or neurolysis of major nerve (excluding carpal tunnel nerve) .	6	256.15	6
INCISION AND DRAINAGE				
# R409	Finger joint.		168.00	6
# R410	Wrist joint.	6	212.50	6
Phalanx/metacarpal/carpus				
# R219	- incision and drainage	6	182.90	6
# R218	- sequestrectomy	6	144.80	6
# R217	- saucerization and bone graft	6	242.25	6
# R534	Tendon sheath.	6	191.85	6
EXAMINATION/MANIPULATION				
Z222	Manipulation - under general anaesthetic (see Surgical Preamble SP5).		24.10	6
Note: Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.				
EXCISION				
Bone				
# R316	Proximal row carpectomy.	6	338.75	6
# R285	Carpal - bone (one)	6	214.45	6
# R317	Dorsal exostosis (triquetrum).	6	189.75	6
# R286	Radial styloid	6	234.75	6
# R283	Phalanx/metacarpal	6	193.00	6
# R272	Bone tumour (see General Preamble GP12).	I.C	I.C	I.C
Joint				
Synovectomy/capsulectomy/debridement				
# R425	- finger joint.	6	226.40	6
# R414	- two or more joints	6	339.65	6
# R407	Synovectomy of extensor or flexor tendons.		224.45	6
# R418	Synovectomy/debridement - wrist	6	342.55	6
# R492	Radio-ulnar meniscectomy	6	231.10	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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EXCISION

Muscle and Tendon

Muscle

# R522	- simple	6	193.00	6
# R523	- complex	6	484.35	6

Fascia for Dupuytren's

# R551	- simple or complex with or without flaps or grafts	6	322.15	6
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Ganglion

# R549	Simple or complex	6	177.80	6
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RECONSTRUCTION

Bone - Pseudoarthrosis

# R321	Phalanx, metacarpal	6	260.75	6
# R322	Scaphoid - must include bone graft and fixation	6	363.80	6

Note:

F019, Z279, and E551 rendered in conjunction with R322 are insured services payable at nil.

Bone - Deformity

Osteotomy - phalanx

# R257	- terminal		162.65	6
# R258	- middle proximal or metacarpal	6	193.20	6
# E591	- each additional add		158.65	

Ligaments

# R597	Simple/single repair - wrist	6	301.60	6
# R548	Extensive/multiple repair - wrist	6	511.45	6
# R601	Metacarpal phalangeal repair	6	316.75	6

Note:

Reconstruction - Nerve - see page X7.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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RECONSTRUCTION

Tendon

Tenoplasty				
# R557	- one	6	223.65	6
# E050	- each additional		77.05	
Tendon graft				
# R559	- one	6	306.30	6
# E052	- each additional		259.85	
# R586	Reconstruction of flexor tendon pulley, per finger		97.35	6
Silicone rod insertion				
# R554	- one	6	294.20	6
# E051	- each additional		245.90	
Transplant/transfer				
# R563	- single	6	284.95	6
# E054	- each additional		236.10	
Tendon repair - extensor				
# R578	- single	6	164.10	6
# E580	- each additional*		70.95	
Flexor				
# R585	- single	6	307.60	6
# E581	- each additional*		128.95	
Mallet finger				
UVC	- closed		visit.fee	
# R574	- K-wire		133.95	6
# R573	- open	6	147.20	6
Boutonniere				
UVC	- closed		visit.fee	
# R577	- open	6	147.30	6
# R582	- late	6	246.65	6

Note:

*If additional tendon repair(s) requires a separate incision, bill according to Surgical Preamble SP3.

Extremities

# R602	Pollicization	6	596.35	6
# R603	Digital reimplantation involving microvascular and neuro anastomosis	8	1586.20	8
# R604	Revision of R602, R603 (see General Preamble GP12)	I.C	I.C	I.C
# R605	Reconstruction and plastic repair of traumatically amputated extremities (see General Preamble GP12)	I.C	I.C	I.C

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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RELEASE

Tendon

Tenolysis - flexor and/or extensor tendon of

# R575	- one digit	6	194.05	6
# E537	- each additional digit add		165.20	
# R541	Flexor tenolysis with pulley preservation	6	309.00	6

Tenotomy or fasciotomy (closed)

Finger

# Z247	- one		49.20	6
# Z248	- two		72.35	6
# Z249	- three or more		99.15	6
# Z231	- palmar or plantar		73.70	6

Tendon release (open)

# R536	- finger/palm		156.50	6
# E592	- more than one, to R536		133.05	
# R537	- wrist	6	175.00	6
# E571	- more than one, to R537		148.75	

REDUCTION

Fractures

Phalanx

F004	- no reduction, rigid immobilization		49.20	
F005	- closed reduction		99.25	6
E584	- application of plaster cast outside hospital		11.15	
E558	- each additional		22.25	
# F007	- open reduction	6	248.70	6

Metacarpal

F008	- no reduction, one or more, rigid immobilization		49.20	
F009	- closed reduction		99.25	6
E584	- application of plaster cast outside hospital		11.15	
E504	- each additional		22.20	
# F011	- open reduction	6	218.85	6
E559	- each additional (open)		142.90	

Intra-articular

F006	- closed reduction		119.75	
E584	- application of plaster cast outside hospital		11.15	
E503	- each additional		26.85	
# F010	- open reduction	6	279.85	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst	Surg	Anae
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REDUCTION

Fractures

Bennett's

F012	- no reduction, rigid immobilization	49.20		
E584	- application of plaster cast outside hospital add	11.15		
# F013	- closed reduction	6	119.80	6
# F015	- open reduction	6	279.85	6

Carpus

F102	- no reduction, rigid immobilization	49.20		
E584	- application of plaster cast outside hospital add	11.15		
# F016	- closed reduction, one or more	6	115.10	6
# F017	- open reduction, one or more.	6	288.45	6

Scaphoid

F018	- no reduction, rigid immobilization	49.20		
E584	- application of plaster cast outside hospital add	11.15		
# F019	- open reduction	6	314.95	6
# F020	- excision.	6	193.00	6

Dislocations

Finger

D001	- closed reduction	57.50		6
E584	- application of plaster cast outside hospital add	11.15		
E576	- each additional add	10.25		
# D003	- open reduction	6	196.50	6

Metacarpal/phalangeal

D004	- closed reduction	57.50		6
E584	- application of plaster cast outside hospital add	11.15		
E577	- each additional add	10.25		
# D006	- open reduction	6	181.85	6

Carpal

D007	- closed reduction	128.05		6
E584	- application of plaster cast outside hospital add	11.15		
# D008	- open reduction	6	241.30	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

	Asst	Surg	Anae
AMPUTATION			
# R613 Through radius and ulna	6	306.30	6
# R614 Elbow disarticulation	6	289.50	6
ARTHRODESIS			
# R466 Elbow	6	389.75	6
ARTHROPLASTY			
# E564 - revision of elbow arthroplasty add 35%			
# R281 Ulna replacement (lower end)	6	296.90	6
# R288 Implant radial head	6	251.55	6
# R499 Removal of total replacement	6	402.75	7
# R486 Complete arthroplasty replacement	6	619.90	8
# R510 Interposition arthroplasty	6	435.20	7
ARTHROSCOPY			
# E595 - arthroscopy in association with surgery - same surgeon..... add		63.15	
Note: A maximum of 2 R codes may be billed in conjunction with E595 at any one sitting.			
# Z218 Diagnostic arthroscopy (sole procedure)	6	97.35	6
# R211 Synovial biopsy	6	43.60	6
# R212 Removal of loose body, screw	6	192.00	6
# R213 Drilling of defect (includes removal of loose body)	6	251.55	6
Debridement			
# R221 - local	6	251.55	6
# R224 - total	6	326.55	6
Synovectomy			
# R230 - partial	6	196.60	6
# R232 - total	6	481.70	6
# R233 Pinning of osteochondral fragment	6	251.55	6
ARTHROTOMY			
# R445 Elbow, loose body, etc.	6	199.55	6
ASPIRATION/INJECTION			
See Diagnostic and Therapeutic Procedures - Injections and Infusions.			

