

MUTUAL BENEFIT HEALTH & ACCIDENT ASSOCIATION OMAHA

(Herein called the Association)

IN CONSIDERATION of the application of

GOVERNMENT EMPLOYEES HEALTH ASSOCIATION, INC.

(Herein called the Policyholder)

for this policy, copy of which application is attached hereto and made a part hereof, and in consideration of the payment by the Policyholder of the initial premium and of the payment thereafter by the Policyholder, during the continuance of this policy, of all premiums as they become due, as hereinafter provided,

HEREBY AGREES to pay, with respect to the protected persons insured hereunder, in accordance with and subject to all the terms, conditions and limitations of this policy, the benefits described herein, if and when any such protected person becomes entitled thereto.

The term of this policy begins on the effective date September 6, 19 60, at 12:01 A.M. Standard Time of the place where the main office of the Policyholder is located and ends on the first anniversary thereof, as set forth hereinafter, but the policy may be continued, as hereinafter provided, upon due payment of premiums.

The provisions set forth on the following pages are a part of this contract as fully as though recited at length over the signatures hereto affixed.

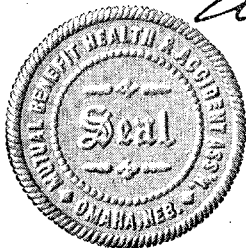
IN WITNESS WHEREOF, MUTUAL BENEFIT HEALTH & ACCIDENT ASSOCIATION has caused this policy to be signed by its President and its Secretary.

W. J. Maginn

Secretary.

V. J. Skutt

President.



GROUP POLICY NO.
GMG-1810

Form 701 MGM

77

GENERAL PROVISIONS

1. **ELIGIBILITY.** Each person within the classes shown in the Plan of Insurance and Application shall become eligible for insurance as hereinafter provided.

All persons presently within the eligible classes shall be eligible for insurance hereunder on the effective date of the policy, except as follows: None

Each person who comes within the eligible classes after the effective date of this policy shall be eligible for insurance on the date on which such person has been within the eligible classes for a qualifying period of 60 days

Persons who are eligible by reason of employment but who are not actively at work when they would otherwise be eligible shall become eligible on the date of their return to active work.

2. **EFFECTIVE DATE OF INDIVIDUAL INSURANCE.** Each eligible person who makes written application for insurance hereunder during the required qualifying period, if any, or within thirty-one days from the date he becomes an eligible person, shall become a protected person on the date such application is made.

Any eligible person who makes written application more than thirty-one days after the date he becomes an eligible person or who applies for reinstatement of his insurance after it has been terminated because of failure to make any agreed contribution when due shall be required to furnish, at his own expense, evidence of insurability satisfactory to the Association and such insurance shall not become effective prior to a date determined by the Association.

3. **AMOUNTS OF COVERAGE.** The amounts for which a protected person is covered under this policy shall be those amounts applicable to his classification shown in the Plan of Insurance. If a protected person's classification changes, the amounts for which he is covered under this policy shall be adjusted to conform to his new classification effective the first day of the policy month following the date his classification changes, but only after the Association has been notified by the Policyholder of such change in classification as required under General Provision 10.

In the event of a change in classification or in the Plan of Insurance because of an increase or decrease in benefits, a protected person who is not actively at work on the date a change in the amount of his coverage would otherwise become effective shall not be entitled to such benefit change until he returns to active work.

4. **TERMINATION OF INDIVIDUAL INSURANCE.** The insurance of any protected person insured hereunder shall terminate on whichever of the following dates occurs first:

- (a) the first day of the policy month following the date he ceases to be within the classes of persons eligible for the insurance under this policy, or
- (b) the date that any contribution required on the part of the protected person is due and unpaid, or
- (c) the first day of the policy month following the date the Policyholder receives notice from the protected person that his insurance is to be terminated, or
- (d) the date this policy is discontinued, or
- (e) the date the protected person enters the armed forces on full-time active duty.

A person who is eligible for insurance because of employment shall cease to be within the classes of persons eligible for insurance upon termination of employment. Termination of employment shall, for the purpose of this insurance, be defined as cessation of active work by layoff, work stoppage, leave of absence, resignation, dismissal, being pensioned or retired or cessation of active work because of disability.

If a protected person ceases to be within the classes of eligible persons, his insurance shall terminate on the date specified in the preceding paragraphs, except that upon payment of the premium for such protected person by the Policyholder, he shall continue to be a protected person for an additional period of six (6) months in the event of leave of absence or disability.

If a protected person's insurance is terminated during a disability covered by this policy and the protected person returns to active work at the end of the period of his disability, his insurance under the policy may be reinstated as of the date of his return to work without evidence of insurability.

If, at the time of termination of insurance, the protected person is receiving benefits in accordance with the provisions of this policy, such benefits shall continue to be paid for the balance of the period for which he would otherwise have been entitled to such benefits.

5. CONTINUANCE OF POLICY. This Policy may be continued in force, in accordance with General Provisions 6, 7 and 8 relating to payment of premiums, for a further term of one year upon the payment, prior to the expiration of the grace period immediately following the anniversary date of the policy, of the premium for the insurance so continued.

If at any time the number of persons insured hereunder shall be less than 25, or less than 75% of those eligible for insurance, the Association reserves the right to decline to continue this policy on the first policy anniversary or on any premium due date thereafter.

6. EXPERIENCE RATING. On the first policy anniversary and upon each premium due date thereafter, providing the then current premium rate has been in effect for at least twelve months, the Association shall have the right to change the premium rates at which further premiums shall be computed, but no increase in premiums shall be retroactive.

The Association may, as of any anniversary date of this policy, declare a retroactive rate refund for the policy year just completed. Should a Policyholder qualify for such retroactive rate refund and should such refund exceed the Policyholder's share of the premium, the excess shall be applied by the Policyholder for the sole benefit of the protected persons.

7. PAYMENT OF PREMIUMS. The initial premium shall be due on the 6th day of September 1960, for the period ending on the 31st day of September, 1960. Subsequent premiums shall be payable monthly in advance on the 1st day of each month thereafter during the continuance of this policy. The policy anniversaries are deemed to occur on the 1st day of September of each year beginning in 1961. The premium due on the effective date hereof and on each subsequent due date shall be the sum of the individual premiums of each protected person determined according to his respective benefits and his classification at the time the premium is due.

All premiums or installments thereof are payable to the Association at the Home Office of the Association in Omaha, Nebraska, on or before each premium due date. Premiums may be paid annually, semiannually, quarterly, monthly, or any other mode mutually agreeable at the Association's rates therefor. The payment of any premium or installment thereof shall not maintain the policy in force beyond the due date of the next premium or installment, except to the extent hereinafter expressly provided. The Association operates on the full legal reserve basis and the contingent mutual liability hereunder shall not exceed one additional premium in the amount of the premium required herefor.

8. GRACE IN PAYMENT OF PREMIUMS—TERMINATION OF POLICY. A grace period of thirty-one days will be granted to the Policyholder for the payment of every premium due after the initial premium during which time this policy shall remain in force, unless the Policyholder or the Association shall have given previous notice that the policy is to be terminated as of the due date of such premium in which event no grace period will be allowed.

If such notice is not given and the premium is not paid before the expiration of the grace period, this policy may be terminated by the Association by mailing to the Policyholder written notice stating when, not less than five days thereafter, such termination shall be effective. In the event of such notice, or if written notice is given by the Policyholder to the Association during the grace period that the policy is to be terminated, the

Policyholder shall be liable to the Association for the pro rata premium for the period from the due date of such premium to the date of such termination.

The mailing of notice as aforesaid shall be sufficient proof of notice and shall terminate the policy as of the date stated in the notice. Delivery of such written notice whether by the Policyholder or the Association shall be equivalent to mailing.

9. POLICY CONTRACT. This policy and the application therefor together with the individual applications, if any, of the protected persons, constitute the entire contract between the parties hereto. No change or modification may be made nor the date of payment of any premium changed except by agreement in writing signed by an officer of the Association, and the Association shall not be bound by any promise or representation affecting this contract made at any time by any person other than an officer of the Association. All statements made by the Policyholder and the protected persons shall be deemed representations and not warranties and no such statement shall avoid this policy unless it is contained in the written application therefor, a copy of which is attached hereto.

10. RECORDS—INFORMATION TO BE FURNISHED. The Policyholder shall keep a record of the protected persons, containing the essential particulars of the insurance of each such person. The Policyholder shall furnish monthly, on the Association's forms such information relating to new protected persons, adjustments because of changes in classification and termination of insurance as may be required by the Association to properly administer this insurance. The Policyholder's books and records which may have a bearing on the insurance provided under this policy shall be open to the Association for inspection at any time during the policy period and within one year after termination of the policy.

11. CLERICAL ERROR. If an eligible person made proper written application for insurance hereunder during the period specified in the first paragraph of General Provision 2 and also made the required contribution, if any, to the Policyholder, but, through clerical error, the Policyholder failed to give due notice thereof to the Association, the insurance to which such eligible person would have been entitled shall nevertheless be effective from the date specified in the first paragraph of General Provision 2 as soon as proper premium remittance to the Association is made.

12. INDIVIDUAL CERTIFICATE. The Association will issue to the Policyholder for delivery to each protected person insured hereunder an individual Certificate setting forth a statement as to the insurance benefits to which such protected person is entitled under this policy and to whom such benefits are payable.

13. EXCLUSIONS AND LIMITATIONS. This policy does not cover (a) injuries arising out of or in the course of the employment of the protected person or his dependents or sickness covered by a Workmen's Compensation Act or similar legislation, (b) hospitalization or medical or surgical treatment provided by or paid for by the United States Government or any instrumentality thereof, (c) any loss caused by war or act of war, or (d) loss incurred while engaged in military, naval or air service.

SETTLEMENT OF CLAIMS

PAYMENT OF CLAIMS. All indemnities provided by this policy other than benefits, if any, for loss of time on account of disability will be payable within sixty days after receipt of due proof.

If this policy includes indemnity for loss of time on account of disability, all accrued benefits payable for loss of time will, subject to due proof of loss, be paid each two weeks during the period for which the indemnity is payable hereunder, and any balance remaining unpaid at the end of such period will be paid immediately upon receipt of due proof.

If this policy includes indemnity for loss of life of a protected person, resulting from accidental bodily injuries, any such indemnity which may become payable shall be paid to the beneficiary designated by the protected person or, if there is no beneficiary designated or surviving, to the estate of the protected person. All other indemnities shall be payable to the protected person.

Consent of a protected person's beneficiary, if one be named, shall not be requisite to any change of beneficiary, or to any changes in this policy.

If any benefits of this policy shall be payable to the estate of the protected person or to a protected person or beneficiary who is a minor or otherwise not competent to give a valid release, the Association may pay to the hospital, physician or surgeon, on whose charge or fee claim is based, any sums due for Hospital Expense Benefits, Surgical Expense Benefits or Medical Expense Benefits toward satisfaction of any amounts still owed such hospital, physician or surgeon, and any balance of such sums and any sums due for Accident and Sickness Weekly Benefits may be paid, up to an amount not exceeding \$1,000.00, to any relative by blood or connection by marriage of the protected person or beneficiary who is deemed by the Association to be equitably entitled thereto. Any payment made by the Association in good faith pursuant to this provision shall fully discharge the Association to the extent of such payment.

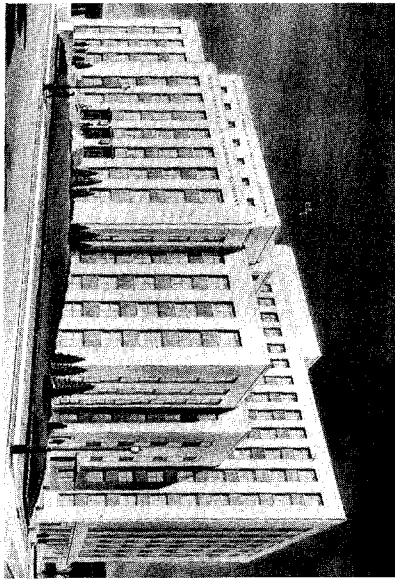
MEDICAL EXAMINATION. The Association shall have the right, through its medical examiner, to examine any protected person so often as it may reasonably require during the pendency of a claim hereunder, and the right and opportunity to make an autopsy in case of death where it is not forbidden by law.

NOTICE AND PROOF OF CLAIMS. Written notice of injury or of sickness, for which claim is made, must be given the Association at its Home Office in Omaha, Nebraska, within sixty days after the date of the accident or within sixty days after the commencement of the sickness. In event of accidental death, if covered by this policy, written notice thereof must be given to the Association within twenty days after the date of death. Proof of such injury or sickness must be furnished to the Association at its Home Office in Omaha, Nebraska, within ninety days after the end of the period of disability for which claim is made. Failure to furnish notice or proof within the required time shall not invalidate nor reduce any claim if it shall be shown that notice or proof was given as soon as was reasonably possible.

The Association will furnish such forms as are usually furnished by it for filing proofs of loss. If such forms are not so furnished before the expiration of fifteen days after the Association receives notice of any claim hereunder, the person making such claim shall be deemed to have complied with the requirements of the policy as to proof of loss upon submitting within the time fixed herein for filing proofs of loss, written proof covering the occurrence, character and extent of the loss for which claim is made.

LEGAL PROCEEDINGS. No action at law or in equity shall be brought for recovery under this policy prior to the expiration of sixty days after proof of loss has been filed in accordance with the requirements of this policy and no such action shall be brought at all unless brought within three years from the expiration of the time within which proof of loss is required by this policy.

CONFORMITY WITH STATE STATUTES. Any provision of this policy which, on its effective date, is in conflict with the statutes of the state in which the Policyholder resides on such date is hereby amended to conform to the minimum requirements of such statutes.



Countersigned by _____
Licensed Resident Agent

MUTUAL BENEFIT
HEALTH & ACCIDENT
ASSOCIATION
OMAHA

Form 701 MGM

77

LARGEST
ORGANIZATION
OF ITS KIND
IN THE WORLD

PLAN OF INSURANCE

Effective Date September 6, 1960

Classification

Class 1 - All full time active employees of
Engineering Research.

Premiums

The monthly premium for each protected person
is as follows:

Class 1	\$ 3.40
Dependents	\$10.05

CONVERSION PRIVILEGE

If a protected person ceases to be within the class or classes of persons eligible for insurance under this group policy, such protected person shall be entitled to have issued to him, without furnishing evidence of insurability, an individual policy, or, if the protected person's dependents were also insured under this group policy, a family policy; provided that such protected person is then under 76 years of age and makes written application and the first premium payment therefor to the Association within thirty days after termination of his insurance under this group policy. The form of the individual or family policy, the coverage thereunder, and all other terms and conditions thereof shall be as provided by the rules of the Association for such individual or family policy at the time of such application. Under the family policy the protected person may include only those of his dependents, excluding any dependent children over age 17, who were insured under this group policy on the date his insurance terminated.

The individual or family policy, if issued, shall become effective on the day the application is signed or on the date of termination of insurance under this group policy, whichever is the later, and any benefits which are payable under this group policy shall be excluded from coverage under the individual or family policy.

