

## Part B Insider (Multispecialty) Coding Alert

### Reader Question: Base Lymph Removal Code on Modification

Question: My surgeon performs a selective neck dissection of levels 1-3. How should I bill this procedure? She preserves the internal jugular vein, spinal accessory nerve and sternocleidomastoid muscle. Would I use the same code for levels 2-4?

Answer: Any time the surgeon spends extra time dissecting out those structures and preserving or even trying to preserve them, you should use 38724 (Cervical lymphadenectomy [modified radical neck dissection]).

Because the physician modifies her surgical dissection plane to preserve some or all of those critical structures, she deserves the additional work value that the National Physician Fee Schedule assigns to that modification's complexity.

Snafu: CPT's cervical lymphadenectomy codes (38720-38724) don't correspond to the levels an otolaryngologist documents. You should instead look at whether the surgeon preserves anatomy. A selective neck dissection refers to a modified radical neck dissection (such as 38724), in which the physician chooses to preserve certain structures. In a radical neck dissection (such as 38720), the surgeon removes everything.