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ENDOVASCULAR AAA REPAIR CODING GUIDE

SURGICAL EXPOSURE OF ARTERY	CPT CODE	APPLICABLE MODIFIERS*				
Open femoral exposure	34812	-50	-62	-80	-82	-AS
Open iliac exposure	34820	-50	-62	-80	-82	-AS
Open iliac exposure with creation of conduit	34833	-50	-62	-80	-82	-AS
Open brachial exposure	34834	-50	-62	-80	-82	-AS
PLACEMENT OF WIRES/CATHETERS/SHEATHS	**CPT CODE**	**APPLICABLE MODIFIERS***				
Catheter/sheath placement into aorta; nonselective	36200	-50	—	—	—	—
Catheter/sheath placement into renals; selective	36245	-50	—	—	—	—
PLACEMENT AND DEPLOYMENT OF ENDOLUMINAL GRAFT (ELG)	**CPT CODE**	**APPLICABLE MODIFIERS***				
Endo AAA repair with modular bifurcated device (1 docking limb) 90-day global period	34802	—	-62	-80	-82	-AS
Endo AAA repair with modular bifurcated device (2 docking limbs) 90-day global period	34803	—	-62	-80	-82	-AS
Endo AAA repair with AUI device; 90-day global period**	34805	—	-62	-80	-82	-AS
Rad. S&I: endo AAA repair	75952-26	—	—	—	—	—
Extension prosthesis; initial vessel	34825	—	-62	-80	-82	-AS
Extension prosthesis; each additional vessel	+34826	—	-62	-80	-82	-AS
Rad. S&I: extension prosthesis	75953-26	—	—	—	—	—

ANCILLARY PROCEDURES	CPT CODE	APPLICABLE MODIFIERS*				
IVUS noncoronary, initial vessel	+37252	—	—	—	—	—
IVUS noncoronary, additional vessel	+37253	—	—	—	—	—
Arterial embolization or coiling (non-hemorrhage or tumor)	37242	—	—	—	—	—
Non-coronary arterial stent, initial artery	37236	—	—	-80	-82	—
Non-coronary arterial stent, add'l artery	+37237	—	—	—	—	—
Placement of sensor in aneurysmal sac	+34806	—	-62	-80	-82	-AS
Endo iliac artery occlusive device	+34808	—	-62	-80	-82	-AS
Fem-fem prosthetic graft	+34813	—	-62	-80	-82	-AS
Endo IAA repair with prosthesis	34900	-50	-62	-80	-82	-AS
Rad S&I: endo IAA repair	75954-26	—	—	—	—	—
Repair blood vessel, direct, lower extremity	35226	-50	-62	-80	-82	-AS
Thromboedarterectomy, incl. patch graft, common femoral	35371	-50	-62	-80	-82	-AS
Aortic fixation (unlisted procedure, vascular surgery)	37799	—	—	—	—	—

PHYSICIAN NAME:

DATE OF SERVICE:

PATIENT NAME:

OPEN SURGICAL SALVAGE	CPT CODE	APPLICABLE MODIFIERS*				
Open repair endo salvage; tube prosthesis	34830	—	-62	-80	—	-AS
Open repair endo salvage; aorto-bi-iliac prosthesis	34831	—	-62	-80	—	-AS
Open repair endo salvage; aorto-bifemoral prosthesis	34832	—	-62	-80	—	-AS

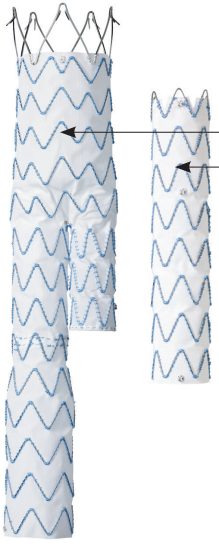
PRINCIPAL DIAGNOSIS
I71.4 - Abdominal aortic aneurysm without rupture
SECONDARY DIAGNOSIS

MODIFIER DESCRIPTION	
Professional component	-26
Bilateral procedure	-50
Multiple procedures (50% reduction)	-51
Distinct procedure service	-59
Distinct service – separate encounter	-XE
Distinct service – separate organ/structure	-XS
Distinct service – different practitioner	-XP
Distinct service – unique, non-overlapping	-XU
Cosurgeons: separate group and specialty (62.5%)	-62
Return to OR for related proc during post-op period	-78
Return to OR for unrelated proc during post-op period	-79
Assistant surgeon (16%)	-80
Assistant surgeon (resident surgeon unavailable)	-82
Assistant-at-surgery (non-physician practitioner) (85% of 16%)	-AS

* Other coding modifiers may apply.
** The placement of an iliac limb may or may not be included with 34805.
\+ Add-on code; list in addition to primary procedure

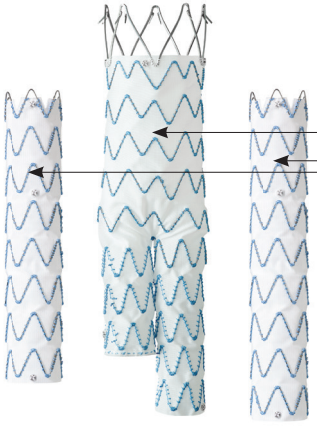
Please contact our Reimbursement team at 877-347-9662 for any questions.
These suggestions do not replace seeking coding advice from the payer and/or your coding staff.
The provider of services is ultimately responsible for correct coding.

