



Western Australian Coding Rule

0712/04 BT shunt takedown, division, ligation

Q.

What is the correct code for takedown (division) of BT shunts in babies that have had the shunt put in until big enough to do the final repair closure of VSD and conduit between right ventricle and pulmonary artery. Some suggest (a) 38653-00 [666] *Other intrathoracic procedures on the heart with CPB* (b) 35360-01 [742] *Open removal of intravascular foreign body* (c) 90222-00 [720] *Other procedures on arteries* and finally 38763-01 [610] *Right ventricular myectomy*. Child was born with TOF and is now 1 year old.

A.

A modified Blalock-Taussig shunt procedure is commonly performed for children with Tetralogy of Fallot (TOF) and involves a tube made of Gore-Tex being stitched between the subclavian artery and the pulmonary artery, to allow extra blood from the aorta to pass into the lungs and receive oxygen. The child needs more definitive surgery when old enough (around 6 months of age), which is to perform dacron patch closure of the ventricular septal defect to treat the TOF. At the same time, the Blalock-Taussig shunt is divided / ligated and the ends oversewn as the shunt is no longer required. Block 697 and 726 Interruption of vessel (clipping, division and ligation) state that these codes should be omitted if performed with any other vascular procedure, hence we advise that division of the Blalock-Taussig shunt does not need to be coded as it done in conjunction with another vascular procedure.

DECISION

Division, takedown or ligation of a BT shunt does not need to be coded when it is performed in conjunction with another vascular procedure.

[Effective 11 July 2012, ICD-10-AM/ACHI/ACS 7th Ed.]