

Interventional Radiology Coding Case Studies

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Week of July 23, 2018

Conversion of Nephrostomy to Nephroureteral “Stent”

INDICATION: Patient with nonfunctioning nephrostomy tube.

TECHNIQUE: The patient was placed prone on the angiographic table. The right back was prepped and draped in normal sterile fashion as well as the existing tube. A gentle injection of contrast was performed through the tube demonstrating appropriate tube positioning of the nephrostomy tube with mild hydronephrosis. A small area of extravasation within the proximal ureter was identified. Next, the tube was cut and removed over a wire. A Glidewire in combination with a KMP catheter was used to cannulate the bladder. Injection of contrast was performed confirming placement within the bladder. A Foley catheter is present; irregularity to the bladder wall, consistent with a large bladder mass was seen. Next, an 8.5-French, 26 cm nephroureteral stent was inserted. The distal end was formed within the midline bladder; the proximal end was formed within the renal pelvis. Antegrade nephrostogram confirmed appropriate tube positioning and placement. The tube was secured to the back. The tube was placed to gravity drainage. The patient tolerated the procedure well. No immediate complications.

CONCLUSION: Indwelling nephrostomy tube was positioned appropriately. Conversion of 8-French nephrostomy tube to 8.5-French, 26 cm nephroureteral stent. The catheter was appropriately positioned in the bladder and the renal pelvis.

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Interventional Radiology Coding Case Studies CPT Codes

Week of July 23, 2018

Conversion of Nephrostomy to Nephroureteral “Stent”

Procedure Codes:

- 50434-RT Conversion of PCN to Nephroureteral Catheter

Diagnosis Codes:

- T83.092A Malfunction of PCN

Comments:

- Patient had an existing nephrostomy which was converted to a nephroureteral “stent”. Code 50434 describes conversion of a PCN to a nephroureteral “stent”. All imaging is bundled.
- The term “stent” is not always indicative of an internally indwelling stent (50693-50695). Documentation must be reviewed carefully to distinguish between a nephroureteral catheter vs. a stent.

Applicable Coding Rules:

Conversion of Nephrostomy Catheter to Nephroureteral Catheter (50434)

- Code 50434 is assigned when a nephrostomy catheter is converted to a nephroureteral catheter/stent via an existing nephrostomy tract.
- In those instances when a nephrostomy tube is reinserted after the stent is placed, there is no additional coding for placement of the nephrostomy tube; it is included in code 50434.
- Code 50434 also includes accessing the collecting system and/or associated ureter with a needle or catheter, drainage catheter manipulations, imaging guidance (ultrasound and/or fluoroscopy) and all associated RS&I to complete the procedure and diagnostic imaging (50430-50431).

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Applicable Coding Rules (continued):

- **Documentation tip:** A nephroureteral catheter (NUC) may also be referred to as a nephroureteral stent. When the catheter is advanced beyond the renal pelvis and extends through the ureter down into the bladder and is attached to an external drainage bag, this is a nephroureteral catheter/stent. The NUC/NUS allows for both external and internal drainage into the bladder.
- For a conversion, the patient presents with a catheter in the renal pelvis attached to an external drainage bag (PCN). For a conversion from a PCN to a nephroureteral catheter/stent, the catheter is advanced beyond the renal pelvis and extends through the ureter down into the bladder and is attached to an external drainage bag, this is a nephroureteral catheter/stent. The NUC/NUS allows for both external and internal drainage into the bladder.
- Code 50434 may be reported once for each renal collecting system/ureter accessed. Two separate codes would be reported for bilateral catheters or for a unilateral duplicated collecting system/ureter requiring two separate procedures. (ie, RT and LT, modifier -50, or modifier -59)
- Do not report 50434 with 50430, 50431, 50435, 50684, 50693, and 74425 for the same renal collecting system and/or associated ureter.

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