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst	Surg	Anae
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BIOPSY

Bone

Z225	- needle.....	72.35	6
# Z214	- open.....	144.80	6

Joint

# R432	- open.....	6	171.45	6
# E563	- via arthroscope..... add		11.10	
# Z228	Muscle/soft tissue.....		97.35	6
Z219	Muscle needle biopsy, soft tissue, per site.....		25.15	

DECOMPRESSION/DENERVATION

# R495	Fasciotomy for compartment syndrome (not including secondary closure wound).....	6	320.20	6
# Z783	Secondary closure.....		97.35	6

Catheter

# Z251	- insertion.....	49.20		
UVC	- monitoring.....		visit.fee	
# N190	Exploration and/or decompression and/or neurolysis of ulnar nerve (elbow).....	6	215.35	6
# N189	Ulnar nerve transposition at elbow - may include exploration, decompression and/or neurolysis.....	6	279.25	6
# R426	Denervation - elbow.....	6	258.00	6

INCISION AND DRAINAGE

# R228	Acute.....	6	302.55	6
# Z226	Soft tissue or bursa, incision and drainage.....		97.35	6
# R445	Elbow.....	6	199.55	6
# R231	Sequestrectomy.....	6	355.35	6
# R229	Saucerization and bone grafting.....	6	452.90	6

EXAMINATION/MANIPULATION

Z222	Manipulation - under general anaesthetic (see Surgical Preamble SP5).	24.10	6
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Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst	Surg	Anae
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EXCISION

Bone

# R287	Radial head	6	217.95	6
# R286	Radial styloid	6	234.75	6
# R643	Ulna lower end.	6	193.00	6
# R290	Olecranon	6	207.90	6
# R291	Olecranon with fascial repair	6	309.00	6

Bursae

# R595	Olecranon	6	101.25	6
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Joint Contents

# R421	Synovectomy/capsulectomy/debridement, etc.	6	311.85	6
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Muscles

# R524	Myositis ossificans.	6	289.50	6
# R517	Foreign body removal		107.70	6

Tumours

Soft tissues

# R591	- superficial	6	196.05	6
# R592	- deep	6	484.35	6

Bone tumours

# R294	- exostosis.	6	165.20	6
# R295	- simple excision	6	289.50	6
# R293	- extensive with replacement	6	677.50	6

RECONSTRUCTION

Bone - Pseudoarthrosis

# R323	Radius or ulna	6	304.40	6
# R473	Radius and ulna.	6	411.20	6
# R950	Radius and ulna - circular external fixation.	6	291.40	6

Bone - Deformity

Osteotomy

# R259	- ulna	6	297.85	6
# R261	- radius with or without ulna.	6	411.20	6
# R324	- radius and/or ulna with reconstruction congenital abnormality, synostosis etc.	6	398.10	6
# R951	Single level correction - circular external fixation	6	638.40	6
# R952	Double level correction - circular external fixation	6	798.10	6

Bone transport

# R953	- circular external fixation (less than or equal to 6 cm)	6	655.15	6
# R954	- circular external fixation (greater than 6 cm).	6	763.80	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst	Surg	Anae
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RECONSTRUCTION

Fascia

Repair fascial defects				
# R476	- small	6	144.80	6
# R478	- large with or without synthetic graft or rotation flap.	6	290.55	6

Ligaments

# R597	Simple/single repair	6	301.60	6
# R548	Extensive/multiple repair	6	511.45	6

Tendons

Suture extensor tendon				
# R578	- single	6	164.10	6
# E580	- each additional add		70.95	
Suture flexor tendon				
# R585	- single	6	307.60	6
# E581	- each additional add		128.95	
Tenoplasty				
# R557	- single	6	223.65	6
# E050	- each additional add		77.05	
Tenolysis				
# R556	- single	6	202.25	6
# E599	- each additional add		87.20	
Transposition/transplantation/transfer				
# R563	- single	6	284.95	6
# E056	- each additional add		91.90	
# R583	Steindler flexoplasty.	6	344.85	6

RELEASE

Muscles and tendons

# R519	- simple, e.g. tennis elbow	6	136.35	6
# R521	- radical, e.g. muscle slide	6	314.60	6

REDUCTION

Dislocations

Elbow joint				
# D009	- closed reduction		84.45	6
# D010	- open reduction - acute	6	252.45	
# R400	- repair chronic, recurrent	6	379.50	6
Radial head				
# D012	- closed reduction, pulled elbow		39.00	6
# D011	- open reduction - acute	6	193.00	6
# R540	- open reduction - recurrent	6	227.40	6
# R558	- open reduction - late.	6	357.20	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst	Surg	Anae
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REDUCTION

Fractures

Epicondyle

# F029	- no reduction		67.75	
# F037	- closed reduction	6	126.25	6
# F038	- open reduction	6	214.45	6

Transcondylar/condylar

# F039	- no reduction		67.75	
# F040	- closed reduction	6	298.35	6
# F045	- closed reduction with traction	6	312.70	6
# F041	- open reduction	6	375.80	6

Olecranon

# F034	- no reduction, rigid immobilization		126.25	6
# F035	- closed reduction	6	129.00	6
# F036	- open reduction	6	224.55	6

Radius and ulnar shaft

# F024	- no reduction, rigid immobilization		67.75	
# F025	- closed reduction	6	148.50	6
# F026	- open reduction	6	368.40	6

Radius and ulna - Monteggia

# F014	- no reduction, rigid immobilization		67.75	
# F022	- closed reduction	6	144.80	6
# F023	- open reduction of ulna plus closed reduction radial head	6	242.25	6

Radius or ulna

F031	- no reduction, rigid immobilization		67.75	
E584	- application of plaster cast outside hospital add		11.15	
# F032	- closed reduction	6	117.85	6
# F033	- open reduction	6	228.35	6

Radius - distal, e.g. Colles', Smith's, or Barton's fracture

F027	- no reduction, rigid immobilization		67.75	
E584	- application of plaster cast outside hospital add		11.15	
# F028	- closed reduction, under local or regional anaesthetic		109.45	
# F046	- closed reduction, under general anaesthetic	6	149.35	6
# F030	- open reduction	6	281.15	6

Osteochondral

# F021	- open reduction	6	327.00	6
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MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

	Asst	Surg	Anae
AMPUTATION			
# R617 Forequarter	10	490.95	15
# R616 Shoulder disarticulation	9	373.10	9
# R615 High humerus	6	369.35	6
ARTHRODESIS			
# R467 Shoulder	6	468.65	6
ARTHROPLASTY			
# E564 - revision of prosthesis add 35%			
# R438 Humeral prosthesis	6	449.20	6
# R487 Total prosthesis	6	695.10	10
# R240 Revision total arthroplasty shoulder	6	942.95	10
# R498 Removal prosthesis/no replacement	6	397.20	8
ARTHROSCOPY			
# E595 - arthroscopy in association with surgery - same surgeon add		63.15	
# Z218 Diagnostic arthroscopy (sole procedure)	6	97.35	6
# R211 Synovial biopsy	6	43.60	6
# R212 Removal of loose body, screw	6	192.00	6
# R213 Drilling of defect (includes removal of loose body)	6	251.55	6
Debridement			
# R221 - local	6	251.55	6
# R224 - total	6	326.55	6
Synovectomy			
# R230 - partial	6	196.60	6
# R232 - total	6	481.70	6
# R233 Pinning of osteochondral fragment	6	251.55	6
# R227 Superior Labral Anterior Posterior (SLAP) Repair	6	336.65	6

Note:

A maximum of 2 R codes may be billed in conjunction with E595 at any one sitting.