Endurant® II Abdominal Stent Graft



34802:
Bifurcated graft
and docking limb

Endurant® IIs Stent Graft

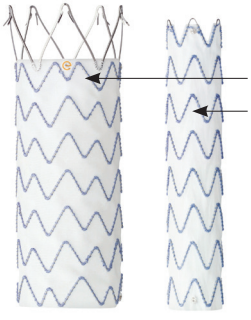


34803:
Bifurcated graft
and docking limbs

Endurant® II AUI

34805:
AUI graft

Extensions



34825/34826:
Aortic Extension,
Iliac Extensions
Placement of proximal
or distal extensions,
initial vessel/
each additional vessel.

www.medtronic.com

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Endurant® II/Endurant® IIs Stent Graft System Indications

The Endurant® II/Endurant® IIs bifurcated stent graft is indicated for the endovascular treatment of infrarenal abdominal aortic or aorto-iliac aneurysms. The Endurant II aorto-uni-iliac (AUI) stent graft is indicated for the endovascular treatment of infrarenal abdominal aortic or aortoiliac aneurysms in patients whose anatomy does not allow the use of a bifurcated stent graft. The Endurant II/Endurant IIs stent graft system is indicated for use in patients with the following characteristics:

- Adequate iliac/femoral access that is compatible with vascular access techniques, devices and/or accessories
- Proximal neck length of ≥10 mm
- Infrarenal neck angulation of ≤60°
- Aortic neck diameters with a range of 19 to 32 mm
- Distal fixation length(s) of ≥15 mm
- Iliac diameters with a range of 8 to 25 mm
- Morphology suitable for aneurysm repair

Contraindications

The Endurant II/Endurant IIs Stent Graft System is contraindicated in:

- Patients who have a condition that threatens to infect the graft.
- Patients with known sensitivities or allergies to the device materials.

Warnings and Precautions

- The long-term safety and effectiveness of the Endurant II/Endurant IIs Stent Graft System has not been established. All patients should be advised that endovascular treatment requires lifelong, regular follow-up to assess the health and the performance of the implanted endovascular stent graft. Patients with specific clinical findings (e.g., endoleaks, enlarging aneurysms or changes in the structure or position of the endovascular graft) should receive enhanced follow-up. Specific follow-up guidelines are described in the *Instructions for Use*.
- Patients experiencing reduced blood flow through the graft limb, aneurysm expansion, and persistent endoleaks may be required to undergo secondary interventions or surgical procedures.
- The Endurant II/Endurant IIs Stent Graft System is not recommended in patients unable to undergo or who will not be compliant with the necessary preoperative and postoperative imaging and implantation studies as described in the *Instructions for Use*.
- Renal complications may occur: 1) From an excess use of contrast agents. 2) As a result of emboli or a misplaced stent graft. The radiopaque marker along the edge of the stent graft should be aligned immediately below the lower-most renal arterial origin.
- Studies indicate that the danger of micro-embolization increases with increased duration of the procedure.
- The safety and effectiveness of the Endurant II/Endurant IIs Stent Graft System has not been evaluated in some patient populations. Please refer to the product *Instructions for Use* for details.

MRI Safety and Compatibility

Non-clinical testing has demonstrated that the Endurant II/Endurant IIs Stent Graft is MR Conditional. It can be scanned safely in both 1.5T & 3.0T MR systems under certain conditions as described in the product *Instructions for Use*. For additional information regarding MRI please refer to the product *Instructions for Use*.

Adverse Events

Potential adverse events include (arranged in alphabetical order): amputation; anesthetic complications and subsequent attendant problems (e.g., aspiration), aneurysm enlargement; aneurysm rupture and death; aortic damage, including perforation, dissection, bleeding, rupture and death; arterial or venous thrombosis and/or pseudoaneurysm; arteriovenous fistula; bleeding, hematoma or coagulopathy; bowel complications (e.g., ileus, transient ischemia, infarction, necrosis); cardiac complications and subsequent attendant problems (e.g., arrhythmia, myocardial infarction, congestive heart failure, hypotension, hypertension); claudication (e.g., buttock, lower limb); death; edema; embolization (micro and macro) with transient or permanent ischemia or infarction; endoleak; fever and localized inflammation; genitourinary complications and subsequent attendant problems (e.g., ischemia, erosion, femoral-femoral artery thrombosis, fistula, incontinence, hematuria, infection); hepatic failure; impotence; infection of the aneurysm, device access site, including abscess formation, transient fever and pain; lymphatic complications and subsequent attendant problems (e.g., lymph fistula); neurologic local or systemic complications and subsequent attendant problems (e.g., confusion, stroke, transient ischemic attack, paraplegia, paraparesis, paralysis); occlusion of device or native vessel; pulmonary complications and subsequent attendant problems; renal complications and subsequent attendant problems (e.g., artery occlusion, contrast toxicity, insufficiency, failure); stent graft: improper component placement; incomplete component deployment; component migration; suture break; occlusion; infection; stent fracture; graft twisting and/or kinking; insertion and removal difficulties; graft material wear; dilatation; erosion; puncture and perigraft flow; surgical conversion to open repair; vascular access site complications, including infection, pain, hematoma, pseudoaneurysm, arteriovenous fistula, dissection; vascular spasm or vascular trauma (e.g., iliofemoral vessel dissection, bleeding, rupture, death); vessel damage; wound complications and subsequent attendant problems (e.g., dehiscence, infection, hematoma, seroma, cellulitis)

Please reference product *Instructions for Use* for more information regarding indications, warnings, precautions, contraindications and adverse events.

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician.

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