

Lymphoma: Proper Coding of Lymph Node Biopsies and Excisions

For most primary sites an FNA, core OR excisional biopsy of a single or multiple lymph nodes is considered surgery and should be coded under "Scope of Regional Lymph Node Surgery." However, this is *not necessarily* the case for lymphomas.

As you know, lymph node excisions for lymphoma cases are **not coded** under "Scope of Regional Lymph Node Surgery," but rather as either a "Surgical Diagnostic/Staging Procedure" OR as surgery. This is where the confusion occurs.

Surgical Diagnostic/Staging Procedure code 02 vs Surgery Code 25

In order to properly code lymph node biopsies (FNA, core or excisional) of single or multiple lymph nodes, you <u>must first</u> determine the extent of the lymphoma as based on a **scan workup**. This is critical in determining whether the lymph node (LN) biopsy is to be considered as surgery or not.

If a scan workup shows multiple areas of lymphadenopathy and an FNA, core or even an excisional LN biopsy is performed, the *intent of the procedure is for diagnostic and staging purposes* only—meaning the suspicious LN is biopsied or removed to confirm the diagnosis and determine the histology. It is **NOT being performed as a curative treatment** since there are multiple areas of LN involvement. Thus the LN FNA, core or excisional biopsy should be coded as a Surgical Diagnostic/Staging procedure using code 02 [A biopsy (incisional, needle, or aspiration) was done of the primary site].

If on the other hand, the scan workup only shows a **single enlarged LN**, correct coding depends on whether the LN was completely excised or merely biopsied:

- If the singular involved LN is **removed in its entirety via an excisional biopsy**, then this constitutes **curative treatment**. As a result, this excisional biopsy should be **coded as surgery using code 25.**
- However, if only an FNA or core biopsy is performed on the singular involved LN, this does
 not constitute treatment and should be coded as a Surgical Diagnostic/Staging procedure
 using code 02 [A biopsy (incisional, needle, or aspiration) was done of the primary site] since
 the involved LN was not removed in its entirety.
 - Should this singular involved LN be removed via excisional biopsy at a later date, then its removal would constitute curative treatment. As a result, this excisional biopsy should be coded as surgery using code 25.