ARTHROTOMY

# R411 Shoulder	6	223.65	6
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ASPIRATION/INJECTION

See Diagnostic and Therapeutic Procedures - Injections and Infusions.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

Asst	Surg	Anae
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BIOPSY

Bone

Z220	- needle/punch, x-ray control	72.35	6
# Z214	- open	6 144.80	6

Joint

# R411	- open	6 223.65	6
# E563	- via arthroscope	11.10	
# Z228	Soft tissue - open	97.35	6
Z219	Muscle needle biopsy, soft tissue, per site	25.15	

INCISION AND DRAINAGE

# R222	Humerus/clavicle/scapula	6 262.60	6
# Z226	Bursae/soft tissue	97.35	6
# R411	Joint	6 223.65	6
# R225	Sequestrectomy	6 290.55	6
# R223	Saucerization with bone graft	6 387.90	6

EXAMINATION AND MANIPULATION

Z223	Manipulation under general anaesthetic (see Surgical Preamble SP5)	49.20	6
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Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

EXCISION

Clavicle or Acromion

# R298	Simple (includes ligament)	6 211.60	6
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Note:

When R298 is rendered in association with R416, R298 is payable at 100% and R416 is payable at 85%.

# R641	Major tumour	6 290.55	6
# R214	Malignant tumour with reconstruction	6 484.35	6

Humerus

# R292	Head	6 299.75	6
# R294	Exostosis	6 165.20	6
# R295	Benign tumour	6 289.50	6
# R297	Malignant tumour with reconstruction	6 681.10	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

Asst	Surg	Anae
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EXCISION

Joint

# R422	Synovectomy and debridement	6	425.10	6
# R512	Excision of subacromial bursa (not to be claimed with R416) . .	6	211.60	6

Muscle/fascia

# R522	- simple	6	193.00	
# R523	- complex	6	484.35	6
# R416	Rotator cuff exploration - includes acromioplasty, excision of coraco-acromial ligament and subacromial bursa but excludes simple excision of clavicle	6	206.90	6

Note:

When R416 is rendered in association with R298, R416 is payable at 85% and R298 is payable at 100%.

RECONSTRUCTION

Pseudoarthrosis

# R329	Clavicle	6	269.10	6
# R325	Humerus	6	346.15	6
# R956	Humerus - circular external fixation	6	291.40	6

Deformity

Osteotomy

# R260	- humerus	6	292.35	6
# R298	- clavicle	6	211.60	6
# R235	- glenoid	6	279.35	6
# R957	Single level correction - circular external fixation	6	510.35	6
# R958	Double level correction - circular external fixation..	6	638.40	6

Bone transport

# R959	- circular external fixation (less than or equal to 6 cm)	6	655.15	6
# R960	- circular external fixation (greater than 6 cm).	6	763.80	6

Humeral lengthening

# R961	- circular external fixation (less than or equal to 6 cm).	6	438.00	6
# R962	- circular external fixation (greater than 6 cm).	6	655.15	6

Note:

Reconstruction - Nerves - see Operations on the Nervous System.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

Asst	Surg	Anae
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RECONSTRUCTION

Muscles/Soft Tissues

# R527	Muscle transplant - pectoralis major	6	434.25	6
# R353	Scapulopexy congenital elevation	6	385.15	6
# R568	Trapezius/sternomastoid transplant.	6	338.65	6
Tendon repair				
# R589	- biceps	6	227.40	6
Rotator cuff repair				
# R593	- simple, end-to-end or side-to-side (includes acromioplasty, excision of coraco-acromial ligament).	6	316.40	6
# R594	- complex (includes implantation into bone, and as required, acromioplasty, excision of coraco-acromial ligament, excision of distal clavicle)	6	466.85	6
# E057	- revision/repair following previous rotator cuff surgery, to R594 add 30%			

RELEASE

# R521	Muscle/tendon	6	314.60	6
# R526	Sternomastoid	6	296.05	6

REDUCTION

Fractures

Tuberosity				
# F047	- no reduction		67.80	
# F048	- closed reduction	6	117.85	6
# F049	- open reduction (without cuff tear)	6	290.55	6
Neck without dislocation of head				
# F053	- no reduction		67.80	
# F054	- closed reduction		133.60	6
# F055	- open reduction	6	327.55	6
Neck with dislocation of head				
# F050	- no reduction		67.80	
# F051	- closed reduction	6	183.80	6
# F052	- open reduction	6	385.15	6
Shaft				
# F042	- no reduction		67.80	
# F043	- closed reduction	6	147.60	6
# F044	- open reduction	6	323.05	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

Asst	Surg	Anaes
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REDUCTION

Fractures

Clavicle

UVC	- no reduction		visit. fee	
# F110	- closed reduction with anaesthetic.	6	62.20	6
# F118	- open reduction	6	231.10	6

Scapula

# F119	- no reduction		67.80	
# F121	- open reduction	6	242.25	6

Sternum

# F123	- closed reduction		115.95	
# F124	- open reduction - pleura open (see General Preamble GP12).	9	I.C	13
# F125	- pleura closed (see General Preamble GP12).	6	I.C	6

Ribs

UVC	- no reduction		visit. fee	
# F131	- pleura closed (see General Preamble GP12).	6	I.C	6

Dislocations

Acromio-clavicular/sterno-clavicular

# D014	- no reduction		67.80	
# D025	- closed with anaesthetic.	6	134.55	6
# D023	- open reduction	6	231.10	6
# R596	- late	6	286.70	6

Glenohumeral joint

# D015	- closed reduction without anaesthetic		49.20	
# D016	- closed reduction with anaesthetic.	6	111.40	6
# D017	- open reduction, early	6	323.85	6
# R472	- open reduction, late	6	580.90	7
# R401	- open reduction, recurrent	6	379.50	6
# E058	- revision/repair following previous glenohumeral joint surgery, to R401 add 30%			

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

	Asst	Surg	Anae
ARTHROPLASTY			
# R433 Temporomandibular joint - unilateral	6	349.30	6
BIOPSY			
Bone			
# Z869 - punch, simple		39.10	6
# Z870 - punch, x-ray control		97.35	6
# Z242 - open	6	193.00	6
INCISION AND DRAINAGE			
# Z234 Mandibular sequestrectomy	7	281.25	7
EXCISION			
# R272 Bone - tumour (see General Preamble GP12).	I.C	I.C	I.C
# R278 Maxilla, with exenteration of orbit and skin graft	6	532.95	7
# R279 Maxilla advancement	6	440.15	8
# R280 Mandible	6	353.10	7
# R284 Mandibular condyle	6	276.55	6
# R428 Temporomandibular meniscectomy	6	249.75	6
RECONSTRUCTION			
Facial paralysis			
# R531 - static slings	6	307.15	6
# R532 - dynamic slings	6	399.00	6
# R533 Composite repair for facial paralysis, plication of paralyzed muscles, and resection for paralysis of over active muscles	6	511.90	7
# E597 - with meloplasty add		87.05	

Note:

Claims for R533 will be assessed by the Medical Consultant.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

