

## Internal Medicine Coding Alert

### Reader Question: Removal of Sutures

**Question:** Can we charge separately for the removal of sutures without anesthesia?

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**Answer:** When done by the same physician who performed the surgery or wound repair, the removal of sutures without anesthesia is considered to be an integral part of the procedure and not separately reimbursable by Medicare, according to the **Catherine Brink, CMM, CPC**, president of Healthcare Resource Management Inc., a physician practice management consulting firm in Spring Lake, N.J.

The Correct Coding Initiative states, [B]ecause many physician activities are so integral to a procedure, it is impractical and unnecessary to list every event common to all procedures of a similar nature as part of the narrative description for a code ... Accordingly, all services integral to accomplishing a procedure will be considered included in that procedure and, therefore, will be considered a component and part of the comprehensive code. To code separately for the removal of sutures without anesthesia would be considered by Medicare to be unbundling the entire service rendered. This is why there is no code for this procedure in CPT 2000.

If a physician other than the one who applied them removes the sutures without anesthesia, the second physician can consider the removal of the sutures as part of an evaluation and management service and use it to determine an appropriate level of service.

There are two codes for the removal of sutures while under anesthesia. Code 15850 (removal of sutures under anesthesia [other than local], same surgeon) is used when the physician who applied the sutures also does the removal. Code 15851 (removal of sutures under anesthesia [other than local], other surgeon) is used when a physician other than the one who applied the sutures performs the removal.

If these procedures are performed during the global surgical period, which is usually 90 days for major surgery and 10 days for minor surgery, then these codes would be billed with modifier -78 (return to the operating room for a related procedure during the postoperative period).