

# **ERRATA for**

## ***Vascular & Endovascular Surgery Coding Reference***

### ***2016 Edition***

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Text deletions are ~~crossed out~~. New text is **blue and bolded**. Ordered by appearance in text.

#### **Page 222, Example(s)**

2) Same patient as example #1, however, the patient has a suspected uterine AVM. Via a right transfemoral approach, a catheter is placed into the right internal iliac artery followed by diagnostic pelvic angiography. This demonstrates high flow shunting, requiring glue and larger sized embolic material. Pelvic angiography is an indicated procedure (75736-59). The catheter is advanced into the uterine artery and angiography confirms catheter placement (36247). Embolization is performed with follow-up angiography (**37242**) (~~37243~~). The left internal iliac is then selected and imaged (add -50 modifier to 36247; add -50 modifier to 75736-59). The catheter is advanced into the uterine artery with additional imaging confirming catheter position, followed by embolization and follow-up angiography. Abdominal aortography is performed (75625-59). The ovarian arteries are selected bilaterally (36245-5950) and show no additional supply to the AVM (75736-5950). (This treatment of a pelvic AVM allows coding for diagnostic imaging, catheter placements, and the vascular abnormality embolization.)