

## Part B Insider (Multispecialty) Coding Alert

### Guest Column by Henry II, Barnard, M.D.: Know The Differences Between Vertebroplasty and Kyphoplasty, And Correct Codes Will Follow

**Hint: Look for key terms in the surgeon's notes to identify kyphoplasty**

According to the National Osteoporosis Foundation, an estimated 700,000 people sustain vertebral decompression fractures (VCFs) annually due to osteoporosis. Spine surgeons treat these injuries in a number of ways, but vertebroplasty and kyphoplasty are two effective procedures that can help eradicate VCF patients- pain and get them on the road to recovery.

#### Get to Know the Differences

Both vertebroplasty and kyphoplasty are fairly new procedures. Vertebroplasty has been used in the United States since 1993, whereas kyphoplasty was introduced in 1998. Both are percutaneous procedures that provide strength and stability to compression fractures.

**Similarities:** During both kyphoplasty and vertebroplasty, the surgeon injects a cement material into the patient's vertebral bone to repair spinal fractures. Both procedures are performed percutaneously, and often under only local anesthesia.

**Differences:** During vertebroplasty, the surgeon introduces cement into the fractured vertebral body to fill any spaces and increase stability.

During kyphoplasty, however, the surgeon first inserts an inflatable bone tamp into the vertebral space and inflates it to help restore vertebral height (for this reason, some surgeons refer to kyphoplasty as -balloon-assisted percutaneous vertebroplasty-). After the surgeon creates the space in the vertebrae, he or she then injects cement to fill the space.

More recently, other biologic materials have been used as substitutes for the cement, although the technique remains quite similar.

#### Look for Location Information in the Note

If the surgeon doesn't specifically say whether he or she performed kyphoplasty or vertebroplasty, you can look for several clues in his or her notes to differentiate between kyphoplasty and vertebroplasty.

During kyphoplasty, the surgeon will probably use one of the following terms to describe the vertebral space inflation: Balloon; Bone tamp; KyphX or kypheX (KyphX- is a common brand name for the bone tamp, and some surgeons refer to it as -kypheX-); and/or IBT (which stands for -inflatable bone tamp-).

Because the kyphoplasty and vertebroplasty codes (below) reference the spinal level on which the surgeon performs the procedure, you should confirm the location of the patient's spinal fracture in your surgeon's notes before you select one of the following codes:

#### Vertebroplasty:

- 22520--Percutaneous vertebroplasty, one vertebral body, unilateral or bilateral injection; thoracic

- 22521--- lumbar

- +22522--- each additional thoracic or lumbar vertebral body (list separately in addition to code for primary procedure).

**Kyphoplasty:**

- 22523--Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device, one vertebral body, unilateral or bilateral cannulation (e.g., kyphoplasty); thoracic

- 22524--lumbar

- +22525--- each additional thoracic or lumbar vertebral body (list separately in addition to code for primary procedure).

Vertebroplasty and kyphoplasty have positively impacted the treatment of painful VCFs for which previous treatment options were few and frequently unsuccessful. Once you get to know the codes that accompany these procedures and the terms that describe the surgeries, you can identify and code from your spine surgeon's operative report with ease.

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