If a protected person, after converting to an individual or family policy, again becomes eligible for insurance under this group policy and his individual or family policy is continued in force after he again becomes eligible, such person shall be required to furnish, at his own expense, evidence of insurability before he may again become insured under this group policy. In the event a protected person has a family policy which is continued in force after he again becomes eligible for insurance under this group policy, such protected person shall also be required to furnish, at his own expense, evidence of insurability for each of his dependents before they may again become insured as dependents under this group policy.

Regardless of any provision contained in this conversion privilege, the issuance of any policy described herein shall be subject to all of the rules and regulations of the state in which application is made.

DEPENDENT INSURANCE

ELIGIBILITY. The insurance specified herein on account of Dependents is applicable only if the protected person is eligible for, has requested, and is insured for such dependent insurance.

Eligible dependents shall include the spouse of the protected person and the protected person's unmarried children, excluding in any case: *a child until he is 19*

- at 19.*
- (a) ~~a child more than 18 years of age, except that unmarried children who are 18 but less than 23 years of age are eligible if they are wholly dependent upon the protected person for support and maintenance and their time is devoted principally to attending school or college,~~ *19*
 - (b) the spouse of the protected person, if legally separated from the protected person, and
 - (c) any dependent who is eligible for insurance under the policy as a protected person.

If both husband and wife are insured under this policy as protected persons, children may be insured as dependents of the husband or wife, but not both.

A protected person's children shall include any step-children, legally adopted children, *illegitimate* and ~~foster children~~ provided such children are dependent upon the protected person for support and maintenance.

EFFECTIVE DATE OF DEPENDENT INSURANCE. If a protected person makes application for dependent insurance in his original application for insurance (provided such application was made during the required qualifying period, if any, or within thirty-one days from the date the protected person became eligible for insurance under this policy), such dependent insurance shall become effective on the date the protected person's insurance becomes effective. If a protected person has no eligible dependents on the date he becomes insured under this policy and subsequently acquires a dependent and makes application for insurance for such dependent within thirty-one days thereafter, such insurance for eligible dependent shall become effective on the date such application is made or the date a protected person acquires an eligible dependent, whichever is later.

If written application for dependent insurance is made at any time other than that specified in the preceding paragraph, or if a protected person applies for reinstatement of his dependent insurance after it has been terminated because of failure to make any agreed contribution when due, the protected person shall be required to furnish, at his own expense, evidence satisfactory to the Association of the insurability of each eligible dependent the protected person then has and such insurance shall not become effective prior to a date determined by the Association.

If a protected person, after his dependent insurance becomes effective, acquires an additional eligible dependent, the protected person shall be automatically insured with respect to such dependent unless the premium rate applicable to the protected person's dependent insurance would thereby be increased. If the premium rate would be increased, the protected person shall become insured with respect to such additional eligible dependent only under the conditions stated in the two preceding paragraphs.

If a dependent is confined in a hospital on the date such dependent becomes eligible or on the date a change in coverage would otherwise become effective, the dependent's insurance or change in coverage shall not become effective until final discharge from the hospital. This requirement, however, shall not apply to a new-born child confined in a hospital at birth.

TERMINATION OF DEPENDENT INSURANCE. The insurance of any dependent insured hereunder shall terminate on whichever of the following dates occurs first:

- (a) the first premium due date following the date such dependent ceases to be an eligible dependent, or
- (b) the date the protected person's coverage hereunder terminates, or
- (c) the date the protected person fails to make the agreed contribution for dependent coverage, or
- (d) the date the dependent enters the Armed Forces on full-time active duty, or
- (e) the date this policy is discontinued.

If at any time the number of protected persons insured with respect to all their eligible dependents hereunder shall be less than 75 per cent of all eligible protected persons having dependents, the Association reserves the right to decline to continue this dependent insurance on the first policy anniversary or on any premium due date thereafter.

The benefits for dependents provided herein shall be applicable only if the protected person is eligible for, has requested and is insured for such dependent benefits.

If a protected person or dependent is eligible for benefits under any other group policy issued by the Association, the amount payable under this policy shall be reduced by the amount payable under such other group policy.

PART A.
HOSPITAL EXPENSE BENEFITS

HOSPITAL ROOM BENEFIT. If a protected person or an eligible dependent, because of accidental bodily injuries or sickness, shall be confined as a resident patient in a hospital, the Association, provided such hospital confinement commences while the protected person or dependent is insured under this policy, will pay benefits for the expense actually incurred by the protected person for hospital room and board during the period of hospital confinement, but not to exceed ~~\$20.00~~ per day nor to exceed 90 days for any one period of hospital confinement.

25.00 8/1/05

MISCELLANEOUS HOSPITAL EXPENSE BENEFITS. During the period of hospital confinement for which benefits are paid under the preceding paragraph, the Association will pay for the expense actually incurred by the protected person for all other necessary care and treatment for which the hospital makes a charge (excluding charges made by the protected person's or dependent's nurse or physician) together with the expense actually incurred for regular and customary charges made by the ambulance company for transportation to and from the hospital in an ambulance (up to \$25.00 for any one period of hospital confinement), but not to exceed 100% of the first \$202.50 of covered miscellaneous hospital expenses plus 80% of the balance, and not to exceed, in the aggregate, \$5,000.00 for all such expense incurred for any one period of hospital confinement.

OUTPATIENT SERVICE IN A RECOGNIZED HOSPITAL OR CLINIC. If a protected person or an eligible dependent shall, while insured under this policy and because of accidental injuries or sickness, receive outpatient services in a hospital or clinic listed by the American Hospital Association in their Guide Issue, the Association, providing no benefits are payable under any other provision of this policy, will pay for the expense actually incurred for such service of the type described in the policy under MISCELLANEOUS HOSPITAL EXPENSE BENEFITS, but not to exceed, in the aggregate, \$202.50 for any one accident or sickness.

SUCCESSIVE PERIODS OF HOSPITAL CONFINEMENT. Successive periods of hospital confinement shall be considered one period of hospital confinement unless:

- (1) In the case of a protected person, the subsequent confinement commences after return to active work on full time or unless the subsequent confinement is due to causes entirely unrelated to the causes of the previous confinement, or
- (2) In the case of a dependent, the subsequent confinement commences more than three months after the previous confinement or unless the subsequent confinement is due to causes entirely unrelated to the causes of the previous confinement.

MATERNITY BENEFITS. If a female protected person or a dependent wife, while insured under this policy, shall become confined in a hospital as a result of pregnancy, including resulting childbirth or miscarriage, the Association will pay benefits up to \$16.00 per day during the period of hospital confinement, but not to exceed 8 days for any one pregnancy, except that for a cesarean section or miscarriage, the Association will pay for the expense actually incurred during the period of hospital confinement for hospital care, treatment and service (of the type described under HOSPITAL ROOM BENEFIT and MISCELLANEOUS HOSPITAL EXPENSE BENEFITS) received by the female protected person or dependent wife in her own behalf, but not to exceed, for any one pregnancy, the limits specified for any one period of hospital confinement under HOSPITAL ROOM BENEFIT and MISCELLANEOUS HOSPITAL EXPENSE BENEFITS.

Moreover, any bassinet or nursery charges made by the hospital for any day on which both mother and child are jointly confined in the hospital shall be deemed to be expenses attributable to the mother only and shall not be Covered Charges of the child for any purpose under this policy.

In case the female protected person or dependent wife is not hospital confined at any time during pregnancy, but is cared for at home by a registered graduate nurse, the Association, provided maternity benefits would have been payable if the protected person or dependent wife was hospital confined, will pay for the expense actually incurred for such nurse's fees, but not to exceed \$36.00 for any one pregnancy.

Maternity benefits for female protected persons are not payable unless covered under a family enrollment.

EXCEPTION. This HOSPITAL EXPENSE BENEFITS provision does not cover pregnancy, including resulting childbirth or miscarriage, except as provided under MATERNITY BENEFITS. This provision is also subject to the EXCLUSIONS AND LIMITATIONS section of the General Provisions.

PART B.
SURGICAL OPERATION EXPENSE BENEFITS

If a protected person or an eligible dependent, while insured under this policy, shall, because of accidental bodily injuries or sickness, have an operation performed or a dislocation or fracture repaired by a physician or surgeon, the Association will pay for the expense actually incurred therefor, but not to exceed that amount which results when the particular Surgical and Anesthesia Relative Value Units listed in the following Schedule for the surgical procedure performed is multiplied by the Unit Value of \$5.00.

INTEGUMENTARY SYSTEM

Skin and Subcutaneous Areolar Tissue

0192 MALIGNANT TUMORS (SMALL) 12.5 - 8/1/65
0193 MALIGNANT TUMORS (LARGE) 12.5

	Relative Value Units	Surg. Anes.
Incision		
*0101 Drainage of infected steatoma . . .	1.0	
*0102 Drainage of furuncle	1.0	
*0108 Drainage of carbuncle	1.0	
*0114 Drainage of subcutaneous abscess (where not specified elsewhere).	1.0	
*0115 Drainage of pilonidal cyst	1.0	
*0125 Drainage of onychia or paronychia, with or without complete or partial evulsion of nail.	1.0	
*0130 Incision and removal of foreign body, subcutaneous tissues, simple	2.0	
*0140 Drainage of hematoma	1.0	
*0145 Puncture aspiration of abscess or hematoma	1.0	
Excision		
0171 Biopsy of skin or subcutaneous tissue	2.0	
0178 Excision of small neoplastic, cicatricial, inflammatory or congenital lesion of skin or subcutaneous tissues, one	3.0	T
0180 more than one	4.0	4.0
0190 Wide excision of lesion of skin or subcutaneous tissues, one	5.0	T
0191 with graft or plastic closure (see 0260 to 0325)		
0215 Lipectomy (see 0178 to 0190, 0260 to 0262)		
*0230 Excision of nail, nail bed or nail fold, partial.	2.0	
0231 complete	5.0	T
0238 Excision of pilonidal cyst or sinus	20.0	7.0
0240 Excision of hidradenitis suppurativa (see 0178 to 0190, 0260 to 0319)		
0242 Excision of post-phlebitic varicose ulcer with graft (independent procedure) (see 0288 to 0319)		
Repair - Simple		
0251 Wounds, small, suture of recent small wounds requiring closure (up to 2 1/2 inches)	3.0	T

WOUNDS (NOT PLASTIC REPAIR)
1-4 SUTURES - 3.0 8-1-65
5-9 SUTURES - 5.0
10-19 SUTURES - 7.0
20 OR OVER - 10.0

Repair - Simple (continued)	Surg. Anes.
0253 Debridement, extensive abraded wounds, skin (same as 0351 to 0356)	T

Repair - Plastic Surgery
The following values (0260 to 0325) are to be applied in situations where delicate handling of tissues, meticulous closure of wounds in layers, and other time-consuming techniques commonly employed by the plastic and reconstructive surgeon are necessarily used to obtain maximum functional and cosmetic results. They include the creation or preparation of the defect and its repair. The measurements listed refer to the size of the surface defect. A copy of the operative note including operating time must be supplied upon request.

The values listed are for procedures carried out on the trunk area. Values for the same procedures carried out elsewhere on the body where greater degrees of skill, effort and time are necessary are calculated by multiplying the listed base values by the appropriate following factor:

- (a) Scalp, arms, legs one and one-half times base value
- (b) forehead, cheeks, shin, mouth, neck, axilla, genitalia, hands, feet . . . two times base value
- (c) eyelids, nose, ears, lips (except V-excisions - items 2742 to 2743) two and one-half times base value

0260 Excision and/or repair by direct closure of essentially round neoplastic, cicatricial, inflammatory, traumatic or congenital lesions creating a surface defect up to 1/8 inch in diameter	3.0	T
0261 1/8 inch to 3/8 inch in diameter	7.0	T
0262 over 3/8 inch in diameter	15.0	T
0265 Excision and/or repair by direct closure of linear lesion or wound creating a surface defect up to 1/8 inch wide and 3/4 inch long	3.0	T

Repair - Plastic Surgery (continued)		Surg.	Anes.
0266	each additional 1/2 inch	1.0	T
0275	Excision and/or repair by Z-plasty, rotation flap, advanced flap, double pedicle flap, or other rearrangement and suturing of adjacent tissues, small	15.0	T
0276	large	25.0	T

GRAFTS - List dimensions of defect covered, location of defect and type of graft. Fee includes creation or surgical preparation of defect, the obtaining and placing of the graft and the care of the donor site (except in items 0297 and 0309).

*0288	Skin grafts, pinch or split skin, less than 2 square inches	5.0	T
0289	pinch or split skin, 2 to 32 square inches	20.0	T
0291	each additional 32 square inches or part thereof at same procedure	10.0	T
0295	free full thickness, up to 3 square inches	20.0	T
0296	each additional 3 square inches or part thereof at same procedure	10.0	T
0297	requiring skin graft of local flaps to repair donor site (use multiple procedure formula to obtain value of donor site repair)		
0308	direct flap or tube pedicle formation, initial stage	20.0	6.0
0309	requiring skin graft to repair pedicle flap donor site (use multiple procedure formula to obtain value of this donor site repair)		
0310	delay, intermediate transfer, or sectioning of pedicle of tube or flap graft	15.0	4.0
0311	excision of lesion or preparation of recipient site and attachment of tube or pedicle graft. . .	20.0	T

BURNS - List percentage of body surface involved, location of involved area, age of patient, and degree of burn. (Does not include skin grafts.)

*0352	Dressings, initial or subsequent under anesthesia, small	4.0	T
-------	--	-----	---

BURNS - continued

*0353	under anesthesia, large or with major debridement, per hour	100.0	T
-------	---	-------	---

Destruction

*0401	Cauterization or fulguration of local lesion, single, small, initial	1.0	
*0402	subsequent	1.0	

BREAST

Incision			
*0430	Puncture aspiration of cyst	1.0	
0431	Mastotomy with exploration, or drainage of abscess - deep	10.0	5.0
Excision			
0441	Biopsy of breast	10.0	5.0
0445	Excision of cyst, fibroadenoma or other benign tumor, aberrant breast tissue, duct lesion or nipple (including any other partial mastectomy), unilateral	15.0	5.0
0446	Excision of chest wall tumor involving ribs	70.0	15.0
0447	Excision of chest wall tumor involving ribs plus plastic reconstruction	100.0	21.0
0451	Excision of cyst, etc., bilateral	25.0	7.0
0457	Complete (simple) mastectomy	30.0	8.0
0470	Radical mastectomy, including breast, pectoral muscles and axillary lymph nodes	60.0	12.0

MUSCULOSKELETAL SYSTEM

BONES

These fees include the application of first cast or traction device.