	Asst	Surg	Anae
ORTHOGNATHIC SURGERY			
Anterior dento-alveolar osteotomy, maxilla or mandible			
# R382 - one segment	6	803.80	10
# R383 - two segments	6	932.10	10
Posterior dento-alveolar osteotomy, maxilla			
# R349 - one side	6	803.80	10
# R351 - both sides, single segment	6	932.10	10
# R385 - both sides, separate segments	6	1187.50	10
Posterior dento-alveolar osteotomy, mandible			
# R462 - one side	6	803.80	10
# R463 - both sides	6	1187.50	10
Total U dento-alveolar osteotomy			
# R502 - mandible	6	1228.70	10
# R507 - maxilla	6	1315.70	10
# R511 Mandibular or maxillary visor osteotomy for alveolar hypoplasia	6	1146.40	10
Genioplasty			
# R386 - one segment	6	256.40	10
# R387 - two segments, or for laterognathia	6	383.65	10
# R388 - three segments	6	511.90	10
Mandibular osteotomies for prognathism			
# R480 - subcondylar	6	420.10	6
# R384 - vertical ramus	6	932.10	10
# R518 - sagittal split	6	932.10	10
Mandibular osteotomies for retrognathia, any technique			
# R520 - advancement - up to 10 mm	6	932.10	10
# R529 - advancement - 10 to 20 mm, inclusive	6	1058.40	10
# R535 - advancement - greater than 20 mm	6	1356.90	10
# E588 - for apertognathia or laterognathia add		256.40	

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

	Asst	Surg	Anae
ORTHOGNATHIC SURGERY			
LeFort I advancement			
# R379 - in one segment	10	803.80	20
# E961 - in two segments add		296.60	
# E962 - in three segments add		594.20	
LeFort I intrusion			
# R538 - in one segment	10	1059.35	20
# E963 - in two segments add		296.60	
# E964 - in three segment add		594.20	
LeFort I extrusion			
# R567 - in one segment*	10	1315.70	20
# E965 - in two segments add		296.60	
# E966 - in three segments add		594.20	
LeFort I cleft palate			
# R580 - in one segment*	10	1525.30	20
# E967 - in two segments add		256.40	
# E968 - in three segments add		511.90	
# E969 - with SMR add		204.80	
# E970 - with pharyngoplasty add		307.15	
# E971 - with closure alveolar fistula with or without bone graft. add		383.65	
# E972 - with closure hard palate fistula with or without bone graft. add		511.90	
# R588 Naso-maxillary osteotomy without LeFort I*	6	803.80	10
# R389 LeFort II maxillary osteotomy and advancement*	10	1443.95	20
# R395 Construction glenoid fossa and zygomatic arch* (Obwegeser technique).	10	1402.75	20
# R396 Construction absent condyle and ascending ramus*	6	803.80	10
# R609 Combined LeFort I and LeFort III osteotomy in hemifacial microsomia	10	1586.20	20
# R145 Mandibular condylotomy	6	204.80	6
# R618 Coronoidotomy	6	204.80	6
# R644 Coronoidectomy.	6	307.15	6

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst	Surg	Anae
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ORTHOGNATHIC SURGERY

Reconstruction mandible with bone grafts* and/or plate or prosthesis.

Unilateral			
# R334	- partial	6	409.55 10
# R335	- complete	6	819.15 10
Bilateral			
# R645	- partial	6	819.15 10
# R646	- complete	6	1023.95 10

Oral vestibuloplasty

# R647	- with secondary epithelization	6	204.80 6
# R648	- with skin graft	6	307.15 6

Temporomandibular ankylosis

# R649	- excision bone or fibrous block	6	461.30 6
# R650	- with insertion of prosthetic device or muscle flap	6	511.90 8
# R651	- with construction of condyle and ascending ramus*	6	666.00 10

Only bone grafts to face when not part of standard osteotomy for reconstruction

Mandible			
# Z253	- unilateral		358.90
# Z254	- bilateral		461.30
Maxilla			
# Z255	- unilateral		358.90
# Z256	- bilateral		461.30
Zygoma			
# Z257	- unilateral		307.15
# Z258	- bilateral		409.55
Temporal			
# Z259	- unilateral		409.55
# Z260	- bilateral		511.90
Frontal			
# Z261	- unilateral		409.55
# Z262	- bilateral		511.90

Application of dental arch bars, or splint, for facial osteotomy

# Z239	- one arch bar	6	133.00 6
# Z240	- two arch bars	6	204.80 6
# R354	Interdental wiring for temporomandibular joint disorder	6	154.00 6
# R652	Removal intermaxillary fixation devices under general anaesthesia - as sole procedure		102.35 6

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

	Asst	Surg	Anae
ORBITO-CRANIAL SURGERY			
Bilateral periorbital correction Treacher-Collins Syndrome			
# R390 - with or without bone grafts* (extra-cranial)	10	1699.45	20
# R653 - with skull and muscle transpositions* (includes skull reconstruction) (intracranial).	10	2196.35	25
Pericranial flap to orbit or face			
# R654 - unilateral.		307.15	6
E973 - when in conjunction with coronal approach for main operation. add		178.90	
# R655 - bilateral.		409.55	6
# E974 - when in conjunction with coronal approach for main operation. add		297.55	
# R378 LeFort III total maxillary advancement*	12	2037.35	25
# R656 LeFort III and subcranial hypertelorism correction*	12	2590.35	25
# R657 LeFort III and LeFort I maxillary advancement*	12	2334.85	25
# R658 LeFort II, subcranial hypertelorism correction Le Fort I maxillary advancement*	12	2928.10	25
Upper LeFort III advancement without occlusal change*			
# R659 - unilateral.	6	932.10	10
# R675 - bilateral.	12	1443.95	25
Forehead advancement (bone grafts not included)			
# R676 - unilateral.	12	1187.50	25
# R393 - bilateral.	12	1443.95	25
# R394 Cranial vault reshaping* - anterior or posterior half	10	1525.30	20
# R677 Total cranial vault reshaping*.	12	2078.35	25
Medial transnasal canthopexy			
# R398 - unilateral.	6	414.30	6
# E557 - when done in conjunction with another procedure . . add		154.00	

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst	Surg	Anae
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ORBITO-CRANIAL SURGERY

Lateral canthoplasty

# R399	- unilateral	6	204.80	6
# E930	- when done in conjunction with another procedure . . . add		102.35	

Hypertelorism correction

# R376	- intracranial approach*	12	2334.85	25
# R377	- subcranial U osteotomies*	12	1950.15	25
# R678	- medial orbital wall osteotomies*	10	1228.70	20
# R679	- medial and lateral orbital wall osteotomies*	10	1612.30	20

Orbital dystopia*

# R391	- intracranial approach	12	1950.15	25
# R392	- extracranial approach	10	1485.10	20

Orbital cranial osteotomy*

# R380	- intracranial approach	12	1495.50	25
# R381	- extracranial approach	10	1121.50	20

Late correction traumatic enophthalmos

Tessier Technique - total periorbital stripping and bone grafts.

