

Dermatology Coding Alert

READER QUESTIONS: Go Deep With Debridement Code

Question: A patient with uncontrolled type II diabetes presents with an ulcer on his lower leg. The dermatologist debrides the wound through subcutaneous tissue and applies a dressing. I think the right code is 11042, but a colleague suggested 97597 or 97598. Which is right?

Florida Subscriber

Answer: You should report 11042 (Debridement; skin, and subcutaneous tissue). When your dermatologist treats a wound, you should select the wound debridement code according to the depth to which the physician debrides the wound.

Remember, you shouldn't confuse the depth of debridement with the depth of the wound. Code 11042's definition includes "skin and subcutaneous tissue" but does not include the muscle and bone.

Heads up: The debridement code includes reimbursement for the dressing application, so you may not code separately for that service. Routine dressing and supplies are bundled into the debridement code.

You shouldn't report 97597 (Removal of devitalized tissue from wound[s], selective debridement, without anesthesia [e.g., high-pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps], with or without topical application[s], wound assessment, and instruction[s] for ongoing care, may include use of a whirlpool, per session; total wound[s] surface area less than or equal to 20 square centimeters) and 97598 (... total wound[s] surface area greater than 20 square centimeters) because these codes indicate that the dermatologist used a waterjet and that the patient was not under any kind of anesthesia, either local or general. These aspects are not part of your scenario.