Incision			
0501	Aspiration biopsy of bone marrow, including sternal puncture	3.0	
0506	Incision of soft tissue, abscess from osteomyelitis	10.0	4.0
0513	Sequestrectomy for osteomyelitis or bone abscess, superficial	10.0	4.0

		Surg.	Anes.
0516	Removal of metal band, plate, screw or nail (independent procedure).....	15.0	T
OSTEOTOMY - Cutting, division or transection of bone, with or without internal fixation.			
0526	Clavicle.....	30.0	6.0
0527	Humerus.....	35.0	6.0
0530	Radius (malunited Colles' fracture).....	30.0	6.0
0531	Ulna.....	30.0	6.0
0532	Femur, subtrochanteric.....	60.0	12.0
0534	Femur, supracondylar.....	60.0	12.0
0536	Tibia.....	40.0	8.0
0537	Lesser bones.....	25.0	6.0
0538	Correction of bowlegs or knock-knees, bilateral.....	50.0	12.0
0539	unilateral.....	30.0	6.0
Excision			
0550	Biopsy bone, superficial.....	4.0	4.0
0551	deep.....	20.0	5.0
0552	Claviclectomy, partial.....	30.0	6.0
0553	total.....	50.0	9.0
0554	Astragalectomy.....	40.0	8.0
0556	Excision of head of radius.....	30.0	7.0
0557	Carpectomy, one bone.....	25.0	7.0
0560	Coccygectomy.....	30.0	7.0
0561	Patellectomy or hemipatellectomy.....	35.0	7.0
0563	Metatarsectomy.....	20.0	6.0
0565	Excision of bone marrow.....	4.0	
0566	Excision of bone cyst, chondroma, or exostosis, large bones.....	40.0	8.5
0567	small bones.....	20.0	6.0
0576	Partial ostectomy; partial excision of bone; craterization, guttering or saucerization of bone; diaphysectomy - femur, tibia, humerus, radius, fibula, etc.....	40.0	8.5
0577	lesser bones.....	20.0	6.0
0580	Radical resection of bone for tumor with bone graft, major bone.....	80.0	16.0
0581	minor bone.....	50.0	11.0
Insertion (independent procedure only; for associated procedures, see Fractures).			
0591	Insertion of wire (Kirschner wire).....	5.0	4.0

		Surg.	Anes.
0593	Insertion of metal pin (Steinmann pin).....	5.0	4.0
0595	Insertion of caliper or tongs.....	5.0	4.0
0597	Insertion of threaded or beaded wire.....	5.0	4.0

Repair

0611	Osteoplasty: shortening of bone, femur, tibia, humerus.....	80.0	12.0
0612	shortening of bone, radius ulna.....	50.0	10.0
0613	other bones.....	30.0	8.5
0614	lengthening of bone.....	100.0	18.0
0616	mandibular for prognathism or micrognathism, one or two stages.....	100.0	T

BONE GRAFT - Osteoperiosteal graft; periosteal graft. Includes obtaining and placing of graft.

0617	Bone graft; femur, tibia, humerus.....	80.0	16.0
0618	radius, ulna.....	50.0	11.0
0619	autogenous, to face or skull (including taking and placing)..... by report		T
0620	other bones.....	30.0	9.0
0622	Bone or cartilage graft, non-autogenous, or heterologous graft, to face or skull (including preparing and placing material).....	50.0	11.0
0634	Spinal fusion with partial excision of intervertebral disk (see Joints - Excision - 1075 to 1076).....	100.0	18.0
0635	Spinal fusion, more than two segments.....	80.0	17.0
0642	Lumbosacral fusion.....	70.0	15.0
0645	Scapulopexy.....	50.0	12.0
0648	Patellapexy.....	40.0	9.0
0649	Pectus excavatum - infants - plastic repair.....	30.0	7.0
0650	Pectus excavatum (major) plastic repair.....	100.0	17.0
0654	Epiphyseal-diaphyseal fusion; epiphyseal arrest; epiphysiodesis, femur.....	40.0	9.0
0655	tibia and fibula.....	40.0	9.0
0656	combined (femur, tibia and fibula).....	60.0	12.0
0657	combined (upper and lower tibial and fibular).....	60.0	12.0

0667 Freeing of bone adhesions, callus or synostosis (independent procedure) (see Osteotomy) Surg. Anes.

FRACTURES

Manipulation

*0681 Skull, nonoperative 3.0
0683 depressed with operation . . . 50.0 13.0

Facial Bones

0686 Nasal, simple, closed reduction 5.0
0687 compound, closed reduction. 10.0 T
0688 simple or compound, open reduction 20.0 7.0
0691 Malar, simple, closed reduction 5.0
0693 Malar, simple or compound, depressed, open reduction . . . 30.0 7.0
0694 multiple surgical approaches 50.0 11.0
0696 Maxilla, simple, closed reduction 5.0
0699 Maxilla, simple or compound, closed reduction, with wiring of teeth 30.0 9.5
0701 simple or compound, open reduction, with wiring of teeth or local fixation 50.0 11.0
0702 multiple, simple or compound, complicated, open reduction, and fixation by traction, head caps, multiple internal fixation, etc. 100.0 19.0
0703 Mandible, simple, closed reduction 5.0
0704 Mandible, simple or compound, closed reduction and wiring of teeth 30.0 9.0
0705 simple or compound, open reduction 50.0 11.0
0706 skeletal pinning with external fixation 40.0 10.0

Spine and Trunk

0720 Vertebral body, closed reduction, one 20.0 T
0721 more than one 30.0 T
0732 Sacrum, compound 20.0 T
0740 Clavicle, simple, closed reduction 10.0 4.0
0741 compound 20.0 4.0

Spine and Trunk (continued)

0742 simple or compound, open reduction 30.0 T
0747 Scapula, simple, closed reduction 10.0 4.0
0752 plus acromial process, simple, closed reduction . . 15.0 4.0
0753 compound 30.0 7.0
0754 simple or compound, open reduction 45.0 9.0
0756 Sternum, simple, nondepressed, closed reduction . . 10.0 4.0
0757 compound 20.0 4.0
*0761 Ribs, simple, strapping . . . 2.0

Pelvis (Ilium, Ischium, Pubis)

0767 Fracture, simple closed reduction 10.0 4.0
0770 one or more bones, compound 40.0 8.0
0771 one or more bones, simple or compound, open reduction 60.0 13.0
0772 Acetabulum, with or without other fractures of pelvis, simple, closed reduction, no displacement 20.0
0773 central, with displacement 40.0 7.0
0774 compound 30.0 7.0
0775 simple or compound, open reduction 60.0 13.0

Upper Extremity

0778 Humerus, surgical neck, simple, not requiring manipulation 15.0
0780 surgical neck, simple, requiring manipulation with general anesthesia 30.0 ^{8/1/65} 6.0
0781 compound 30.0 7.0
0782 simple or compound, open reduction 40.0 11.0
0784 shaft, simple, closed reduction 15.0
0785 simple, closed reduction with general anesthesia . 25.0 6.0
0787 simple or compound, open reduction 40.0 10.0
0788 skeletal pinning with external fixation 30.0 6.0
0791 Elbow (distal end of humerus, proximal end of radius, proximal end of ulna), condyle only, simple, closed reduction 15.0 4.0

Upper Extremity (continued)		Surg.	Anes.
0792	one or more bones, simple, closed reduction	15.0	4.0
0793	one or more bones, compound	40.0	7.0
0794	one or more bones, simple or compound, open reduction	40.0	10.0
0795	skeletal pinning with external fixation	30.0	6.0
0796	supracondylar	20.0	4.0
0797	olecranon, open reduction	30.0	8.0
0798	Radius, head, simple, closed reduction	15.0 ^{10.0}	4.0 ^{4.0}
0800	head, compound	20.0	4.0
0801	simple or compound, open reduction	30.0	8.0
0802	shaft, simple, closed reduction, without displacement	10.0	4.0
0803	simple, closed reduction, with displacement	15.0	4.0
0804	compound	20.0 ^{23.0}	4.0
0805	simple or compound, open reduction	30.0	8.0
0807	distal end, Colles' (including ulnar styloid), simple, closed reduction	15.0	4.0
0810	simple or compound, open reduction	30.0	8.0
0811	skeletal pinning with external fixation	20.0	6.0
0813	Ulna, shaft, simple, closed reduction	10.0	4.0
0814	shaft, simple, closed reduction with displacement and with general anesthesia	15.0	5.0
0815	compound	20.0	5.0
0816	simple or compound, open reduction	30.0	8.0
0817	skeletal pinning with external fixation	25.0	6.0
0820	Radius and ulna, simple, closed reduction	20.0 ^{15.0}	
0821	simple, closed reduction with general anesthesia	22.5	6.0
0823	simple or compound, open reduction	45.0	10.0
0824	skeletal pinning with external fixation	30.0	7.0
0827	Carpal bones, one, simple, closed reduction	8.0	4.0
0830	one, simple or compound, open reduction	25.0	7.0

Upper Extremity (continued)		Surg.	Anes.
0842	Metacarpal, one, simple, closed reduction	7.0 ^{8.0}	4.0
0844	one, simple or compound, open reduction	20.0	7.0
0848	skeletal pinning with external fixation	20.0	7.0
0852	Phalanx or phalanges, one finger, or thumb, simple, closed reduction	5.0 ^{8.0}	4.0
0853	one finger, or thumb, compound	6.0 ^{12.0}	4.0
0854	simple or compound, open reduction	15.0 ^{15.0}	5.0

Lower Extremity

0865	Femur, neck, simple, closed reduction, with fixation	30.0	8.0
0867	neck, simple or compound, open reduction	60.0	12.0
0868	multiple pinning, with or without external fixation	60.0	12.0
0872	intertrochanteric, simple, closed reduction with fixation	30.0	6.0
0874	simple, open reduction	60.0	12.0
0877	slipped epiphysis, closed reduction with fixation	30.0	6.0
0878	open reduction, acute	60.0	12.0
0879	reconstructive, late	100.0	18.0
0881	shaft, including supracondylar, simple, closed reduction	30.0 ^{40.0}	6.0
0882	Femur, compound with general anesthesia	40.0	9.0
0883	simple or compound, open reduction	60.0	12.0
0884	skeletal pinning with external fixation	40.0	7.0
0885	Knee (distal end of femur, proximal end of tibia, proximal end of fibula), femur or tibia, condyle - closed reduction	20.0	
0886	compound with general anesthesia	30.0	7.0
0887	simple or compound, open reduction	40.0	11.0
0889	two condyles	35.0	7.0
0895	Patella, simple	10.0	
0896	compound with general anesthesia	20.0	5.0
0897	simple, open reduction	30.0	8.0
0901	Tibia, shaft, simple, closed reduction	15.0 ^{23.0}	

Lower Extremity (continued)	Surg.	Anes.
0902 with general anesthesia . . .	22.5	6.0
0904 simple or compound, open reduction	40.0	9.0
0907 malleolus, simple, closed reduction	15.0	
0910 simple or compound, open reduction	30.0	8.0
0914 Fibula, shaft, simple, closed reduction	10.0	
0916 simple or compound, open reduction	20.0	6.0
0920 malleolus, simple, closed reduction	10.0	
0922 simple or compound, open reduction	30.0	8.0
0926 Tibia and fibula, shafts, simple, closed reduction	30.0 <i>30.0 8/1/05</i>	
0927 compound with general anesthesia	40.0 <i>40.0 8/1/05</i>	7.0
0928 simple or compound, open reduction	50.0	10.0
<i>0930</i> skeletal pinning with external fixation	40.0	7.0
0933 Ankle, bimalleolar (including Pott's) simple, closed reduction	33.0 <i>33.0 8/1/05</i>	
0934 compound, with general anesthesia	35.0 <i>35.0 8/1/05</i>	6.0
0935 simple or compound, open reduction	40.0	9.0
0938 trimalleolar, simple, closed reduction	25.0	
0940 compound, with general anesthesia	37.5	7.0
0941 simple or compound, open reduction	50.0	11.0
0944 Tarsal (except astragalus and os calcis), one, simple, closed reduction	8.0	
0945 one, compound, with general anesthesia	16.0	6.0
0946 one, simple or compound, open reduction	24.0	8.0
0955 Astragalus, simple, closed reduction	15.0	
0956 compound, with general anesthesia	22.5	6.0
0957 simple or compound, open reduction	45.0	8.0
<i>0961</i> Os calcis, simple, closed reduction	15.0	
0962 compound, with general anesthesia	22.5	6.0

Lower Extremity (continued)	Surg.	Anes.
0963 simple or compound, open reduction	45.0	8.0
0964 skeletal pinning with external fixation	30.0	6.0
0967 Metatarsal, simple, closed reduction, one	7.0	
0968 one, compound, with general anesthesia	14.0	6.0
0970 one, simple or compound, open reduction	20.0	7.0
0980 Phalanx or phalanges, one toe, simple, closed reduction . . .	3.0	T
0982 one toe, simple or compound, open reduction . . .	12.0	5.0

JOINTS

Incision

ARTHROTOMY or capsulotomy with exploration, drainage or removal of loose body, e.g., osteochondritis or foreign body.

1001	Shoulder	30.0	8.0
1002	Elbow	30.0	8.0
1003	Wrist	30.0	7.0
1006	Other joints of upper extremity	20.0	5.0
1007	Hip	50.0	10.0
1008	Knee	40.0	8.0
1010	Ankle	30.0	8.0
1013	Other joints of lower extremity	20.0	5.0
1017	Finger, one	10.0	5.0
1026	Toe, one	10.0	5.0
*1046	Arthrocentesis; puncture for aspiration of joint, or injection of medication, initial . .	2.0	
	subsequent	1.5	
1047	Sesamoid bone, excision, one or more, unilateral . .	15.0	6.0

Excision

ARTHRECTOMY - Excision of joint (see Arthrodesis).

1061	Punch biopsy of synovial membrane	3.0	
1065	Temporomandibular joint, unilateral	60.0	13.0
1074	Excision of intervertebral disk	70.0	13.0
1075	with spinal fusion	100.0	18.0
1077	Excision of neural arch and nerve exploration for spondylolisthesis	80.0	15.0

		Surg.	Anes.
1082	Meniscectomy: excision of semilunar cartilage of knee joint	40.0	8.0
1085	temporomandibular joint	50.0	9.0
1093	Synovectomy, elbow	60.0	10.0
1101	hip, complete	80.0	14.0
1102	knee	50.0	10.0
1103	ankle	40.0	9.0

Introduction

1131	Arthrography: injection of air or radiopaque material into joint for roentgen examination (X-ray charges not included)	3.0	
------	--	-----	--

Repair

ARTHROPLASTY - Plastic or reconstructive operation on joint, any type.

1141	Shoulder	70.0	15.0
1142	Elbow	60.0	12.0
1143	Wrist	50.0	10.0
1144	Finger, one joint	20.0	6.0
1150	Hip	100.0	18.0
1151	Knee	80.0	15.0
1152	Ankle	60.0	12.0
1153	Toe, one joint	15.0	6.0
1162	Metatarsophalangeal joint; bunion operation	25.0	7.0

ARTHRODESIS - Fusion of joint, with or without tendon transplant.