# R680	- intracranial	12	1997.05	25
# R681	- extracranial	10	1443.95	20

Harvesting of bone graft when not included

# Z263	Iliac bone graft		102.35	
	Rib graft			
# Z264	- one rib		154.00	
# E975	- each subsequent rib add		76.50	
	Costochondral or chondral graft			
# Z265	- one rib		230.65	
# E976	- each subsequent rib add		154.00	
# Z266	- split cranial graft		204.80	

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst Surg Anae

SURGERY FOR CORRECTION OF DOWN'S SYNDROME FACIAL STIGMATA

Augmentation of zygoma (bilateral)

# Z267	- with prosthetic implant	184.60
# Z268	- with autogenous bone or cartilage*	230.65

Augmentation of chin

# Z269	- with prosthetic implant	154.00
# Z270	- with autogenous bone or cartilage*	189.45
# Z271	Horizontal resection, red lower lip	184.60

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst	Surg	Anae
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REDUCTION

Fractures

Orbit - open reduction rim/wall fracture			
# E173	Zygomatic fracture dislocation	6	276.55
# E933	- with miniplate(s)**, per major fracture line. add		69.05
# E934	- with primary bone graft (separate site) add		204.80
Orbit			
# E174	- blowout fracture of floor	6	322.45
# E934	- with primary bone graft (separate site) add		204.80
Nasal bones - to include manipulation of nasal septum			
# F136	- closed reduction		102.35
# F137	- open reduction***		256.40
# E825	- with miniplate(s)**, per major fracture line add		63.95
Orbit with maxilla			
# F150	- closed reduction and dental wiring		256.40
# F142	- with wiring and local fixation.	6	394.25
# E830	- with miniplate(s)**, per major fracture line. add		98.55
# E932	- unilateral add		205.00
# E935	- bilateral add		307.70

Note:

E932, E934, and E935 are not to be billed with Z263, Z264, Z265, Z266, E975, or E976.

Midface fractures

- application of craniofacial suspension wires and external fixation devices (not to be billed in addition to maxillary repair).			
# F143	- middle ¼ facial	6	429.60
# E830	- with mini-plate(s)**, per major fracture line add		98.55
# F144	- cranial-facial separation	6	542.60
# E830	- with mini-plate(s)**, per major fracture line add		98.55

Mandible

# F138	- closed reduction (including wiring of teeth).	6	256.40
# F139	- open reduction (may include wiring of teeth) one side	6	342.55
# E828	- with miniplate(s)**, per major fracture line add		85.70
# F146	- complicated (see General Preamble GP12).	I.C	I.C

Note:

1. ** Where mini-plate(s) are used, one mini-plate fee per each major fracture line (e.g. infraorbital, malar-zygomatic, nasal-frontal, LeFort I, LeFort II and III) (per major fracture line per side) should be billed.
2. *** If a full septoplasty is performed, claim in addition the septoplasty codes at 50%. See listings under Nose - Reconstruction.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst Surg Anae

REDUCTION

Dislocations

		Asst	Surg	Anae
Temporomandibular joint				
# D062	- closed reduction		51.65	6
# D063	- open reduction	6	256.40	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

	Asst	Surg	Anae
AMPUTATION			
# R631 Hemipelvectomy - hindquarter	10	796.20	15
# R630 Hip disarticulation	10	449.20	10
ARTHRODESIS			
# R469 Sacro-iliac joint	6	395.25	6
# R514 Symphysis pubis	6	387.00	6
# R470 Hip	6	703.45	8
ARTHROPLASTY			
# R439 Unipolar	6	490.95	8
# R440 Total hip replacement - acetabulum and femur	8	696.00	8
# R553 Total hip replacement with take down of fusion	8	972.90	10
Revision total arthroplasty hip - one or both components			
# R241 - acetabular or femoral	8	1304.80	10
# E589 - bone graft to acetabulum add		101.25	
# E593 - acetabular reconstruction (extensive, including bone grafts) add		194.00	
# R481 Reattachment of greater trochanter (late)	6	290.55	8
Removal only			
# R443 - non-cemented	6	447.30	8
# R488 - cemented	6	557.75	8
# R491 Replacement acetabular liner and/or femoral head	8	353.25	8
ARTHROSCOPY			
# E595 - preceding surgery - same surgeon add		63.15	
Hip joint			
# Z218 - sole procedure		97.35	6
Note: A maximum of 2 R codes may be billed in conjunction with E595 at any one sitting.			
ARTHROTOMY			
# R547 Sacro-iliac joint	6	290.55	6
# R415 Hip - with removal of loose body	6	301.60	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst	Surg	Anae
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ASPIRATION/INJECTION

See Diagnostic and Therapeutic Procedures - Injections and Infusions.

# Z290 Hip - infant or child, under general anaesthesia.	6	63.95	6
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BIOPSY

Bone

Z212 - punch needle		72.35	
# Z217 - under general anaesthetic		72.35	6
# Z214 - open		144.80	6

Joint

# R415 - open	6	301.60	6
# E563 - via arthroscope add		11.10	

Soft tissue

# Z228 - open		97.35	6
Z219 Muscle needle biopsy, soft tissue, per site.		25.15	

DENERVATION/DECOMPRESSION

Exploration, decompression, division, excision, biopsy, neurolysis and/or transposition

# N188 - minor nerve - including digital, cutaneous or lateral femoral cutaneous nerve	6	153.70	6
# N285 - major nerve - excluding carpal tunnel or ulnar nerve at elbow	6	256.15	6
# N177 Sciatic nerve in buttock	6	430.75	
R427 Denervation of hip	6	387.00	6

Note:

N188 or N285 when performed through the same incision as flexor tendon repairs
R585 or E581 is an insured service payable at nil.

INCISION AND DRAINAGE

# R269 Bone	6	290.55	6
# Z226 Bursae/soft tissue		97.35	6
# R415 Joint	6	301.60	6
# R249 Sequestrectomy	6	379.50	6
# R250 Saucerization and bone graft.	6	627.30	6

EXAMINATION/MANIPULATION

Z252 Manipulation - under general anaesthetic		39.00	6
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Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst	Surg	Anae
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EXCISION

Bone

# R639	Simple cyst, etc.....	6	338.75	6
# R330	Major resection tumour	6	629.65	6
# R216	Radical resection tumour.....	8	1007.35	8
# F115	Coccyx	6	208.80	6
# R315	Head and neck, femur	6	452.90	6

Muscle

# R522	- simple.....	6	193.00	6
# R523	- complex	6	484.35	6
# R524	- myositis.....	6	289.50	6

Joint

# R423	Synovectomy/debridement	6	470.50	6
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Bursae

# R590	GT trochanteric/ischial.....	6	201.40	6
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RECONSTRUCTION

Pseudoarthrosis

# R364	Pelvis	8	580.90	10
# R328	Hip	6	477.90	6

Osteotomy

Pelvis

# R265	- infant.....	8	399.00	8
# R273	- other.....	8	580.90	8
# R263	Hip	6	539.15	7

Muscle/Tendon

# R521	Muscle release.....	6	314.60	6
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Tenotomy

# Z232	- closed adductors		49.20	6
# Z233	- open adductors.....		97.35	6
# R545	- iliopsoas	6	266.35	6

Tendon Transfer

# R570	Iliopsoas	6	520.60	6
# R569	Abductor	6	339.65	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst	Surg	Anae
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REDUCTION

Fractures

Coccyx

	UVC	- no reduction		visit.fee	
# F115		- excision	6	208.80	6

Pelvic ring

	UVC	- no reduction		visit.fee	
# F134		- closed reduction	6	442.45	6
# F135		- open reduction	6	680.30	8

Sacrum

	UVC	- no reduction		visit.fee	
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Femoral neck trochanteric, subtrochanteric

	UVC	- no reduction		visit.fee	
# F098		- closed reduction/traction	6	426.90	6
# F099		- open reduction - pin only	6	408.30	8
# F100		- open reduction - pin and plate/screws (cannulated included)	6	498.95	8
# F101		- open reduction - primary prosthesis, femur only (includes Moore, Thompson, Unipolar, Bipolar)	6	490.95	8
# R600		- delayed/staged graft	6	289.50	8

Slipped epiphysis

	# R607	- closed reduction/traction	6	387.00	8
	# R642	- closed reduction/internal fixation	6	387.00	8
	# R627	- open reduction/fixation	6	580.90	8

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst	Surg	Anae
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REDUCTION

Dislocations

Acetabulum

UVC	- no reduction		visit.fee	
# D052	- open reduction - lips	7	612.45	8
# D046	- open reduction - one pillar	6	967.90	10
# D047	- open reduction - two pillars	8	1451.45	12

Hip

# D042	- closed reduction		268.25	6
# D043	- open reduction	7	406.45	7
# R628	- late, after four weeks - open	7	774.90	10

Note:

May not be claimed with D042 at the same time.

