

INTEGUMENTARY SYSTEM SURGICAL PROCEDURES

OPERATIONS OF THE BREAST

Asst

Surg

Anae

INCISION

Needle biopsy

Z141	- one or more.....	nil	37.20	
E542	- when performed outside hospital..... add		11.15	
Z143	- large core breast biopsy - (14 gauge or larger bore needle).....		132.75	

Aspiration of cyst

Z139	- one or more.....	nil	37.20	
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Drainage of intramammary abscess or haematoma

# Z140	Single or multiloculated - local anaesthetic.....		33.00	
# Z740	Single or multiloculated - general anaesthetic.....		75.00	6

EXCISION

# R107	Tumour or tissue for diagnostic biopsy and/or treatment, e.g. carcinoma, fibroadenoma or fibrocystic disease (single or multiple - same breast)	6	169.95	6
# E525	- after mammographic wire localization, to R107		41.55	
# R111	Partial mastectomy or wedge resection for treatment of breast disease, with or without biopsy, e.g. carcinoma or extensive fibrocystic disease	6	269.40	7
# E525	- after mammographic wire localization, to R111		41.55	
# E546	- with axillary node dissection up to the level of the axillary vein, to R111..add		388.75	
# E505	- with limited axillary node sampling, to R111		178.05	

Payment rules:

1. E505 is *not eligible for payment* in addition to Z427.
2. Z427 is *only eligible for payment* in addition to E546 when a frozen section report demonstrates micrometastases.

[Commentary:

For sentinel node biopsy refer to Z427 p R2.]

Mastectomy - female (with or without biopsy)

# R108	- simple.....	6	330.00	7
# R117	- subcutaneous with nipple preservation	6	273.95	7
# E505	- with limited axillary node sampling, to R108 or R117		178.05	

Note:

Skin grafts are *not eligible for payment* in addition to R117.

[Commentary:

For patients who have been approved by OHIP for mastectomy related to sex-reassignment surgery, the following fee codes may apply for mastectomy depending on the technique:

1. R108 - Mastectomy simple + R120 for nipple preservation and grafting
2. R117 - Mastectomy - subcutaneous with nipple preservation.]

# R109	Mastectomy, radical or modified radical (with or without biopsy)	6	685.00	7
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[Commentary:

Skin grafts are *eligible for payment* in addition to R109.]

Mastectomy - male (benign)

Unilateral - for treatment of *adolescent* gynecomastia, gynecomastia secondary to endocrine or genetic disorders (e.g. Klinefelter's Syndrome) or chemotherapy. Prior approval is not required. Removal of male breast fat tissue by liposuction is not an insured service.

# R146	- simple.....	6	177.50	7
# R147	- subcutaneous with nipple preservation	6	273.95	7

Mastectomy - male

Unilateral - for treatment of pathological male breast disease (*with or without* biopsy), e.g. carcinoma

# R148	- simple.....	6	273.95	7
# R149	- subcutaneous with nipple preservation	6	273.95	7
# E505	- with limited axillary node sampling, to R148 or R149		178.05	

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REPAIR

Post-mastectomy breast reconstruction

# R119	Breast mound creation by prosthesis as sole procedure	6	350.00	7
# R118	Breast skin reconstruction by local flaps or grafts, includes Wise pattern skin flaps and de-epithelialized skin flaps	6	405.60	6
# E529	- with breast mound creation by prosthesis, to R118		102.45	
# R156	Breast mound creation by insertion of tissue expander, includes creation of submuscular pocket	6	425.00	6
# E513	- breast mound creation by soft tissue, includes flap inseting and shaping for autogenous reconstruction, to R118, R125, R064, R008 or R155		297.50	
# E514	- immediate breast reconstruction following mastectomy, to R125, R064, R156, R008 or R155		200.00	

Note:

1. Z132 is *not eligible for payment* with R156.
2. E513 is *not eligible for payment* with E529.
3. E514 is *only eligible for payment* if post-mastectomy breast reconstruction is performed immediately following mastectomy during the same anaesthesia.

# R114	Revision of breast mound	6	230.30	7
# R120	Nipple-areola reconstruction by grafts and/or flaps	6	300.00	7
# R142	Nipple-areola tattooing - unilateral	nil	175.00	nil
# R143	Contralateral balancing mastopexy or reduction, to include nipple transplantation or grafting, if rendered	6	472.15	6
# R144	Contralateral balancing augmentation mammoplasty	6	350.00	6

Note:

1. R143 and R144 are *only eligible for payment* when performed for post-mastectomy breast reconstruction. Prior authorization of payment from the Ministry of Health and Long-Term Care is not required.
2. R110 and R112 are *not eligible for payment* with R143 or R144.

[Commentary:

1. For reduction or augmentation mammoplasty performed for reasons other than a balancing procedure related to post-mastectomy breast reconstruction, see R110 and R112 respectively. Prior authorization of payment from the ministry is required.
2. See the applicable service for post-mastectomy breast reconstruction by myocutaneous flaps or free flaps.]

Reduction mammoplasty and augmentation mammoplasty (other than post-mastectomy breast reconstruction)

# R110	Reduction mammoplasty (female, to include nipple transplantation or grafting, if rendered) - unilateral	6	472.15	7
# R112	Augmentation mammoplasty - unilateral	6	350.00	7

Note:

Prior authorization of payment from the Ministry of Health and Long-Term Care is required for R110 and R112 (see Surgical Preamble SP3; also, Appendix D).

# Z142	Removal of breast prosthesis	6	150.00	7
# Z135	Open capsulotomy with or without replacement of breast prosthesis	6	195.95	7
# Z182	Breast capsulectomy	6	255.05	7

Note:

Correction of inverted nipple(s) is not an insured service.

HAEMATIC AND LYMPHATIC SURGICAL PROCEDURES

LYMPH CHANNELS

		Asst	Surg	Anae
ANASTOMOSIS				
# R846	Micro lympho - lympho or lymphovenous	7	691.40	7
INCISION				
# Z410	Drainage of sub-fascial abscess		92.40	6
# Z413	Scalene node fine needle aspiration		31.25	
EXCISION				
Cystic hygroma				
# R907	- unilateral	6	408.65	7
Neck lymph nodes				
# R910	- limited dissection, must include 2 levels (unilateral) or central compartment	10	568.70	7
# R915	- comprehensive dissection, must include 3 or more levels, unilateral	10	1120.80	8
# R912	Ileocecal, radical resection	6	489.30	8
Axillary or inguinal lymph nodes				
# R913	- radical resection, unilateral	6	367.95	7
# R914	- limited resection, unilateral	6	207.30	6
BIOPSY				
# Z405	Anterior cervical lymph node(s), unilateral	6	186.90	6
# Z411	Axillary or inguinal lymph node(s), unilateral	6	62.95	6
# Z406	Scalene, posterior cervical lymph node(s), unilateral	6	247.75	6
# Z578	Multiple para-aortic lymph nodes		93.00	
# Z427	Sentinel node biopsy, per draining basin	6	330.45	8
Percutaneous retroperitoneal				
# Z407	- one group	6	108.05	6
# Z409	- two or more groups	6	162.20	6
# R916	Re-exploration of vascular graft and closure of lymph fistula in groin	6	207.30	6