1166	Shoulder	70.0	15.0
1167	Elbow	60.0	13.0
1168	Wrist	50.0	10.0
1170	Finger, thumb, one joint	15.0	5.0
1175	Hip	100.0	17.0
1176	Knee	70.0	14.0
1177	Ankle	60.0	12.0
1178	Hammer toe, operation, one toe	20.0	5.0
1181	Hallux rigidus, repair of	25.0	8.0
1183	Tarsal, joints, one or more	30.0	8.0
1184	Other joints, lower extremity	30.0	7.0
1185	Foot, triple arthrodesis, unilateral	50.0	9.0
1187	Foot, with tendon transplantation	60.0	12.0
1190	Stabilization of joints by bone block	40.0	8.0

	Suture		Surg.	Anes.
1201	Capsulorrhaphy: suture or repair of joint capsule (independent procedure) for recurrent dislocation, shoulder	70.0	12.0	
1202	patella	50.0	9.0	
1211	Suture of torn, ruptured or severed collateral ligaments, knee	40.0	8.0	
1212	Suture of torn, ruptured or severed cruciate ligaments, knee	40.0	8.0	
1213	Suture of torn, ruptured or severed collateral and cruciate ligaments, knee	60.0	11.0	
1215	Reconstruction, both collateral or cruciate ligaments, knee	70.0	15.0	
1216	Reconstruction, both collateral ligaments, ankle	50.0	10.0	
1217	Reconstruction, both metacarpophalangeal or interphalangeal ligaments	30.0	8.0	

Manipulation

Manipulation of joint under general anesthesia, including application of cast or traction (independent procedure). (Dislocations excluded.)

*1221	Shoulder	5.0	T
*1222	Elbow	4.0	T
*1223	Wrist	4.0	4.0
*1224	Digits, one or more, under anesthesia, where no other surgical procedure is performed	2.5	T
*1226	Hip	6.0	T
*1227	Knee	5.0	T
*1228	Ankle	4.0	T
*1232	Spine	6.0	T
*1233	Manipulation of shoulder for fibrous ankylosis, under general anesthesia	5.0	T
1241	Turnbuckle jacket, body only, for scoliosis	10.0	
1242	Turnbuckle spica jacket for scoliosis	12.5	4.0
*1244	Club foot and application of cast, unilateral	2.0	T
*1245	application of subsequent casts, unilateral	2.0	T

		Surg. Anes.				Surg. Anes.	
*1246	application of cast, bilateral, initial	3.0	T	1301	simple or compound, open reduction	40.0	9.0
*1247	application of subsequent casts, bilateral	3.0	T	1304	Metacarpal, one bone, simple, closed reduction . . .	5.0	4.0
*1248	wedging cast	1.0		1305	one bone, compound	10.0	4.0
				1306	simple or compound, open reduction	20.0	5.0
Dislocations				*1315	Finger, one, one or more joints, simple, closed reduction	3.0	T
*1251	Temporomandibular, simple, closed reduction	5.0		1316	compound	6.0	4.0
1256	Vertebra, cervical, simple, closed reduction with general anesthesia	40.0	5.0	1317	simple or compound, open reduction	12.0	5.0
1258	cervical, simple or compound, with operation	80.0	15.0	*1326	Thumb, simple, closed reduction	3.0	T
1262	dorsal, simple, closed reduction with general anesthesia	40.0	5.0	1327	compound	10.0	4.0
1264	dorsal, simple or compound, with operation	80.0	15.0	1328	simple or compound, open reduction	15.0	5.0
1267	lumbar, simple, closed reduction with general anesthesia	40.0	5.0	1332	Hip (femur), simple, closed reduction	15.0	4.0
1270	lumbar, simple or compound, with operation	80.0	15.0	1334	simple or compound, open reduction	50.0	10.0
1273	Clavicle, sternoclavicular, simple, closed reduction	10.0	4.0	1338	congenital, closed reduction	15.0	5.0
1274	compound, with general anesthesia	20.0	4.0	1344	Knee (tibia), simple, closed reduction	10.0	4.0
1275	simple or compound, open reduction	30.0	7.0	1345	compound, with general anesthesia	20.0	4.0
1278	acromioclavicular, simple, closed reduction	7.0	4.0	1346	simple or compound, open reduction	50.0	9.0
1281	simple or compound, open reduction	30.0	7.0	1350	Patella, simple, closed reduction	5.0	4.0
*1284	Shoulder (humerus), simple, closed reduction	5.0	4.0	1351	compound, with anesthesia	10.0	5.0
1286	simple or compound, open reduction	40.0	9.0	1352	simple or compound, open reduction	30.0	8.0
1290	Elbow, simple, closed reduction	8.0	4.0	1355	Ankle, simple, closed reduction	10.0	4.0
1291	compound, with general anesthesia	16.0	5.0	1356	compound, with general anesthesia	20.0	5.0
1292	simple or compound, open reduction	40.0	9.0	1357	simple or compound, open reduction	40.0	9.0
1295	Wrist, carpal, one bone, simple, closed reduction	7.0	4.0	1361	Tarsal, simple, closed reduction	10.0	4.0
1296	compound, with general anesthesia	14.0	5.0	1362	compound, with general anesthesia	20.0	5.0
1297	simple or compound, open reduction	30.0	7.0	1363	simple or compound, open reduction	35.0	6.0
1300	more than one bone, simple, closed reduction	10.0	4.0	1371	Astragalotarsal, simple, closed reduction	10.0	4.0
	compound, with general anesthesia	20.0	5.0	1372	compound, with general anesthesia	20.0	5.0
				1373	simple or compound, open reduction	35.0	6.0

		Surg.	Anes.
1376	Metatarsal, one bone, simple, closed reduction.....	5.0	4.0
1377	compound.....	10.0	5.0
1378	simple or compound, open reduction.....	20.0	6.0
1385	Toe, one, simple, closed reduction.....	3.0	T
1386	compund.....	6.0	4.0
1387	simple or compound, open reduction.....	12.0	5.0
1391	more than one, one or more joints, simple, closed reduction.....	5.0	4.0
1392	compound.....	10.0	4.0

BURSAE

Incision			
*1401	Drainage of infected bursa . . .	3.0	
1406	Removal of subdeltoid calcareous deposits.....	15.0	T
1410	Removal of subtrochanteric calcareous deposits.....	20.0	T
*1413	Puncture for aspiration of bursae, initial.....	2.0	
*1418	subsequent.....	1.5	
*1424	Needling of bursa.....	2.0	
*1425	subsequent.....	1.5	
*1427	with irrigation of bursa.....	2.0	
*1428	subsequent with irrigation of bursa.....	1.5	

Excision			
1430	Radical excision of bursae, forearm, viz., tenosynovitis fungosa, Tbc., and other granulomas.....	50.0	10.0
1431	Excision of bursa, olecranon .	15.0	5.0
1433	prepatellar.....	15.0	5.0
1435	subacromial.....	20.0	6.0
1436	ischial.....	20.0	6.0

MUSCLES

Incision			
1450	Removal of foreign body in muscle, general anesthesia ..	10.0	T
1454	Division of scalenus anticus, without resection of cervical rib.....	25.0	6.0
1456	with resection of cervical rib.....	75.0	15.0
1456	Division of sternomastoid for torticollis, open operation . . .	25.0	7.0
1460	Muscle biopsy, superficial...	4.0	

Suture		Surg.	Anes.
1495	Suture of ruptured diaphragm.....	60.0	13.0

TENDONS, TENDON SHEATHS AND FASCIA

Incision			
*1511	Drainage of tendon sheath, infection for acute tenosynovitis, one digit.....	2.0	
1514	Drainage of tendon sheath, infection for tenosynovitis, single palm and/or wrist, ulnar or radial bursa infection, in hospital.....	30.0	5.0
*1517	Injection of medication, tendon sheath, hand.....	1.0	
1519	Incision of fibrous sheath of tendon for stenosing tenosynovitis, to include freeing of tendons or removal of foreign body, in hospital . . .	20.0	6.0
1531	Division of iliotalibial band, open operation.....	30.0	7.0
1534	Stripping of ilium (Soutter operation).....	40.0	8.0
*1535	Tenotomy, corrective, single digit, subcutaneous.....	5.0	4.0
1536	corrective, multiple.....	10.0	T
1539	hip adductors, subcutaneous.....	10.0	4.0
1541	open.....	30.0	6.0

Excision			
1550	Excision of small ganglion cysts.....	4.0	4.0
1552	Excision of lesion of tendon or fibrous sheath, including ganglion, digits only.....	10.0	4.0
1553	in other locations.....	20.0	T
1555	Radical excision of bursae, forearm, viz., tenosynovitis fungosa, Tbc., and other granulomas (see 1430).		
1562	Excision of Baker's cyst (synovial cyst of popliteal space).....	30.0	8.0
1570	Fasciotomy, single, palm or sole, subcutaneous, blind ..	10.0	
1573	for Dupuytren's contracture, partial.....	30.0	7.0
1574	including finger extensions and vertical bands, radical.....	50.0	T

Repair		Surg.	Anes.	Amputation		Surg.	Anes.
1580	Repair or suture extensor tendon, single, hand or foot, distal to wrist or ankle	10.0	T	Upper Extremity	1701 Interthoracoscapular	100.0	19.0
1582	single, forearm or leg	15.0	T	1703 Disarticulation of shoulder	70.0	14.0	
1583	Repair or suture flexor tendon, single, unless otherwise listed.	20.0	T	1705 Arm through humerus	30.0	7.0	
1585	Transfer, or transplant, or free graft of tendon, single, distal to elbow, distal to knee.	30.0	T	1708 Forearm, through radius and ulna	30.0	7.0	
1586	single, elbow to shoulder, knee to hip	50.0	T	1710 Guillotine upper arm	30.0	7.0	
1587	Tenolysis, single	20.0	T	1711 with subsequent revision or reamputation (same surgeon)	40.0	7.0	
1589	Lengthening or shortening tendon	20.0	T	1712 Cineplasty, complete procedure	60.0	13.0	
1592	Retrieve or reroute tendon through separate incision, add 25% of appropriate fee.			1718 Disarticulation of wrist	30.0	7.0	
1612	Free fascial graft for reconstruction tendon pulley or repair bowstring tendon, single (independent procedure).	10.0	T	1722 Hand through metacarpal bones	30.0	T	
1613	for reconstruction tendon pulley or repair bowstring tendon to form gliding surface for tendons.	10.0	T	1725 Metacarpal, with finger or thumb, one, with split or Wolff graft, or skin-plasty and/or tenodesis with definitive resection palmar digital nerves	20.0	T	
1616	Abdominal fascial transplants, bilateral	60.0	T	1737 Finger, any joint, or phalanx, one, with split or Wolff graft, or skin-plasty and/or tenodesis, with definitive resection volar digital nerves	12.5	T	
1632	Patellar advancement	50.0	10.0	Lower Extremity			
1633	Ruptured quadriceps insertion.	30.0	8.0	1748 Disarticulation of hip	80.0	18.0	
1640	Ruptured biceps tendon from insertion elbow.	30.0	8.0	1750 Disarticulation of knee	40.0	6.0	
1641	Flexor-plasty, elbow.	50.0	11.0	1752 Thigh through femur, including supracondylar	50.0	10.0	
1654	Repair ruptured supraspinatus tendon or musculotendinous cuff shoulder	40.0	9.0	1760 Guillotine, thigh.	40.0	8.0	
1655	Suture of complete shoulder cuff avulsion	70.0	17.0	1763 with subsequent revision or reamputation (same surgeon).	50.0	8.0	
				1767 Leg, through tibia and fibula	40.0	8.0	
				1771 Guillotine, leg	30.0	8.0	
				1774 with subsequent revision or reamputation (same surgeon).	40.0	8.0	
				1778 Ankle (Syme, Pirogoff), with skin-plasty and resection nerves	40.0	T	
				1782 Foot, transmetatarsal, each foot	30.0	T	
				1785 midtarsal.	30.0	T	
				1788 Metatarsal with toe, split or Wolff graft, or skin-plasty and/or tenodesis, with definitive resection digital nerves	20.0	T	
EXTREMITIES							
Incision							
1682	Drainage of felon in hospital with general anesthesia	10.0	4.0				
1686	Drainage of single infected space of hand (lumbrical, hypothenar, thenar, middle palmar, etc.) with or without tendon sheath involvement, in hospital	15.0	4.0				
1692	Drainage of multiple infected spaces of hand (with or without tendon sheath involvement) in hospital.	30.0	5.0				

		Surg.	Anes.
1802	Toe, any joint or phalanx, one.	10.0	T
1803	Toe, more than one, split or Wolff graft, or skin-plasty and/or tenodesis, with definitive resection digital nerves	15.0	T
Repair			
1811	Freeing of web fingers, with flaps,	25.0	7.0
1815	with graft	35.0	10.0

PLASTER CASTS (INDEPENDENT PROCEDURE ONLY)

*1851	Molded plaster to forearm . . .	2.0	T
*1854	elbow to fingers	2.0	T
*1856	hand and wrist	2.0	T
*1860	shoulder to hand	3.0	T
*1862	shoulder spica	5.0	T
*1865	ankle (foot to midleg)	2.0	T
*1867	knee (foot to thigh)	4.0	T
*1871	Ambulatory leg cast	3.0	T
*1875	Molded plaster to leg	2.0	T
*1878	Spica, unilateral (hip to foot) .	6.0	T
*1882	bilateral	7.0	T
*1885	Body, shoulder to hips	7.0	T
*1886	including head	8.0	T
*1891	Unna boot	2.0	T

RESPIRATORY SYSTEM

NOSE

Incision			
*1901	Drainage of nasal abscess . . .	1.5	
*1905	Drainage of septal abscess . . .	2.5	
Excision			
*1911	Biopsy, soft tissue, nose	2.0	
*1915	Excision of nasal polyp	2.0	
1916	Excision nasal polyps, multiple, unilateral or bilateral, one or more stages, office	5.0	
1917	hospital, with anesthesia	15.0	5.0
1922	Excision of nasopharyngeal fibroma	35.0	T
1924	Excision of skin of nose for rhinophyma	30.0	7.0
1928	Submucous resection (nasal septum, including septoplasty).	30.0	
5 1935	Resection of turbinate (submucous), complete or partial, unilateral or bilateral (independent procedure)	10.0	7.0

Endoscopy		Surg.	Anes.
*1941	Rhinoscopy with removal of foreign body in nose.	2.0	

Repair		Surg.	Anes.
1950	Rhinoplasty, complete external parts (including bony pyramid, lateral cartilages, and tip as necessary)	70.0	13.0
1953	nasal bridge collapse, bone or cartilage graft (see 0619, 0621 or 0622)		
1956	tip only	40.0	7.0
1957	secondary minor revision .	10.0	
1958	total or major partial reconstruction (see 0260 to 0325, 0169 to 0622)		

Destruction		Surg.	Anes.
*1965	Cauterization of turbinates, unilateral or bilateral (independent procedure)	2.0	

Manipulation		Surg.	Anes.
1970	Reduction of fractured nasal bones (see 0686 to 0688)		
*1971	Control of primary nasal hemorrhage with cauterization of septum	2.0	
1978	by ligation of ethmoid artery	25.0	7.0