Sacro-iliac

# D059	- closed, traction, spica, etc.		428.50	6
# D060	- open reduction	6	593.00	6

Sacro-coccygeal

UVC	- closed reduction		visit.fee	
# D061	- open, removal of coccyx.	6	193.00	6

Congenital hip

# R404	- closed reduction (includes tenotomy and cast).		190.20	6
# R405	- repeat (includes cast)		131.80	6
# R406	- open reduction (includes tenotomy and arthrotomy).	7	472.35	7

Z291	Application Pavlik Harness or C.D.H. Splint		24.10	
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MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FEMUR

Asst	Surg	Anae
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AMPUTATION

# R625 Gritti-Stokes or Callander	6	305.25	6
# R626 Through femur	6	306.30	6

BIOPSY

Bone

# Z869 - core, punch		39.10	6
# Z870 - x-ray control/general anaesthetic		97.35	6
# Z242 - open	6	193.00	6

Soft tissue

# Z228 - open		97.35	6
Z219 Muscle needle biopsy, soft tissue, per site.		25.15	
# R256 Injection into bone cysts.		117.00	

INCISION AND DRAINAGE

# R242 Bone	6	325.75	6
# R245 Sequestrectomy	6	395.25	6
# R243 Saucerization and graft	6	619.90	6
# Z226 Soft tissue		97.35	6

EXCISION

Bone

# R314 Simple cyst/exostosis	6	225.50	6
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Bone tumour

# R330 - simple	6	629.65	6
# R216 - with reconstruction/graft	8	1007.35	8

Muscle

# R522 - simple	6	193.00	6
# R523 - complex	6	484.35	6

RECONSTRUCTION

Fascial

# R632 - simple	6	193.00	6
# R633 - complex with or without synthetic graft or rotation flap . . .	6	402.75	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FEMUR

Asst	Surg	Anae
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RECONSTRUCTION

Pseudoarthrosis

# E048	- intramedullary nail with distal and proximal locking screws - femur add		108.75	
# R328	Bone graft with or without external fixation.	6	477.90	6
# R967	Circular external fixation	6	291.40	6

Deformity

# R262	Osteotomy femoral shaft	6	532.65	6
# R215	Osteotomy supracondylar	6	387.00	6
# R963	Single level correction - circular external fixation.	6	638.40	6
# R964	Double level correction - circular external fixation	6	798.10	6
# R965	Bone transport - circular external fixation (less than or equal to 6 cm)	6	655.15	6
# R966	Bone transport - circular external fixation (greater than 6 cm) . .	6	763.80	6

Leg Length Discrepancy

# R333	Femoral shortening	6	480.70	6
# R332	Femoral lengthening	6	541.95	6
# R968	Lengthening with circular external fixation (less than or equal to 6 cm)	6	546.55	6
# R969	Lengthening with circular external fixation (greater than 6 cm) .	6	763.80	6
# R340	Femoral epiphysiodesis.	6	301.60	6
# R341	Tibial and femoral epiphysiodesis	6	426.90	6
# R343	Femoral stapling	6	313.65	6
# R344	Tibial and femoral stapling.	6	387.00	6

Muscles/Tendons

Quadriceps repair

# R589	- simple	6	227.40	6
# R587	- reconstructive	6	387.00	6
# R530	Quadricepsplasty - all types.	6	381.40	6
# R561	Ilio-tibial band.	6	190.10	6
# Z197	Closed release of ilio-tibial band		49.20	6

Tenotomy of hamstrings

# R543	- single	6	168.85	6
# R562	- multiple	6	193.00	6

Lengthening of hamstrings

# R557	- single	6	223.65	6
# E050	- each additional add		77.05	
# R571	Tendon or muscle transfer.	6	307.15	6
# E049	- each additional add		87.20	
# R524	Excision of myositis	6	289.50	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FEMUR

Asst	Surg	Anae
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REDUCTION

Fractures

No reduction				
UVC	- cast and bed rest			visit.fee
Closed reduction				
F094	- traction - infant or child	6	258.00	6
# F095	- traction - adult or adolescent	6	407.35	6
# F097	- cast	6	258.90	6
# F096	- open reduction	6	493.80	8
Femoral shaft/supracondylar				
# E048	- intramedullary nail with distal and proximal locking screws - femur			108.75

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE		Asst	Surg	Anae
AMPUTATION				
# R625	Through knee - disarticulation	6	305.25	6
ARTHRODESIS				
# R468	Knee	6	402.75	6
ARTHROPLASTY				
# E564	- revision of arthroplasty add 35%			
# R509	Patellar arthroplasty	6	241.60	6
Hemiarthroplasty				
# R482	- single component (e.g. MacIntosh)	6	351.70	6
# R483	- double component (e.g. Marmar)	6	619.90	6
# R441	Total replacement/both compartments	8	619.90	8
# R248	Total knee replacement with take down of fusion	8	838.00	8
# R244	Revision total arthroplasty knee	8	1174.30	8
# E598	- with associated patellar replacement or patelloplasty, to R482, R483, R441, R248 or R244 add		94.60	
# R442	Replacement Liner	8	353.25	8
Claims submission instruction: When a unicondylar knee arthroplasty is revised to a total knee replacement without use of stems and/or augments, submit claim using R441 total replacement/both compartments.				
# R496	Removal of hemiarthroplasty - without replacement	6	242.25	6
# R497	Removal of total arthroplasty - without replacement	6	368.40	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst	Surg	Anae
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ARTHROSCOPY

# E595	- arthroscopy in association with surgery - same surgeon..... add		63.15	
# Z218	Diagnostic arthroscopy (sole procedure).....	6	97.35	6
# R191	Synovial biopsy.....	6	43.60	6
# R192	Trimming of plica, tissue, meniscus.....	6	63.75	6
# R193	Removal of loose body, screw.....	6	192.00	6
# R194	Resection of plica.....	6	88.20	6
# R195	Lateral release.....	6	161.45	6

Synovectomy

# R196	- anterior, 1 compartment.....	6	130.85	6
# R197	- anterior, more than 1 compartment.....	6	262.60	6
# R198	- total, anterior and posterior.....	6	481.70	6
# R199	Drilling of defect (includes removal of loose body).....	6	251.55	6
# R203	Pinning of osteochondral fragment.....	6	251.55	6

Debridement

# R204	- 1 compartment.....	6	251.55	6
# R205	- more than 1 compartment.....	6	326.55	6
# R206	Abrasion arthroplasty.....	6	288.60	6
# R207	Meniscectomy.....	6	240.45	6
# R208	Repair medial or lateral meniscus.....	6	336.65	6

Note:

A maximum of 2 R codes may be billed in conjunction with E595 at any one sitting.

