

Socioeconomic tips

Sentinel lymph node (SLN) analysis has become the standard of care for initial regional lymph node assessment of breast malignancies and melanoma, replacing complete regional lymph node dissection for most patients. Although Current Procedural Terminology (CPT)* codes 38500–38780 serve to identify lymph node biopsy, complete regional dissection procedures, and formal lymphadenectomy procedures, these codes were developed before the widespread acceptance of SLN mapping.

Surgeons now have a code for accurate reporting of sentinel node mapping and identification. New add-on CPT code 38900, Intraoperative identification (eg, mapping) of sentinel lymph node(s), includes injection of non-radioactive dye, when performed (List separately in addition to code for primary procedure), is reported in conjunction with 19302, 19307, 38500, 38510, 38520, 38525, 38530, 38542, 38740, 38745. Approval of this add-on code marked the first opportunity for surgeons to capture the important work of identifying and mapping sentinel nodes as an integral part of SLN targeting for diagnostic sampling. Because of the complexity associated with breast cancer treatment options, a single stand-alone code insufficiently addressed the wide spectrum of uses for SLN mapping and biopsy.

SLN mapping and biopsy. Surgeons who commonly inject a blue dye (eg, Patent Blue V) intraoperatively to identify SLNs are encouraged to use code 38900 in conjunction with the appropriate primary procedure code to accurately report this important work.

19302, Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy); with axillary lymphadenectomy

+38900 Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed (List separately in addition to code for primary procedure)

Partial mastectomy with axillary dissection is reported with CPT code 19302. Biopsy or excision of lymph node(s) is an inherent part of CPT code 19302. To report the work associated with the intraoperative identification of the sentinel node, report add-on code 38900.

The National Correct Coding Initiative edits prohibit the use of any axillary SLN biopsy code (38500 or 38525) as an inherent part of the more complex