ACCESSORY SINUSES

Incision			
*1981	Antrum puncture, unilateral .	2.0	
1985	Maxillary sinusotomy, simple, antrum window operation, unilateral	15.0	7.0
1986	bilateral	20.0	7.0
1988	Radical (Caldwell-Luc), unilateral	40.0	9.0
1991	Sphenoid sinusotomy	25.0	7.0
1992	Frontal sinusotomy, external, simple, (trephine operation) .	20.0	7.0
1993	radical	50.0	11.0
1994	Combined external frontal, ethmoid and sphenoid sinusotomy, unilateral	70.0	15.0
Excision			
2006	Ethmoidectomy, intranasal, unilateral	20.0	7.0
2013	external, unilateral	25.0	7.0
2016	bilateral	35.0	9.0

		Surg. Anes.	
2176	Cruciate incision of thickened scar deposited on visceral pleura	60.0	15.0
2177	Total pulmonary decortication	100.0	24.0
2180	Pneumonocentesis: puncture of lung for aspiration biopsy	15.0	
*2183	Thoracocentesis: puncture of pleural cavity for aspiration, initial	3.0	
*2186	subsequent	2.0	

Excision			
2191	Total pneumonectomy	100.0	24.0
2193	Total or subtotal lobectomy	100.0	24.0
2194	Wedge resection	75.0	21.0
2196	Pleurectomy, any type (independent procedure)	80.0	21.0

Endoscopy			
2201	Thoracoscopy, exploratory (independent procedure)	20.0	
2204	with biopsy	20.0	
2207	Closed intrapleural pneumonolysis	30.0	

Surgical Collapse Therapy			
THORACOPLASTY - Extrapleural resection of ribs, any type.			
2211	first stage	50.0	12.0
2212	second stage	30.0	10.0
2213	third stage	30.0	10.0
2217	Extrapleural pneumonolysis, including associated filling or packing procedures	50.0	12.0
*2221	Pneumothorax: intrapleural injection of air, initial	5.0	
*2222	subsequent	2.0	

CARDIOVASCULAR SYSTEM

HEART AND PERICARDIUM

Incision			
2301	Cardiotomy with exploration or removal of foreign body	100.0	26.0
2305	Pericardiotomy with exploration, drainage or removal of foreign body	80.0	21.0
*2310	Pericardiocentesis: puncture of pericardial space for aspiration	5.0	
*2311	subsequent	3.0	
2315	Valvulotomy or commissurotomy	100.0	25.0

		Surg. Anes.	
2316	Operation for regurgitation	100.0	25.0
2317	Operation for coronary disease (poudrage)	50.0	21.0

Excision			
2321	Pericardiectomy	100.0	24.0
2325	Valvulectomy	100.0	25.0
2326	Excision of auricular appendage	60.0	24.0

Introduction			
2331	Catheterization of the heart (independent procedure) by report		
	right only	20.0	6.0
	left only	15.0	6.0
	both	30.0	6.0
2332	Injection for angiocardio-grams	5.0	
2333	Retrograde aortography - cut down and pass catheter	20.0	

Destruction			
2341	Cardiolysis	60.0	20.0
2345	Pericardiolysis	60.0	20.0

Suture			
2351	Cardiorrhaphy: suture of heart wound or injury	80.0	23.0
2352	suture I-A septal defect	100.0	24.0
2355	Pericardiorrhaphy: suture of pericardial wound or injury	70.0	20.0

ARTERIES AND VEINS

Incision			
ARTERIOTOMY - With removal of embolus:			
2373	Trunk	60.0	11.0
2376	Neck	50.0	11.0
2380	Extremity	50.0	10.0

PHLEBOTOMY - With removal of thrombus:			
2397	Trunk	50.0	11.0
2401	Neck	50.0	11.0
2404	Extremity	35.0	9.0

Excision			
2426	Excision of coarctation of aorta	100.0	24.0
2427	Repair of thoracic or abdominal aorta	100.0	22.0
2428	Popliteal aneurysm	60.0	11.0

Introduction		Surg. Anes.	
2431	Filipuncture; wiring of aneurysm, extremity	20.0	7.0
2432	wiring of aneurysm, aorta.	30.0	11.0
2434	Arteriography (exclusive of X-ray allowance)	10.0	7.0
2435	(exclusive of X-ray allowance) lumbar.	10.0	7.0
2440	Venography (exclusive of X-ray allowance).	5.0	7.0
2445	Blood transfusion, indirect method	2.0	
2446	replacement type, Rh factor.	25.0	
2448	direct method	5.0	
2449	Incision into and exposure of vein for introduction of medication and fluid (separate cut-down procedure).	3.0	T
2450	Push transfusion, given under two years of age.	10.0	T
*2454	Injection of sclerosing solution into vein of leg, initial, unilateral	1.0	
2454	subsequent, unilateral	1.0	
Repair			
2472	Repair of aortic arch anomalies	80.0	T
ARTERIAL ANASTOMOSIS:			
2475	Aortic anastomosis	100.0	25.0
2478	Pulmonary aortic anastomosis (Pott's)	100.0	25.0
2482	Pulmonary subclavian anastomosis (Blalock).	100.0	25.0
2485	Pulmonary innominate anastomosis (Blalock).	100.0	25.0
VENOUS ANASTOMOSIS:			
2490	Portocaval anastomosis.	100.0	23.0
2496	Splenorenal anastomosis.	100.0	21.0
Suture			
2511	Arteriorrhaphy: suture of wound or injury of artery.	30.0	T
2515	Phleborrhaphy: suture of wound or injury of vein	20.0	7.0
2520	Ligation and division of ductus arteriosus	80.0	17.0
2522	Ligation of carotid artery	40.0	7.0
2525	Ligation and division of inferior vena cava	60.0	11.0
2525	Ligation of femoral vein.	25.0	6.0
2530	Ligation and division of common iliac vein	40.0	7.0

		Surg. Anes:	
2558	Ligation and division of long saphenous vein at saphenofemoral junction with or without retrograde injection, or distal interruptions	17.5	7.0
2561	Ligation and division and complete stripping of long or short saphenous veins	25.0	9.0
2563	of long and short saphenous veins.	35.0	10.0
2576	Ligation and division of short saphenous vein at saphenopopliteal junction	10.0	5.0
2581	of minor varicose vein of leg, initial	5.0	
2585	subsequent	3.0	

HEMIC AND LYMPHATIC SYSTEMS

SPLEEN

Excision			
2601	Splenectomy	60.0	11.0

LYMPH NODES AND LYMPHATIC CHANNELS

Incision			
*2631	Drainage of lymph node abscess or lymphadenitis.	2.0	T

Excision			
2641	Biopsy of lymph node	5.0	4.0
2642	of lymph node (anterior scalene).	15.0	4.0
2644	Excision of lymph node	5.0	4.0

RADICAL LYMPHADENECTOMY - Radical resection of lymph nodes.

2652	Upper neck	40.0	13.0
2658	Axilla	40.0	10.0
2665	Cervical (complete), unilateral	60.0	15.0
2672	Groin	40.0	12.0

MEDIASTINUM

Incision			
2680	Mediastinotomy with exploration or drainage	70.0	15.0
2683	Foreign body removal, cervical	70.0	16.0

Excision			
2691	Excision of mediastinal cyst.	80.0	18.0
2693	Excision of mediastinal tumor	80.0	19.0

		Surg. Anes.	
2696	Repair thoracic duct (suture)	70.0	17.0
2697	Plastic anastomosis, thoracic duct	80.0	19.0

		Surg. Anes.	
2785	Partial glossectomy or hemiglossectomy (electrocoagulation)	30.0	12.0
2787	Complete or total glossectomy	60.0	15.0

DIGESTIVE SYSTEM

MOUTH

Incision

*2701	Drainage of sublingual abscess	2.0	
*2705	Drainage of Ludwig's angina . .	7.0	

Repair

2791	Glossoplasty: plastic operation on tongue (see 0260 to 0325).		
------	---	--	--

Suture

2801	Glossorrhaphy: suture of tongue wound or injury (see 0260 to 0262).		
------	---	--	--

LIPS

Excision

2742	V-excision of small lesion of lip (see 0178 to 0190)		
2743	V-excision of large lesion of lip up to one-half lip	15.0	6.0
2744	Resection of more than one-half lip with plastic closure (see 0260 to 0325).		
2746	without plastic closure	15.0	7.0
2747	Secondary plastic closure (see 0260 to 0325).		

TEETH AND GUMS

Incision

*2815	Drainage of alveolar abscess, acute with cellulitis - oral . .	2.0	
-------	--	-----	--

PALATE AND UVULA

Incision

*2871	Incision and drainage of palate (abscess)	2.0	
-------	---	-----	--

Repair

2751	Cheiloplasty: plastic or reconstruction operation on lip (see 0260 to 0325).		
2754	Plastic repair of harelip, primary, unilateral	60.0	12.0
2758	primary, bilateral, one stage	80.0	15.0
2759	bilateral, two stages, per stage	60.0	12.0
2761	secondary, local revision, unilateral or bilateral (see 0260 to 0325).		
2762	Plastic repair of unilateral harelip by recreation of defect and reclosure	60.0	12.0
2765	Plastic repair of bilateral harelip by recreation of defect and reclosure - per major stage	60.0	12.0

Excision

2881	Biopsy of palate	2.0	
2883	Excision of local lesion of palate (see 0178 to 0190, 0260 to 0267).		
2884	with graft or flap closure (see 0275 to 0325).		
2885	Resection of palate or wide excision of lesion of palate . .	35.0	9.0
2886	Resection of palate with reconstruction (see 0275 to 0325).		
2887	Uvulectomy: excision of uvula	3.0	

TONGUE

Incision (Glossotomy)

*2771	Drainage of lingual abscess . .	2.0	
-------	---------------------------------	-----	--

Excision (Glossectomy)

2781	Biopsy of tongue	2.0	
------	----------------------------	-----	--

Repair

2890	Palatoplasty: plastic operation for partial cleft palate . .	50.0	10.0
2892	plastic operation for complete cleft palate, including alveolar ridge	70.0	15.0
2894	secondary minor revision (see 0260 to 0276).		
2895	major revision	50.0	12.0
2897	secondary lengthening procedure	70.0	15.0
2898	attachment pharyngeal flap .	50.0	10.0

Suture
2901 Suture palate wound or injury (see 0265 to 0267).
Surg. Anes.

SALIVARY GLANDS AND DUCTS

Incision
2911 Drainage of parotid abscess . . . 5.0 4.0
*2915 Sialolithotomy; removal of salivary calculus, local anesthesia 5.0
2916 Sialolithotomy, extraoral . . . 25.0

Excision
2921 Biopsy of salivary gland 5.0 4.0
2927 Excision of parotid tumor . . . 40.0 T
2930 of submaxillary tumor 30.0 7.0
2931 of submaxillary gland 30.0 7.0
2934 of parotid gland with preservation of facial nerve . . . 60.0 T
2937 with sacrifice of facial nerve 50.0 T

R
2941 Plastic repair of salivary duct; sialodochoplasty 30.0 7.0
2944

Suture
2951 Closure of salivary fistula . . . 40.0 8.0

Manipulation
*2961 Dilation of salivary duct; ptyalectasis 2.0

PHARYNX, ADENOIDS AND TONSILS

Incision
2971 Drainage of retropharyngeal abscess, internal approach . . . 5.0
2972 in hospital 10.0 6.0
2977 Drainage of peritonsillar abscess 3.0
2978 in hospital 10.0 6.0
*2982 Biopsy of pharynx 2.5
2984 Excision of pharyngoesophageal diverticulum, first stage 20.0 9.0
2986 second stage 20.0 9.0
2987 single stage 40.0 11.0
2989 Excision branchial cleft cyst or vestige, confined to skin and subcutaneous tissues 15.0 6.0
2990 extending beneath subcutaneous tissues 50.0 12.0
2996 Tonsillectomy, with or without adenoidectomy, any age . . 15.0 5.0
Adenoidectomy (independent procedure) 10.0 5.0

3000 Excision of tonsil tag, unilateral, hospital 10.0 5.0
3002 unilateral, office, local anesthesia 6.0
3004 Excision of lingual tonsil (independent procedure) . . . 10.0 5.0

Repair
3011 Pharyngoplasty; plastic or reconstructive operation on pharynx (see 0260 to 0319).

Suture
3021 Suture of external wound or injury of pharynx 10.0

ESOPHAGUS

Incision
3031 Esophagotomy 60.0 10.0
3032 for removal of foreign body 60.0 10.0
3033 intrathoracic 70.0 16.0

Excision
3043 Esophagectomy; resection of esophagus, transpleural or extrapleural 100.0 20.0
3044 Local excision, end-to-end anastomosis 90.0 20.0

Endoscopy
3051 Esophagoscopy, diagnostic . . 15.0 6.0
3053 with insertion of radioactive substance 15.0 6.0
3055 with biopsy 15.0 6.0
3057 with foreign body removal . . 20.0 7.0
3061 with dilation, direct 15.0 6.0
3063 subsequent 10.0 6.0

Repair
3071 Esophagoplasty; plastic repair or reconstruction of esophagus 100.0 22.0
3072 Esophagogastrostomy (cardioplasty) 60.0 15.0
3073 Esophagoduodenostomy 60.0 20.0
3074 Esophagojejunostomy 100.0 24.0
3075 Esophagostomy; fistulization of esophagus, external 40.0 11.0
3076 Esophagomyotomy (Heller) . . 70.0 15.0

Suture
3081 Suture of esophageal wound, injury or rupture, cervical approach 40.0 11.0

		Surg.	Anes.
3083	intrathoracic	70.0	20.0
3086	Closure of esophagostomy or other external esophageal fistula, cervical	40.0	11.0
3087	thoracic	70.0	20.0

Manipulation

3091	Dilatation of esophagus by sound, bougie or bag, initial, direct (see 3061).		
3092	initial, indirect	5.0	
3095	subsequent	2.0	

STOMACH

Incision

3101	Gastrotomy with exploration or foreign body removal	40.0	9.0
3105	Pyloromyotomy; cutting of pyloric muscle (Fredet- Ramstedt operation)	50.0	9.0

Excision

3111	Biopsy of stomach, with laparotomy	50.0	9.0
3112	Local excision of stomach ulcer or benign neoplasm	50.0	10.0
3114	Total gastrectomy	100.0	17.0
3115	Subtotal gastrectomy	70.0	14.0

Endoscopy (independent procedure)

3121	Gastrosocopy, diagnostic	15.0	
3123	with biopsy	15.0	

Suture

3131	Pyloroplasty	50.0	10.0
3133	Gastroduodenostomy	50.0	10.0
3135	Gastrojejunosotomy	50.0	10.0
3136	with partial vagectomy; vagotomy	70.0	12.0
3137	Gastrotomy for feeding	40.0	7.0
3141	Gastrorrhaphy; suture of per- forated gastric ulcer, wound or injury	50.0	9.0
3144	Closure or taking down of gastroduodenal anastomosis (gastroduodenostomy)	60.0	12.0
3146	Closure or taking down of gastrojejunal anastomosis (gastrojejunosotomy)	60.0	12.0
3153	Closure of gastrotomy	40.0	8.0

INTESTINES (EXCEPT RECTUM)

Incision

3161	Enterotomy with exploration or foreign body removal, small bowel	50.0	9.0
3162	large bowel	60.0	9.0
3166	Exteriorization of intestine, preliminary to resection; first stage Mikulicz, resec- tion of intestine	50.0	9.0

Excision

3171	Excision of one or more intestinal lesions not requir- ing anastomosis, exterioriza- tion or fistulization	60.0	11.0
3174	Enterectomy; resection of small intestine with anastomosis	60.0	11.0
3176	with enterostomy	60.0	11.0
3178	Colectomy; resection of large intestine, one or two stages, including colostomy and closure, if necessary . . .	80.0	T
3179	Colectomy, partial, with anastomosis and with or without proximal colostomy . .	80.0	16.0
3180	total, with or without ileostomy or anastomosis . .	100.0	19.0
3191	Enteroenterostomy; anastomosis of intestines . . .	50.0	10.0

ENTEROSTOMY - External fistulization
of intestines.

