

Dermatology Coding Alert

Reader Questions: Complex Lesions Justify Larger Lesion Codes

Question: Would you clarify the difference between a simple and complex incision and drainage (10060 and 10061)? We have read the Coding Clinic guidelines and the Coders Desk Reference for Procedures and are under the impression that the difference in the procedures is determined by whether or not the physician uses packing after the incision. Is this correct?

Minnesota Subscriber

Answer: Your assumption may be correct in some cases but not in others. The description for 10060 (Incision and drainage of abscess [e.g., carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia]; simple or single) includes clinical examples of a carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, paronychia, cyst, or furuncle. These are all simple, single, isolated small collections and rarely (but occasionally) require packing.

The more complex lesions (10061, ... complicated or multiple), on the other hand, are generally larger. These lesions may require packing where the physician probes to break up loculations, or may collect more than one simple area.

Any of these factors should indicate that you should report 10061 for the lesions.