
Documentation Dissection

Preoperative Diagnosis: Basal cell carcinoma.

Postoperative Diagnosis: Same ^[1].

Operation: Mohs Surgery ^[2].

Indications: The patient has a biopsy proven basal cell carcinoma on the nasal tip ^[3] measuring 8 x 7 mm ^[4]. Due to its location, Mohs surgery is indicated. Mohs surgical procedure was explained including other therapeutic options, and the inherent risks of bleeding, scar formation, reaction to local anesthesia, cosmetic deformity, recurrence, infection, and nerve damage. Informed consent was obtained and the patient underwent fresh tissue Mohs surgery as follows.

STAGE I: ^[5] The site of the skin cancer was identified concurrently by both the patient and Dr. and marked with a surgical pen; the margins of the excision were delineated with the marking pen. The patient was placed supine on the operating table. The wound was defined and infiltrated with 1% Lidocaine with epinephrine 1:100,000 ^[6]. All gross tumor was completely excised in a debulking stage using aggressive curettage and/or cold steel. With all visible gross tumor completely excised, an excision was made around the debulking defect ^[7]. Hemostasis was obtained by spot electrodesiccation. A pressure dressing was placed. Tissue was divided into two tissue blocks ^[8] which were mapped, color coded at their margins, and sent to the technician for frozen sectioning. Microscopic tumor was found persisting in none of the tissue blocks. Following surgery the defect measured as follows: 10 x 13 mm to the subcutaneous tissue ^[9]. Closure will be by Burrow's graft performed by Dr. X ^[10].

Condition at Termination of Therapy: Carcinoma removed.

Pathology report on file.

^[1] Post-Operative diagnosis is the same as pre-operative diagnosis, which is Basal cell carcinoma.

^[2] Mohs surgery is performed.

^[3] Location is noted as the nasal tip.

^[4] The basal cell is 8 x 7 mm.

^[5] Stage 1.

^[6] Local anesthesia was used.

^[7] Noting the tumor has been removed, which supports Stage 1.

^[8] The tissue is divided into two tissue blocks.

^[9] Size and depth of the defect.

^[10] A Burrow's graft will be performed by another physician.

What CPT® and ICD-10-CM codes are reported?

CPT® Codes: 17311

ICD-10-CM Code: C44.311

Rationales:

CPT®: In the CPT® Index, look for Mohs Micrographic Surgery. You are directed to code range 17311–17315. 17311 reports Mohs of the head, up to five tissue blocks. The report indicates two tissue blocks were examined. The guidelines in the Mohs section remind us to code any graft separately. The Burrow’s graft is not reported because it will be performed by another surgeon.

ICD-10-CM: The diagnosis is basal cell carcinoma of the nose. Basal cell carcinoma is a malignant neoplasm of the skin. From the ICD-10-CM Alphabetic Index, look for Carcinoma/basal cell (pigmented) (*see also* Neoplasm, skin malignant). Go to the Table of Neoplasms, look for Neoplasm, neoplastic/nose, nasal/skin/basal cell carcinoma/Malignant

Primary column. Verify code selection in the Tabular List C44.311.