3193	small (ileostomy or jejunostomy)	50.0	10.0
3195	large (colostomy)	50.0	10.0
3197	small or large, for ulcerative colitis	75.0	12.0
3200	Reduction of volvulus, intussusception, internal hernia (by laparotomy)	50.0	10.0
3203	Revision of colostomy; office	10.0	
3204	hospital	20.0	7.0
3205	Cecopexy; fixation of colon to abdominal wall	50.0	8.0

Destruction

3211	Enterolysis; freeing of intestinal adhesion	50.0	10.0
------	--	------	------

Suture			Surg.	Anes.
3221	Suture of intestine (enterorrhaphy), large or small, for perforated ulcer, wound, injury or rupture	50.0	11.0	
3222	Suture of intestine with colostomy	65.0	12.0	
3225	Closure of enterostomy, large or small intestine	40.0	8.0	

MECKEL'S DIVERTICULUM AND THE MESENTERY

Excision				
3231	Excision of Meckel's diverticulum (diverticulectomy)	40.0	7.0	
3235	Excision of lesion of mesentery	50.0	9.0	
Suture				
3241	Suture of mesentery	40.0	8.0	

APPENDIX

Incision				
3251	Incision and drainage of appendical abscess	30.0	7.0	
Excision				
3261	Appendectomy	35.0	7.0	

RECTUM

Incision				
*3283	Incision and drainage, perirectal abscess, office	2.0		
Excision				
3291	Complete proctectomy, combines abdominoperineal, one or two stages	100.0	17.0	
3292	Complete proctectomy for congenital megacolon	100.0	17.0	
3294	Excision of rectal procidentia	40.0	8.0	
3296	Division of stricture in rectum	35.0	8.0	
3297	Valvotomy	35.0	7.0	
3298	Perineal excision of recurrent malignant tumor	40.0	T	

Endoscopy (independent procedure)

3311	Proctosigmoidoscopy, diagnostic, initial	3.0	T	
3312	subsequent	2.0	T	
3313	with biopsy, initial	5.0	T	
3314	subsequent	3.0	T	
3315	with removal of papillomas or polyps, initial	6.0	T	

			Surg.	Anes.
3316	subsequent	5.0	T	
3317	with removal of multiple papillomas or polyps	9.0	T	
3319	Sigmoidoscopic control of hemorrhage	7.5	T	

Repair

3321	Proctoplasty, perineal, for stricture or prolapse	35.0	7.0	
*3322	Perirectal injection of sclerosing solution for prolapse	2.5		
3325	Proctopexy, abdominal, for prolapse	50.0	10.0	

Suture

3331	Closure of rectovesical fistula	50.0	13.0	
3333	Closure of rectourethral fistula	50.0	13.0	
3335	Closure of rectovaginal fistula	50.0	13.0	

Manipulation (independent procedure)

*3341	Reduction of prolapse of rectum	2.0		
-------	---	-----	--	--

ANUS

Incision

3353	Fistulotomy or fistulectomy, simple	20.0	6.0	
3354	complicated or multiple	37.5	7.0	
3355	Fistulectomy, second stage	10.0	6.0	
3358	Incision and drainage of ischiorectal abscess with fistulotomy or fistulectomy	30.0	7.0	
*3364	Sphincterotomy, anal: division of anal sphincter	5.0		

Excision

3371	Fissurectomy, with or without sphincterotomy	15.0	6.0	
3373	Cryptectomy, single, or multiple (independent procedure)	5.0	T	
3374	Papillectomy, single or multiple (independent procedure)	5.0	T	
3377	Hemorrhoidectomy, external only	5.0	T	
3380	internal and external	25.0	6.0	
3382	Fistulotomy or fistulectomy and hemorrhoidectomy	30.0	7.0	
3386	Fissurectomy and hemorrhoidectomy	25.0	6.0	

		Surg. Anes.	
*3392	Enucleation of external thrombotic hemorrhoid.	3.0	T
3395	Excision of external hemorrhoidal tabs	5.0	4.0

Introduction

*3401	Hemorrhoids, injection of sclerosing solution	1.5	
-------	---	-----	--

Endoscopy (independent procedure)

3411	Anoscopy, diagnostic.	1.0	
3413	with biopsy	3.0	
3415	with removal of foreign body	3.0	
3416	subsequent	1.0	
3417	Control of hemorrhage - endoscopic.	6.0	

Repair

3421	Anoplasty, infant	25.0	8.0
3423	adult	25.0	7.0
3425	Sphincteroplasty, anal; plastic operation for incontinence . . .	35.0	9.0
3426	Thiersch procedure for incontinence and/or prolapse	20.0	7.0
3427	Construction of anus, for congenital absence	40.0	T
3428	combined abdominoperineal approach	80.0	T

Destruction

3433	Condyloma, single or multiple, internal	7.5	4.0
3434	subsequent	2.5	T

LIVER

Incision			
*3456	Aspiration biopsy of liver. . . .	3.0	

Excision

3464	Hepatectomy, partial; resection of liver	70.0	17.0
------	--	------	------

Repair

3471	Marsupialization of cyst or abscess of liver	60.0	12.0
------	--	------	------

Suture

3481	Hepatorrhaphy; suture of liver wound or injury	50.0	12.0
------	--	------	------

BILIARY TRACT

Incision			
3491	Hepaticotomy, with exploration, drainage (hepaticostomy) or removal of calculus	60.0	12.0

		Surg. Anes.	
3495	Choledochotomy or choledochostomy with exploration, drainage or removal of calculus, with or without cholecystotomy	60.0	13.0

3500	Duodenocholedochotomy: transduodenal choledocholithotomy.	90.0	17.0
------	---	------	------

3504	Cholecystotomy or cholecystostomy with exploration, drainage or removal of calculus	45.0	10.0
------	---	------	------

Excision

3515	Cholecystectomy	55.0	10.0
3517	with open exploration of common duct	65.0	12.0

PANCREAS

Incision

3541	Pancreatotomy for drainage of pancreatitis	60.0	11.0
3544	Removal of calculus	60.0	12.0

Excision

3550	Pancreatectomy - subtotal (simple)	70.0	12.0
3551	subtotal (Whipple type) . . .	100.0	17.0
3552	total	80.0	13.0

Repair

3565	Marsupialization of cyst of pancreas	60.0	12.0
------	--	------	------

ABDOMEN, PERITONEUM AND OMENTUM

Incision

3571	Exploratory laparotomy: exploratory celiotomy	35.0	7.0
3573	Drainage of peritoneal abscess or localized peritonitis exclusive of appendical abscess	40.0	7.0

3575	Subdiaphragmatic or subphrenic abscess, one or two stages	50.0	10.0
------	---	------	------

3578	Retroperitoneal abscess . . .	40.0	9.0
------	-------------------------------	------	-----

3588	Peritoneocentesis: abdominal paracentesis, initial	4.0	
3590	subsequent	2.0	

Endoscopy

3595	Peritoneoscopy	15.0	
------	--------------------------	------	--

Introduction		Surg. Anes.	
3611	Pneumoperitoneum: intra-peritoneal injection of air, initial.....	3.0	
3612	subsequent.....	2.0	
3614	Retroperitoneal insufflation of air.....	4.0	

Repair
When bilateral hernia is present on day of surgical repair or when one is considered potential for surgical repair, postponement of surgical repair of companion potential hernia or hernia under three months will be considered a bilateral procedure for this schedule as if performed on the same day as one herniorrhaphy was performed.

HERNIOPLASTY: HERNIORRHAPHY: HERNIOTOMY

3631	Inguinal, unilateral.....	30.0	6.0
3632	with appendectomy.....	40.0	8.0
3633	with orchiectomy.....	30.0	7.0
3634	with excision of hydrocele.....	40.0	7.0
3635	recurrent.....	40.0	8.0
3638	Inguinal, bilateral.....	40.0	8.0
3640	with appendectomy.....	50.0	10.0
3641	with orchiectomy.....	45.0	9.0
3642	with excision of hydrocele.....	50.0	10.0
3643	recurrent.....	50.0	10.0
3646	Femoral, unilateral.....	30.0	6.0
3647	with appendectomy.....	40.0	8.0
3651	recurrent.....	40.0	8.0
3654	Femoral, bilateral.....	45.0	9.0
3658	recurrent.....	50.0	10.0
3661	Ventral, incisional.....	40.0	8.0
3662	recurrent.....	40.0	9.0
3663	Epigastric.....	30.0	8.0
3664	recurrent.....	45.0	9.0
3665	Umbilical.....	30.0	6.0
3667	Omphalocele.....by report		T
3709	Diaphragmatic.....	70.0	13.0

Suture			
3734	Secondary suture of abdominal wall for evisceration or disruption.....	20.0	7.0
3735	Suture of ruptured diaphragm.....	60.0	13.0

URINARY SYSTEM

KIDNEY

Incision		Surg. Anes.	
3802	Drainage of perirenal abscess (independent procedure).....	40.0	7.0
3806	Exploration with or without nephrotomy.....	70.0	11.0
3808	Nephrostomy with drainage.....	60.0	10.0
3811	Nephrolithotomy, removal of calculus.....	70.0	11.0
3813	Division or transection of aberrant renal vessels (independent procedure).....	60.0	11.0
3815	Pyelotomy with exploration.....	65.0	11.0
3816	Pyelostomy with drainage.....	60.0	11.0
3817	Pyelolithotomy.....	65.0	11.0

Excision

*3820	Renal biopsy (by trochar or needle).....	3.0	
3821	Nephrectomy.....	70.0	12.0
3822	plus total ureterectomy.....	100.0	17.0
3824	partial.....	70.0	12.0
3827	Excision of cyst of kidney.....	60.0	12.0
3829	Aspiration or injections of renal cyst or renal pelvis.....	10.0	

Introduction

3830	Perirenal insufflation, unilateral or bilateral.....	10.0	
------	--	------	--

Repair

3831	Pyeloplasty: plastic operation on renal pelvis with or without plastic operation on ureter.....	70.0	13.0
3835	Nephropexy: fixation or suspension of movable kidney (independent procedure).....	60.0	11.0

Suture

3841	Nephrorrhaphy: suture of kidney wound or injury.....	70.0	15.0
3845	Closure of nephrostomy, pyelostomy or other renal fistula (e.g.: renal colic fistula).....	80.0	13.0
3846	Symphysiotomy for horse-shoe kidney.....	100.0	17.0

3847 Renal sympathectomy (independent procedure) 60.0/ 11.0

URETER

Incision
3851 Ureterotomy with exploration or drainage (independent procedure) 60.0 10.0
3857 Ureterolithotomy 60.0 10.0

Excision
3861 Ureterectomy, complete or partial (independent procedure) 70.0 13.0
3867 Suprapubic excision (independent procedure) 50.0 9.0

Repair
3871 Ureteroplasty: plastic operation on ureter (stricture) 70.0 13.0
3874 Ureteropyelostomy: anastomosis of ureter and renal pelvis 70.0 13.0
3876 Ureterocystostomy: anastomosis of ureter to bladder: unilateral 60.0 12.0
3877 bilateral 70.0 15.0
3880 Ureteroenterostomy: anastomosis of ureter to intestine, unilateral. 70.0 13.0
3881 bilateral. 100.0 18.0
3884 Ureterostomy: transplantation of ureter to skin, unilateral. 60.0 11.0
3885 bilateral. 80.0 13.0

Suture
3891 Ureterorrhaphy: suture of ureter (independent procedure) 70.0 11.0
3895 Closure of fistula of ureter. . . 80.0 13.0

BLADDER

Incision
3900 Puncture aspiration of bladder by needle 5.0
3901 Cystotomy with exploration or fulguration 60.0 10.0
3902 Puncture aspiration by trochar. 5.0
3906 Cystostomy with drainage. . . . 40.0 7.0
3907 Cystolithotomy 50.0 8.0
3908 Drainage of perivesical or prevesical space abscess 50.0 10.0

Excision
3911 Cystectomy, partial 60.0 12.0
3913 complete. 100.0 19.0
3918 Transurethral electroresection of vesical neck, female 40.0 7.0
3920 Excision of bladder diverticulum (independent procedure) 70.0 12.0
3922 Excision of bladder tumor (see 3901) 60.0 10.0
3924 Transurethral resection of bladder tumors 50.0 10.0

Endoscopy (independent procedure)
3931 Cystoscopy, diagnostic, initial 5.0 5.0
3932 subsequent 3.0 T
3933 with biopsy, initial. 8.0 5.0
3934 subsequent 5.0 5.0
3935 with ureteral catheterization, initial 10.0 5.0
3936 subsequent. 5.0 5.0
3937 for stone removal, manipulation, initial 20.0 6.0
3938 subsequent 15.0 6.0
3939 Ureteral meatotomy. 20.0 6.0
3940 Cystoscopy with fulguration, minor lesion of bladder 8.0 5.0
3941 Cystoscopy with fulguration of bladder tumor, initial . . . 25.0 7.0
3942 subsequent 15.0 7.0
3943 Cystoscopy with insertion of radioactive substance with or without biopsy or fulguration, initial 30.0 7.0
3944 subsequent 20.0 7.0
3945 Resection or fulguration of ureterocele 20.0 7.0
3947 Cystoscopic removal of foreign body. 20.0 6.0

Destruction
3951 Litholapaxy: crushing of calculus in bladder and removal of fragments 40.0 7.0

Suture
3961 Cystorrhaphy: suture of bladder wound, injury or rupture 50.0 12.0
3965 Closure of vesicovaginal, vesicouterine, or vesicorectal fistula 50.0 13.0