ARTHROTOMY

# R412	Knee - with or without removal of loose body.....	6	207.90	6
# R413	Osteochondritis dissecans with drilling and/or internal fixation .	6	267.25	6

ASPIRATION

See Diagnostic and Therapeutic Procedures - Injections or Infusions.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst	Surg	Anae
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BIOPSY

Bone/joint

Z870	- needle.....		97.35	6
# Z242	- open	6	193.00	6
# E563	- via arthroscope		11.10	

Soft tissue

# Z228	- open		97.35	6
Z219	Muscle needle biopsy, soft tissue, per site.		25.15	

DENERVATION/DECOMPRESSION

# R426	Denervation of knee.	6	258.00	6
# N285	Denervation of gastrocnemius	6	256.15	6

INCISION AND DRAINAGE

# Z226	Soft tissue		97.35	6
# R444	Joint	6	193.00	6

EXAMINATION/MANIPULATION

Z222	Manipulation - under general anaesthetic (see Surgical Preamble SP5).		24.10	6
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Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

EXCISION

Baker's cyst

# R431	- simple	6	148.50	6
# R434	- extensive	6	264.50	6
# R501	Cysts of meniscus	6	126.25	6
# R429	Meniscectomy	6	241.30	6
# R417	Debridement of joint without synovectomy.	6	290.55	6
# R424	Synovectomy	6	430.65	6
# R506	Prepatellar bursae	6	149.45	6
# R312	Patella - to include fascial repair	6	276.55	6
# R318	Excision exostosis/cyst patella.	6	126.25	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst	Surg	Anae
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RECONSTRUCTION

Meniscus

# R508	Suturing of medial or lateral meniscus	6	242.25	6
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Muscles/Tendons

Tenoplasty

# R584	- one	6	144.80	6
# E050	- each additional add		77.05	

Suture of patellar or quadriceps tendon

# R589	- early	6	227.40	6
# R587	- late	6	387.00	6

Transplant of tendon

# R571	- single	6	307.15	6
# E049	- each additional add		87.20	

Tenotomy

- closed

# Z237	- one		49.20	6
# Z238	- multiple		72.35	6

- open

# R564	- one	6	232.00	6
# R566	- multiple	6	253.30	6

# R516	Release patellar retinaculum	6	161.45	6
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Ligaments

# R599	- simple - one	6	361.95	6
# R542	- extensive/multiple (including synthetics)	6	517.85	6
# E059	- revision/repair following previous reconstruction of knee ligaments to R542 add 30%			
# R484	- synthetic anterior/posterior cruciate	6	493.80	6
# R539	- removal of synthetics	6	213.45	6

REDUCTION

Fractures

Patella

# F085	- no reduction		67.75	
# F087	- open reduction or excision with or without repair	6	275.65	6
# F021	Osteochondral fracture - open reduction	6	327.00	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst	Surg	Anae
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REDUCTION

Dislocations

Knee

# D038	- closed reduction	207.90	6
# D039	- open reduction	6	309.00

Patella

- closed reduction			
# D040	- without anaesthetic	62.20	
# D031	- with anaesthetic	97.35	6
- open reduction			
# D041	- early	290.55	6
# R255	- late	6	484.35
# R403	- repair recurrent dislocation (includes inspection of joint).	6	393.40
# R515	Congenital dislocation - knee (open)	6	484.35

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FIBULA AND TIBIA

		Asst	Surg	Anae
AMPUTATION				
# R624	Tibia/fibula	6	306.30	6
BIOPSY				
Bone				
# Z870	- simple - punch		97.35	6
# Z242	- open	6	193.00	6
Soft tissue				
# Z228	- open		97.35	6
Z219	Muscle needle biopsy, soft tissue, per site.		25.15	
# R256	Injection into bone cysts.		117.00	
DECOMPRESSION/DENERVATION				
# R495	Decompression of fascial compartments.	6	320.20	6
# Z783	Secondary closure.		97.35	6
# Z251	Catheter insertion		49.20	
UVC	Monitoring of pressure monitoring device		visit.fee	
# N184	Decompression of posterior tibial or common perineal nerve ..	6	165.20	6
INCISION AND DRAINAGE				
# R237	Bone	6	308.10	6
# R239	Sequestrectomy.	6	329.40	6
# R238	Saucerization and bone grafting	6	411.20	6
# Z226	Soft tissue		97.35	6
EXCISION				
# R311	Exostosis/cyst	6	201.40	6
# R210	Fibular head.	6	193.00	6
Tumour				
# R295	- simple	6	289.50	6
# R253	- extensive with repair.	6	648.20	6
# R246	Excision bony ridge to include interpositional materials	6	385.15	6
Muscle/soft tissue				
# R522	- simple	6	193.00	6
# R523	- complex	6	484.35	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FIBULA AND TIBIA

Asst	Surg	Anae
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RECONSTRUCTION

Pseudoarthrosis

# E041	- intramedullary nail with distal and proximal locking screws - tibia add		81.55	
# R326	Tibia/fibula	6	348.00	6
# R327	By-pass fibular graft.	6	341.45	6
# R372	Congenital pseudoarthrosis	6	484.35	6
# R970	Circumferential external fixation.	6	291.40	6

Deformity

# R289	Osteotomy tibia and fibula - adult or child	6	376.80	6
# R971	Single level correction - circular external fixation	6	510.35	6
# R972	Double level correction - circular external fixation	6	638.40	6
Bone transport				
# R973	- circular external fixation (less than or equal to 6 cm)	6	634.70	6
# R974	- circular external fixation (greater than 6 cm).	6	763.80	6
# R403	Osteotomy repair recurrent dislocation (includes inspection of the joint)	6	393.40	6

Leg Length Discrepancy

# R331	Tibial lengthening.	6	470.50	6
# R458	Tibial shortening	6	387.00	6
# R341	Tibial and femoral epiphysiodesis	6	426.90	6
# R339	Tibial epiphysiodesis	6	322.05	6
Tibial stapling				
# R342	- one side	6	193.00	6
# R460	- both sides	6	242.25	6
# R344	Tibial and femoral stapling.	6	387.00	6
# R975	Lengthening with circular external fixation (less than or equal to 6 cm)	6	438.00	6
# R976	Lengthening with circular external fixation (greater than 6 cm)	6	655.15	6

REDUCTION

Fractures

Tibia with or without fibula				
# F078	- no reduction, rigid immobilization		115.95	
# F079	- closed reduction	6	180.05	6
# F080	- open reduction - shaft.	6	356.40	6
Intramedullary nail with distal and proximal locking screws				
# E041	- tibia add		81.55	
# F081	- medial or lateral tibial plateau.	6	394.45	6
# E532	- both tibial plateaus, same knee add 50%			
Fibula				
# F082	- no reduction, rigid immobilization		67.75	
# F083	- closed reduction		101.25	6
# F084	- open reduction	6	230.20	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

	Asst	Surg	Anae
AMPUTATION			
# R620 Metatarsal/phalanx disarticulation	6	155.90	6
# E585 - each additional add		47.30	
# R621 Ray (single)	6	217.15	6
# R623 Symes	6	285.80	6
# R622 Transmetatarsal/transtarsal	6	235.75	6
# R619 Terminal Symes.	6	144.80	6
ARTHRODESIS			
# R466 Ankle	6	389.75	6
# R552 - revision of arthrodesis.	6	506.65	6
# R471 Interphalangeal	6	151.85	6
# E575 - each additional add		41.70	
# R477 Metatarsophalangeal	6	247.25	6
# R474 Midtarsal/subtalar	6	370.85	6
# R513 Triple	6	423.80	6
# R475 Pan-talar, one stage	6	626.45	6
ARTHROPLASTY			
# E564 - revision of arthroplasty add 35%			
# R493 Ankle - total replacement.	8	1177.50	10
# R479 Removal of prosthesis without replacement	6	193.00	6
Metatarsophalangeal interposition			
# R456 - single	6	144.80	6
# E538 - each additional add		38.00	
# R453 Metatarsophalangeal (Swansons, etc.)	6	289.50	6
# R454 - multiple	6	387.00	6
# R500 Removal - prosthesis without replacement	6	144.80	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES



MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

	Asst	Surg	Anae
INCISION AND DRAINAGE			
# R220 Bone	6	227.40	6
# Z226 Bursae		97.35	6
# R503 Joints	6	167.10	6
# Z228 Soft tissue - open.....		97.35	6
# R201 Sequestrectomy.....	6	193.00	6
# R202 Saucerization and bone graft.....	6	387.00	6
EXAMINATION/MANIPULATION			
Z222 Manipulation - under general anaesthetic (see Surgical Preamble SP5).		24.10	6
Note: Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.			
Club foot, etc. - manipulation and cast/strapping			
Z235 - without anaesthetic.....		19.45	
E584 - application of plaster cast outside hospital		11.15	
# Z224 - with anaesthetic		39.00	6
EXCISION			
Bone			
# R299 Phalanx	6	127.15	6
# R309 Metatarsal head.....	6	175.45	6
# E587 - each additional		41.70	
# R305 Accessory navicular (scaphoid).....	6	155.90	6
# R302 Bunion/bunionette	6	150.30	6
# R307 Calcaneal spur.....	6	139.25	6
# R282 Exostosis (dorsal, subungual)	6	100.15	6
# R308 Os calcis, talus.....	6	283.95	6
# R301 Sesamoid, one or both.....	6	142.00	6
# R306 Tarsal bar	6	230.20	6
# R266 Tumour (foot).....	6	241.30	6
Joint			
# R420 Ankle synovectomy	6	273.75	6
Metatarsophalangeal synovectomy			
# R425 - one	6	226.40	6
# R414 - two or more.....	6	339.65	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst	Surg	Anae
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EXCISION

Soft Tissue

# R549	Ganglion - simple or complex	6	177.80	6
# R506	Bursa	6	149.45	6
# R551	Fascia for Dupuytren's - partial or complete	6	322.15	6

Muscle

# R522	- simple	6	193.00	6
# R523	- complex	6	484.35	6

RECONSTRUCTION

Pseudoarthrosis

# R363	Malleoli	6	296.05	6
# R321	Tarsals/metatarsals/phalanx	6	260.75	6

Deformity

Osteotomy

# R259	- os calcis	6	297.85	6
# R276	- metatarsals and phalanx	6	144.80	6
# E596	- each additional		41.70	
# R277	- midtarsal/tarsal	6	242.25	6

Shortening metatarsal

# R337	- one	6	225.50	6
# R338	- two or more	6	272.80	6
# R977	Circular external fixation without osteotomy*	6	583.75	6
# R978	Circular external fixation with osteotomy*	6	729.45	6
# R979	Circular external fixation with multiple osteotomies*	6	911.30	6

Note:

* This requires the application of tibial apparatus.

Forefoot

# R430	Claw and hammer toe	6	151.25	6
# E594	- each additional hammer toe		41.70	

Hallux Valgus

# R304	- e.g. Mayo, Keller	6	217.15	6
# R355	- e.g. Joplin, McBride	6	267.25	6
# R360	Major forefoot reconstruction, must include the first MP joint and a minimum of 2 other MP joints	6	459.45	6
# R446	Overlapping 5th toe	6	136.35	6

Club Foot

# R408	Posterior or medial release	6	312.70	6
# R448	Posteromedial release, lateral shortening, tendon transfers and fusion	6	371.20	6
# R313	Complex reconstruction or revision of previous club foot repair (not to include simple tendon releases)	6	468.65	6
# R546	Plantar fascia release (Steindler)	6	165.20	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst	Surg	Anae
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RECONSTRUCTION

Ligaments

Ankle

# R597	- one	6	301.60	6
# R548	- extensive/multiple	6	511.45	6

Tendons

# R640	Exploration - tendon sheath	6	126.25	6
Tenolysis - extensive release				
# R556	- one	6	202.25	6
# E599	- each additional digit		87.20	
Tendon transfer foot and ankle				
# R565	- single	6	253.30	6
# E055	- each additional		94.60	
# R572	Tenodesis	6	258.90	6
# R560	Graft	6	253.30	6
# E053	- each additional		94.60	
Lengthening or shortening				
# R557	- one	6	223.65	6
# E050	- each additional		77.05	
Suture extensor tendon				
# R578	- one	6	164.10	6
# E580	- each additional		70.95	
Suture flexor tendon				
# R585	- one	6	307.60	6
# E581	- each additional		128.95	
Achilles tendon repair				
# R589	- early	6	227.40	6
# R587	- late	6	387.00	6
Tenotomy - open				
# R579	- one toe		87.20	6
# R581	- more than one toe		193.00	6
Tenotomy - closed				
# Z229	- one toe		49.20	6
# Z243	- more than one toe		97.35	6
Achilles or tibialis anterior/posterior tenotomy				
# R544	- open	6	171.70	6
# R555	- closed		132.70	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

	Asst	Surg	Anae
REDUCTION			
Fractures			
Ankle			
# F074 - no reduction - rigid immobilization		67.75	
# F075 - closed reduction	6	144.80	6
- open reduction			
# F076 - one malleolus	6	237.50	6
# F077 - multiple malleoli or ligaments	6	311.85	6
Ankle fracture with tibial Plafond burst			
# F104 - closed reduction	6	242.25	6
# F108 - open reduction	6	362.95	6
Metatarsus			
F061 - one or more		49.20	
F062 - with rigid immobilization		67.75	
- closed reduction			
F063 - one or more	6	98.35	6
E584 - application of plaster cast outside hospital		11.15	
- open reduction			
# F064 - one	6	178.20	6
# F065 - two or more	6	249.65	6
Os calcis			
F070 - no reduction - rigid immobilization		97.35	
F071 - closed reduction		161.45	6
E584 - application of plaster cast outside hospital		11.15	
- open reduction			
# F072 - with repair of both the subtalar and calcaneocuboid joints	6	394.15	6
Phalanx			
F056 - no reduction - rigid immobilization		49.20	
E584 - application of plaster cast outside hospital		11.15	
E560 - each additional		12.05	
F058 - closed reduction - one		72.35	6
E584 - application of plaster cast outside hospital		11.15	
E561 - each additional		14.90	
# F060 - open reduction	6	172.30	6

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst	Surg	Anae
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REDUCTION

Fractures

Tarsus excluding os calcis

F066	- no reduction - rigid immobilization		98.10	
F067	- closed reduction	6	165.20	6
E584	- application of plaster cast outside hospital add		11.15	
# F068	- open reduction	6	237.50	6

Intra-articular fracture - I.P. Joint

F057	- closed reduction		77.95	
E584	- application of plaster cast outside hospital add		11.15	
# F059	- open reduction	6	144.80	6

Dislocations

Ankle

# D035	- closed reduction	6	111.35	6
# D036	- open reduction	6	252.45	6
# R402	- recurrent dislocation and/or subluxation	6	367.45	6

Interphalangeal

D027	- closed reduction		57.50	6
E584	- application of plaster cast outside hospital add		11.15	
E578	- each additional add		10.25	
# D029	- open reduction	6	151.25	6

Metatarsophalangeal

D030	- closed reduction		57.50	6
E584	- application of plaster cast outside hospital add		11.15	
E579	- each additional add		10.25	
# D032	- open reduction	6	163.35	6

Tarsus

D033	- closed reduction		147.60	6
E584	- application of plaster cast outside hospital add		11.15	
# D034	- open reduction	6	252.45	6