URETHRA

Incision		Surg.	Anes.
3971	Urethrotomy, external (independent procedure) anterior . . .	10.0	4.0
3973	perineal	25.0	4.0
3975	Urethrostomy: drainage by fistulization (independent procedure)	25.0	5.0
3977	Meatotomy: cutting of meatus (independent procedure)	3.0	T
3978	Drainage of periurethral abscess (See Integumentary System)	5.0	4.0
3979	Drainage of perineal urinary extravasation (independent procedure)	25.0	5.0
Excision			
3981	Excision of urethral caruncle or fulguration	7.0	4.0
3991	Excision of diverticulum of urethra (independent procedure)	40.0	7.0
3994 3994	Excision or fulguration of urethral polyps	5.0	4.0
Endoscopy			
4000	Urethroscopy, diagnostic	5.0	
4001	with removal of calculus or foreign body	20.0	4.0
4004	with internal urethrotomy	20.0	4.0
4006	with fulguration of posterior urethra	10.0	4.0
4008	subsequent	3.0	T
Repair			
4011	Urethroplasty: plastic operation on urethra	30.0	7.0
4019	Diversion of perineal urinary extravasation with diversion of urinary stream	50.0	10.0
Suture			
4021	Urethrorrhaphy: suture of urethral wound or injury	50.0	10.0
4023	Closure of urethrostomy or fistula of urethra (independent procedure)	30.0	8.0
4025	Closure of urethrovaginal fistula	40.0	9.0
Manipulation			
*4031 4031	Dilation of urethral stricture by passage of sound, initial	3.0	

*4033 subsequent Surg. Anes. 1.0

MALE GENITAL SYSTEM

PENIS

Incision			
*4101	Dorsal or lateral "slit" of prepuce (independent procedure)		3.0
Excision			
*4111	Biopsy of penis	2.0	T
4114	Amputation of penis, partial	40.0	8.0
4115	complete	50.0	9.0
4116	radical	100.0	17.0
4120	Local excision of lesion of penis	5.0	
4122	Circumcision, newborn (within 14 days)	3.75	8/1/65
4123	under age 10	5.0	4.0
4125	age 10 or over	8.0	4.0
4127	Excision (or fulguration) of warts	5.0	4.0
Repair			
4131	Plastic operation on penis for hypospadias, straightening of chordee	30.0	8.0
4132	Urethroplasty for hypospadias (see 0260 to 0325).		
4134	Plastic operation on penis for injury	50.0	10.0
4135	for epispadias	100.0	16.0
4138	for urinary extravasation	30.0	6.0

TESTIS

Excision			
4141	Biopsy (independent procedure)	10.0	4.0
4144	Orchiectomy, simple, unilateral	20.0	5.0
4146	radical, unilateral or bilateral, with retroperitoneal gland dissection	100.0	18.0
Repair			
4152	Reduction of torsion of testis by surgical means	30.0	6.0
4156	Orchiopexy, with attachment of testis to thigh (Torek)	50.0	10.0
4157	with detachment of testis from thigh, second stage (Torek)	5.0	

4158 one or more stages, with
hernia repair. 40.0 8.0

EPIDIDYMIS

Incision
4161 Drainage of abscess of
epididymis. 5.0 4.0

Excision
4171 Biopsy of epididymis 10.0 4.0
4174 Excision of spermatocele
without epididymectomy 10.0 4.0
4176 Epididymectomy, unilateral 30.0 6.0
4177 bilateral. 40.0 7.0

Repair
Epididymovasostomy (anastomosis of
epididymis to vas deferens)
4181 unilateral 40.0 8.0
4182 bilateral 50.0 10.0

TUNICA VAGINALIS

Incision
*4191 Puncture aspiration of hydrocele 2.0
*4192 subsequent 1.0
4201 Excision of hydrocele, uni-
lateral 20.0 5.0
4202 with hernia repair (see
Hernioplasty)

SCROTUM

Incision
4211 Drainage of scrotal abscess . . 10.0 4.0
4215 Removal of foreign body in
scrotum 20.0 4.0

VAS DEFERENS

Incision
4231 Vasotomy: division or tran-
section of vas (independent
procedure). 10.0 4.0

Excision
4241 Vasectomy, complete or
partial (independent proce-
dure) 10.0 4.0

Repair
4251 Vasovasostomy, unilateral . . . 20.0 T
4252 bilateral. 25.0 T

Suture
4261 Ligation of vas (independent
procedure). 5.0 4.0

SPERMATIC CORD
Excision
4271 Excision of hydrocele of
spermatic cord (independent
procedure), unilateral 30.0 5.0
4272 bilateral. 40.0 7.0
4275 Excision of varicocele (inde-
pendent procedure), unilateral 30.0 5.0
4278 with hernia repair. 40.0 7.0

SEMINAL VESICLES

Excision
4291 Vesiculectomy 80.0 14.0

PROSTATE

Incision
4301 Prostatotomy: external
drainage of prostatic abscess 30.0 7.0
4304 Prostatolithotomy: removal
of prostatic calculus (inde-
pendent procedure). 70.0 11.0
*4305 Prostate - needle biopsy. 2.0

Excision
4311 Prostatectomy, perineal,
subtotal. 70.0 12.0
4313 perineal, radical 100.0 16.0
4316 suprapubic, one or two
stages 70.0 11.0
4318 retropubic 70.0 13.0

Endoscopy
4321 Transurethral electrore-
section of prostate, includ-
ing control of postoperative
bleeding, complete 70.0 13.0
4323 partial, initial. 40.0 9.0
4324 partial, subsequent 30.0 7.0

FEMALE GENITAL SYSTEM

VULVA

Incision
4401 Episiotomy, nonobstetrical. . . 7.0
*4403 Incision and drainage of
abscess of vulva 2.0 T
*4405 Incision and drainage of
Bartholin's gland abscess,
unilateral 2.0 T
4411 Hymenotomy: incision of
hymen. 5.0 4.0
Excision
*4421 Biopsy of vulva 2.0 T

		Surg.	Anes.
4423	Vulvectomy, complete	40.0	8.0
4424	partial	30.0	7.0
4425	radical, including regional lymph nodes	80.0	16.0
4427	Local excision of lesion of external female genital organ (see 0178 to 0190, 0260 to 0325).		
4428	Clitoridotomy: circumcision, female	7.5	4.0
4431	Hymenectomy: excision of hymen	7.5	4.0
4433	Excision of cautery destruction of Bartholin's gland or cyst	12.0	5.0
4436	Excision or fulguration of Skene's glands	5.0	4.0

Repair			
4443	Plastic operation on urethral sphincter, female (Kelly, Kennedy)	20.0	5.0
4447	Repair of urethrocele, female (independent procedure)	20.0	5.0

Suture			
4451	Episiorrhaphy: suture of recent injury of vulva	5.0	4.0

VAGINA

Incision			
4461	Colpotomy with exploration or drainage of pelvic abscess	10.0	4.0
*4463	Puncture and aspiration of Douglas' cul de sac	3.0	

Excision			
*4471	Biopsy of vagina (independent procedure)	3.0	T
4473	Colpectomy or colpocleisis, complete; complete obliteration of vagina	25.0	7.0
4474	partial (La Forte)	25.0	7.0
4476	Excision of vaginal cyst	10.0	4.0
4478	Excision of vaginal septum	10.0	4.0

Repair			
4481	Colpoplasty, anterior vaginal wall; repair of cystocele (independent procedure)	30.0	7.0
4482	with repair of urethrocele	30.0	7.0
4484	posterior vaginal wall; repair of rectocele (independent procedure)	25.0	6.0

		Surg.	Anes.
4486	Colpoperineoplasty, posterior vaginal wall; repair of rectocele and perineoplasty; pelvic floor repair	25.0	7.0
4488	Repair of cystocele, rectocele, and perineoplasty, anterior and posterior vaginal walls	40.0	9.0
4491	with repair of urethrocele	40.0	10.0
4493	Repair of enterocele, with or without associated related procedures, abdominal approach	40.0	10.0
4494	vaginal approach	40.0	9.0
4495	Colpopexy	40.0	8.0
4497	Reconstruction of congenital deformities of the vagina, including vaginal atresia and septate vagina	40.0	10.0

Suture			
4501	Colporrhaphy: suture of recent injury of vagina (non-obstetrical)	10.0	T
4505	Colpoperineorrhaphy: suture of recent injury of vagina and perineum (nonobstetrical)	10.0	T
4506	Closure of vaginal fistulae (see Ureter, Bladder, Rectum) by report		T

Manipulation			
*4511	Dilation of vagina (under anesthesia)	3.0	T

Endoscopy			
4521	Culdoscopy (independent procedure)	7.5	

OVIDUCT

Incision			
4531	Transection of fallopian tube, unilateral or bilateral (independent procedure), abdominal approach	40.0	7.0
4532	vaginal approach	40.0	7.0

Excision			
4541	Salpingectomy, complete or partial, unilateral or bilateral (independent procedure)	40.0	8.0

		Surg. Anes.				Surg. Anes.	
4545	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (independent procedure)	40.0	9.0	4632	Removal of cervical stump . .	50.0	8.0
4551	Salpingoplasty for sterility, unilateral or bilateral (independent procedure)	40.0	T	4634	Trachelectomy; cervicectomy; amputation of cervix (independent procedure)	15.0	5.0
Suture				4637	Partial excision of cervix . . .	15.0	5.0
4561	Ligation of fallopian tube, unilateral or bilateral (independent procedure)	40.0	7.0	*4641	Local excision of lesion of cervix (cauterization or conization)	2.0	T
OVARY				4644	Local excision of lesion of cervix in conjunction with dilation and curettage	10.0 15.0 8/1/05	4.0
Incision				4646	Dilation and curettage of uterus (independent procedure), under general anesthesia	10.0 15.0 8/1/05	4.0
4571	Drainage of ovarian cyst or abscess, unilateral or bilateral (independent procedure)	30.0	7.0	4647	for removal of uterine polyps	10.0 15.0 8/1/05	4.0
Excision				Introduction			
4581	Excision of ovarian cyst, unilateral or bilateral (independent procedure)	40.0	8.0	4671	Insertion of radioactive substance into cervix, uterus or both, with or without biopsy or dilation and curettage . . .	20.0	4.0
4583	Oophorectomy, unilateral or bilateral (independent procedure), complete	40.0	9.0	4676	Injection of radiopaque contrast media	3.0	
4585	partial	40.0	8.0	Repair			
4591	Oophoroplasty, unilateral or bilateral (independent procedure)	40.0	9.0	HYSTEROPEXY -			
UTERUS AND CERVIX UTERI				4681	with ventrosuspension; ventrofixation	40.0	9.0
Excision				4683	with presacral sympathectomy with or without other surgery	40.0	10.0
*4611	Biopsy of cervix or endometrium (independent procedure)	2.0	T	4685	with interposition operation (Watkins, Kennedy), with or without pelvic floor repair	40.0	10.0
HYSTERECTOMY -				4687	with shortening of round ligaments	40.0	9.0
4614	Hysteromyomectomy; myomectomy; excision of fibroid tumor of uterus	50.0	9.0	4690	with shortening of endopelvic fascia; parametrial fixation (Manchester) with or without pelvic floor repair	40.0	10.0
4617	Panhysterectomy: total hysterectomy (corpus and cervix)	60.0	11.0	4692	with shortening of sacrouterine ligaments	40.0	9.0
4621	Supracervical hysterectomy; subtotal hysterectomy	50.0	9.0	4694	Hysterosalpingostomy; anastomosis of tubes to uterus	40.0	10.0
4624	Fundectomy, uterine: excision of fundus of uterus	50.0	9.0	4696	Tracheloplasty; plastic repair of uterine cervix (Emmett)	15.0	5.0
4627	Radical hysterectomy for cancer (Wertheim)	80.0	15.0				
4631	Vaginal hysterectomy, with or without pelvic floor repair . . .	60.0	11.0				

Suture
 4701 Hysterorrhaphy: suture of ruptured uterus (non-obstetrical) 40.0 10.0
 4705 Trachelorrhaphy: suture of recent injury or laceration of cervix (nonobstetrical) . . . by report T

Manipulation
 4711 Dilation of cervix, instrumental (independent procedure), in hospital 5.0 4.0
 *4712 in office 3.0
 *4713 subsequent, office or hospital 1.0

PERINEUM

Incision
 4720 Perineotomy with exploration, drainage of abscess, etc 3.0

Repair
 4731 Perineoplasty: plastic repair of perineum (independent procedure) 10.0 6.0
 4734 in conjunction with vaginal operations (see Vagina, repair, 4481 to 4494).
 4735 Repair of perineum and third degree laceration of the rectum 30.0 9.0

Suture
 4741 Perineorrhaphy: suture of recent injury of perineum (nonobstetrical) by report T
 4745 Closure of perineal fistula 20.0 7.0

ENDOCRINE SYSTEM

THYROID GLAND

Incision
 4904 Incision and drainage of thyroglossal cyst (infected), in hospital 10.0 4.0

Excision
 4911 Local excision of small cyst or adenoma of thyroid 40.0 9.0
 4914 Thyroidectomy, total or complete 60.0 12.0

Surg. Anes.
 4917 subtotal or partial 50.0 10.0
 4924 total or subtotal, for malignancy with neck dissection . 80.0 17.0
 4937 Recurrent thyroidectomy of thyroid remnant 80.0 12.0
 4941 Excision of thyroglossal duct, cyst or sinus 40.0 9.0

PARATHYROID, THYMUS, PITUITARY, PINEAL, ADRENAL GLANDS AND CAROTID BODY

Excision
 4971 Parathyroidectomy or exploration of parathyroid 60.0 11.0
 4972 Mediastinal exploration 100.0 20.0
 4988 Adrenalectomy 70.0 18.0
 4993 Excision of carotid body tumor 100.0 18.0

NERVOUS SYSTEM

STRUCTURES OVERLYING THE MENINGES, BRAIN AND SPINAL CORD

Incision
 CRANIOTOMY -
 5001 Trephination (or burr holes), exploratory, unilateral 35.0 10.0
 5008 Decompression, orbital, unilateral or bilateral 100.0 15.0
 5011 subtemporal 60.0 12.0
 5015 suboccipital 60.0 13.0
 5017 Osteoplastic craniotomy (other than operation for brain tumor) 100.0 16.0

Excision
 5021 Laminectomy 80.0 15.0
 5025 Hemilaminectomy, lumbar 70.0 15.0
 5026 cervical 80.0 17.0
 5027 dorsal 80.0 15.0
 5031 Cranioplasty: plastic operation on skull with bone graft or metal or plastic plate 80.0 17.0

Repair
 5036 Repair of encephalocele 75.0 17.0
 5040 Repair of meningocele (spina bifida) 70.0 17.0
 5043 Repair of meningomyelocele 80.0 17.0

MENINGES AND MENINGEAL VESSELS

Incision		Surg.	Anes.
5051	Drainage of subdural, epidural or subarachnoid space for abscess or hematoma, cranial.	90.0	18.0
5054	spinal	90.0	15.0
*5057	Spinal puncture: lumbar puncture (independent procedure), initial, diagnostic with pressure readings	3.0	
*5060	Simple spinal puncture	2.0	
*5062	Cisternal puncture (independent procedure)	3.0	
5065	Drainage of lateral or sigmoid sinus for phlebitis or thrombosis	60.0	16.0

Excision			
5071	Excision of meningeal tumor, cyst or aneurysm	100.0	21.0

Introduction			
5084	Pneumoencephalography (independent procedure)	15.0	T
5084	Myelography (independent procedure)	10.0	T
5085	Discogram	10.0	T
5087	Visualization of intracranial aneurysm by intracarotid injection of dye (independent procedure) with exposure of carotid artery	25.0	7.0
5091	without exposure of carotid artery	15.0	T

Repair			
5101	Graft of dura	80.0	18.0
5105	Marsupialization of lesion of meninges (cyst or abscess)	90.0	19.0

BRAIN

Incision			
5127	Drainage of brain abscess, primary tapping	50.0	12.0
5128	subsequent tapping in operating room	25.0	7.0
5129	subsequent tapping in hospital room or ward	10.0	
5133	Frontal lobotomy, bilateral by craniotomy	60.0	18.0
5134	unilateral by craniotomy	40.0	15.0
5138	Tractotomy (medulla, mesencephalon)	100.0	21.0
5142	Ventricular tap	35.0	7.0
5145	Subdural tap, unilateral	35.0	7.0

Excision		Surg.	Anes.
5151	Excision of cortical scar	100.0	20.0
5154	Excision of brain cyst, neoplasm or abscess	100.0	22.0
5157	Excision of brain tissue; topectomy	100.0	20.0
5161	Excision of choroid plexus	50.0	20.0
5164	Excision of lobe of brain	100.0	24.0

Repair			
5181	Ventriculocisternostomy by catheter: Torkildsen-type operation	90.0	18.0
5185	Marsupialization of lesion (cyst, abscess)	90.0	20.0

SPINAL CORD AND NERVE ROOTS

Incision			
5207	Chordotomy; tractotomy or division or transection of nerve tracts in cord (cervical-dorsal)	100.0	17.0
5211	Rhizotomy; division or transection of nerve roots	80.0	15.0
5214	Decompression of spinal cord (by removal of hematoma, bone fragments)	80.0	18.0

Excision			
5221	Excision of lesion of spinal cord (neoplasm, cyst)	100.0	20.0

PERIPHERAL NERVES, CEREBRAL NERVES AND GANGLIA

Incision			
NEUROTOMY: cutting, division or transection of nerve			
5240	Retrogasserian neurotomy; transection of sensory root, trigeminal nerve, transtemporal	100.0	17.0
5243	posterior fossa	100.0	17.0
5245	intramedullary	100.0	19.0
5250	Transection of trigeminal and glossopharyngeal nerve	100.0	17.0
5252	Transection of phrenic nerves (phrenicotomy)	15.0	
5253	Phrenemphraxis; crushing	15.0	
5254	Transection of spinal nerves	40.0	9.0
5256	Transection of occipital nerve	40.0	9.0
5258	Transection of vagus nerve; vagotomy; vagectomy (abdominal)	45.0	9.0

5265 Transection of eighth cranial nerve (Meniere's syndrome) . . 100.0 17.0

Excision

5270 Excision of peripheral neuroma, digit 6.0 4.0
 5271 other superficial 10.0 4.0
 5272 deep 20.0 7.0
 5273 Phrenicectomy: resection of nerve 15.0 6.0
 5277 Neurexeresis: avulsion of infraorbital nerve 15.0 6.0
 5278 Obturator neurectomy, unilateral 30.0 7.0
 5279 bilateral 40.0 9.0
 5281 Phrenicoexeresis: avulsion of phrenic nerve 15.0 7.0
 5282 Stoefel's neurectomy, unilateral 30.0 8.0
 5283 bilateral 40.0 10.0

Injection

*5290 Injection of alcohol (intra-spinal, paravertebral or paracranial), initial 5.0
 *5291 subsequent 5.0
 *5294 Injection of alcohol (second and third divisions for trigeminal neuralgia), initial 7.5

Nerve Block

5298 Paravertebral block, lumbar or thoracic 5.0 5.0
 5300 Sympathetic block (cervical) 5.0 5.0
 5302 Stellate ganglion 5.0 5.0
 5311 Brachial plexus block 5.0 5.0
 5312 Intercostal nerves 2.5 2.5
 5313 Lumbar, sacral and coccygeal nerves 5.0 5.0
 5314 Pudendal nerve 5.0 5.0
 5315 Splanchnic nerves 5.0 5.0
 5316 Iliinguinal and iliohypogastric nerves 5.0 5.0
 5317 Sciatic nerve 3.0 3.0
 5318 Phrenic nerve 2.5 2.5
 5319 Other peripheral nerve 2.5 2.5

Repair

NEUROPLASTY: plastic repair of nerve injury.

6320 Major nerve, upper or lower arm or leg, old injury, including scar excisions, local advancements, etc. 40.0 T

5321 recent injury or transplant. 30.0 T
 5322 lysis or freeing from scar of intact nerve 20.0 T

5340 Digital nerve, within digit - suture, lysis or free from scar (each additional, add 25%) 15.0 T
 5343 Sensory nerves, hand or foot (excluding digits) - suture, lysis or freeing from scar, or transfer (each additional, add 25%) 20.0 T
 5344 Motor branch, median or ulnar nerve, new or old injury 30.0 T
 5350 Neuroanastomosis of spinal accessory-facial, hypoglossal-facial, spinal accessory-hypoglossal or others unspecified 75.0 T

VEGETATIVE NERVOUS SYSTEM

Excision

Sympathectomy:

5371 Cervical, unilateral 60.0 14.0
 5372 bilateral 80.0 17.0
 5375 Cervicothoracic, unilateral 60.0 14.0
 5376 bilateral 90.0 17.0
 5381 Lumbar, unilateral 50.0 10.0
 5382 bilateral 75.0 15.0
 5385 Splanchnicectomy, unilateral 60.0 12.0
 5386 bilateral 90.0 18.0
 5390 Presacral neurectomy, hypogastric plexus 50.0 10.0

EYE

EYEBALL

Incision

5401 Goniotomy, primary 30.0 7.0
 5402 secondary 20.0 7.0

Excision

5411 Enucleation of eyeball (bulb or globe) 30.0 8.0
 5412 with implantation of prosthesis 40.0 9.0
 5413 with movable implant, primary 50.0 10.0
 secondary 60.0 12.0
 5417 Evisceration of eyeball 30.0 7.0
 5418 with implantation in scleral shell 50.0 10.0

CORNEA

Incision		Surg.	Anes.
5441	Keratotomy, any type	10.0	
5443	Paracentesis of cornea (keratocentesis)	10.0	
*5445	Removal of foreign body from surface of cornea	1.5	
*5447	with magnet	3.0	
*5448	under slit lamp	3.0	
Excision			
5451	Keratotomy, partial	30.0	10.0
5452	complete	40.0	10.0
5457	Pterygium	20.0	7.0
Introduction			
5461	Tattoo of cornea, mechanical or chemical	30.0	10.0
*5465	Curettage and cauterization of corneal ulcer	5.0	
*5466	Iontophoresis of corneal ulcer	5.0	
Repair			
5471	Keratoplasty; corneal transplant, lamellar	80.0	15.0
5472	partial or complete, penetrating	100.0	17.0
Suture			
5481	Suture of perforated cornea	20.0	T

SCLERA

Incision			
5491	Sclerotomy, operative incision, with removal of intraocular foreign body (with or without magnet)	50.0	10.0
5492	with removal of foreign body from anterior chamber (with or without magnet)	50.0	10.0
5493	Removal of intraocular foreign body with magnet, without operative incision	30.0	8.0
5495	Sclerotomy, posterior (paracentesis)	30.0	8.0
5496	Aspiration of anterior chamber	4.0	
Excision			
5501	Sclerectomy for glaucoma, with scissors, punch or trephination (Lagrange, Holth, Elliott)	80.0	14.0

Surg. Anes.

5503	Scleral resection, full thickness	100.0	17.0
5504	lamellar	100.0	17.0
5505	subsequent	50.0	17.0

Introduction

5511	Air injection into anterior chamber for chronic glaucoma	15.0	T
5515	Irrigation and air injection into anterior chamber for chronic glaucoma	15.0	T

IRIS AND CILIARY BODY

Incision

5531	Iridotomy	20.0	7.0
5532	with transfixion of iris; iris bombe	20.0	7.0

Excision

5541	Excision of lesion of iris	50.0	9.0
5544	"Complete" iridectomy; optical iridectomy; preliminary iridectomy	40.0	8.0
5546	Peripheral iridectomy	40.0	8.0

Destruction

5551	Diathermy of the ciliary body; cyclodiathermy	30.0	8.0
5552	Iridodialysis - repair	40.0	9.0
5553	Corelysis	40.0	9.0
5554	Cyclodialysis	30.0	8.0

Manipulation

5571	Iridotaxis (iridencleisis); stretching of iris (independent procedure)	40.0	8.0
------	--	------	-----

CRYSTALLINE LENS

Incision

5601	Discission; needling of lens, primary	20.0	7.0
5602	secondary	10.0	7.0

Excision

5611	Extraction of lens, intracapsular or extracapsular, unilateral	70.0	12.0
5616	Removal of dislocated lens	100.0	12.0

VITREOUS

Incision

5622	Transplantation of vitreous	50.0	12.0
------	---------------------------------------	------	------

RETINA		Surg. Anes.	
Repair			
5631	Reattachment of retina, electrocoagulation, initial.	80.0	15.0
5632	subsequent	40.0	17.0
Examination			
5635	Funduscopy, under anesthesia	4.0	4.0

OCULAR MUSCLES			
Incision, excision and repair			
5641	Myotomy, tenotomy, recession, resection, advancement or shortening of ocular muscles for strabismus, one or more stages, unilateral . . .	50.0	8.0
5642	bilateral	60.0	10.0
5643	One muscle, initial	30.0	7.0
5646	subsequent	20.0	7.0
5647	Muscle transplant	70.0	12.0

ORBIT			
Incision			
5651	Orbitotomy with exploration . .	60.0	12.0
5652	with drainage of intraocular abscess	60.0	12.0
5653	with removal of intraorbital foreign body	60.0	12.0
5662	Excision of lesion of orbit, benign or malignant	60.0	15.0
5664	Exenteration or evisceration of orbital contents with or without graft	100.0	17.0
Introduction			
5671	Orbital injection of alcohol for hemorrhagic glaucoma or intractable pain		10.0
Repair			
5681	Plastic repair of orbit (see 0260 to 0325 and 0619, 0621, 0622).		

EYELIDS			
Incision			
*5691	Blepharotomy with drainage of abscess of eyelid	2.0	
*5692	with drainage of Meibomian glands; hordeolum (stye) . . .	2.0	
5697	Recession of levator palpebrae muscle	50.0	10.0
5698	Resection of levator palpebrae muscle	50.0	10.0

Excision		Surg. Anes.	
5701	Blepharectomy (see 0178 to 0190, 0260 to 0325).		
5702	incision or excision of Meibomian glands (chalazion), single	5.0	T
5703	multiple	6.0	T
5707	Excision of lesion of eyelid, malignant (see 0178 to 0190, 0260 to 0325).		
5712	Epilation, electrolytic	5.0	
5717	Excision of xanthoma (see 0178 to 0190, 0260 to 0325).		

Repair			
5721	Blepharoplasty: plastic repair of eyelid, with or without graft, any type (see 0260 to 0325).		
5723	Canthoplasty: plastic repair of canthus (see 0260 to 0319).		
5724	Plastic restoration of eyebrow (by graft) (see 0295 to 0325).		
5725	Tarsoplasty: plastic repair of tarsal cartilage (see 0265 to 0267).		
5726	Reposition of ciliary base (see 0260 to 0325).		
*5728	Cautery puncture for entropion or ectropion	5.0	
Suture			
5731	Blepharorrhaphy: suture of eyelid (see 0251 to 0252, 0265 to 0267).		
5734	Tarsorrhaphy: suture of tarsal cartilage (see 0251 to 0252, 0265 to 0267).		
5737	Canthorrhaphy: suture of palpebral fissure of canthus (see 0251 to 0252, 0265 to 0267).		

CONJUNCTIVA			
Incision			
*5741	Removal of foreign body from surface of conjunctiva	1.0	
*5742	embedded in conjunctiva . .	2.0	
*5743	Suture of conjunctiva	3.0	
Excision			
5751	Biopsy of conjunctiva	5.0	
*5753	Excision of lesion of conjunctiva: cyst	5.0	
5754	epithelioma (see 0178 to 0190, 0260 to 0325).		

5755 nevus (see 0178 to 0190, 0260 to 0325). Surg. Anes.

Repair
Conjunctivoplasty:

5771 Free graft of conjunctiva (see 0295 to 0296).
5773 of mucous membrane (see 0295 to 0296).
5774 Flap operation for corneal ulcer 15.0
5775 Flap operation; "flapping" of conjunctiva for perforating injuries or operative wound . . . 15.0
5776 for laceration 7.5
5777 Repair of symblepharon without graft (see 0178 to 0190, 0260 to 0276).

LACRIMAL TRACT

Incision
5801 Drainage of lacrimal gland (abscess). 10.0 T
5803 Drainage of lacrimal sac - dacryocystotomy or dacryocystostomy. 7.5 T
5804 Dacryocystomy or dacryocystostomy, intranasal. 20.0 T

Excision
5811 Dacryoadenectomy: excision of lacrimal gland 50.0 10.0
5813 Dacryocystectomy: excision of lacrimal sac. 50.0 10.0
5815 Excision of lacrimal gland tumor 50.0 10.0

Introduction
5821 Catheterization of lacrimonasal duct, initial 10.0 T

Repair
5833 Dacryocystorhinostomy: fistulization of lacrimal sac into nasal cavity, with or without anterior ethmoidectomy (Totl). 50.0 10.0
*5835 Closure of punctum by cautery 4.0

Manipulation
*5841 Dilation of punctum 2.0
*5843 Probing of lacrimonasal duct, initial 3.0

*5844 subsequent Surg. Anes. 1.5

EAR

EXTERNAL EAR

Incision
*5901 Drainage of abscess of auricle (see 0103). 2.0
*5903 Drainage of hematoma of auricle 2.0
*5905 Drainage of abscess of external auditory canal. 2.0

Excision
5911 Biopsy of ear 2.0
5914 Local destruction of lesion of ear (see 0178).
5915 with plastic closure (see 0260 to 0325).
5917 Complete excision of ear: amputation of ear 20.0 T
5922 Excision of exostosis of external auditory canal 20.0 T
5924 Radical excision of malignant lesion of external auditory canal 60.0 12.0

Endoscopy
5933 Otoscopy with removal of foreign body in external auditory canal under general anesthesia 5.0 4.0

Repair
5941 Otoplasty: plastic operation on ear (see 0260 to 0325).
5943 Reconstruction of ear with graft of skin plus cartilage, bone or other implant (see 0260 to 0325, 0619 to 0622).
5947 Otoplasty, of cartilage ("lop-ear"), with or without reduction in size (unilateral) . . 40.0 8.0
5948 Otoplasty (bilateral). 60.0 11.0

Suture
5951 Suture of wound or injury of ear (see 0251 to 0252, 0265 to 0267).

MIDDLE EAR

Incision
5955 Eustachian tube, catheterization and insufflation. 1.5