

OPCS-4.8 Key Learning Points

Published January 2017



Information and technology
for better health and care

Contents

OPCS-4.8 Key Learning Points	3
Chapter A	3
Chapter B	3
Chapter D	4
Chapter E	4
Chapter F	4
Chapter G	4
Chapter H	4
Chapter K	4
Chapter L	5
Chapter M	5
Chapter P	5
Chapter Q	5
Chapter R	5
Chapter S	6
Chapter T	6
Chapter U	6
Chapter V	6
Chapter W	6
Chapter X	7
Chapter Y	7

OPCS-4.8 Key Learning Points

Following recommendation by the Standardisation Committee for Care Information (SCCI), the Department of Health has approved OPCS Classification of Interventions and Procedures Version 4.8 for NHS implementation on 1 April 2017. The Information Standards Notice (ISN) describes the mandate for NHS implementation and is available at <http://www.content.digital.nhs.uk/isce/publication/scci0084>

This latest update to create OPCS-4.8 is based on requirements received via the OPCS-4 Portal to reflect current clinical practice which fall within the scope of the classification and which will enable clinical coders to better reflect the intervention or procedure carried out due to the availability of more precise codes. This version has been completed in collaboration with The Department of Health, NHS England and clinical Expert Working Groups representing the Royal Colleges.

The main changes to the OPCS-4.8 classification and the most significant changes to national standards are summarised below.

The full list of changes to codes and code descriptions, within Volume 1 Tabular list, between OPCS-4.7 and OPCS-4.8 are contained within the [Summary of changes OPCS-4.7 to OPCS-4.8](#).

The full standards must be viewed in the National Clinical Coding Standards OPCS-4 Reference Book. Updates have been made to existing standards and guidance and new standards and guidance have been added due to the introduction of codes into OPCS-4.8. Not all new codes or changes to codes require a standard because they can be easily indexed and assigned by applying the four step coding process.

The Table of Changes section at the end of the reference book lists all of the changes that have been made in the reference book. Coders should review the Table of Changes and the full standard and/or guidance that has changed in order to ensure they are up-to-date with the current standards and that they are aware of all of the updates that have been made to the reference book.

The OPCS-4 Supplementary Information document has been updated with information about some of the new procedures. Both the reference book and the supplementary information are available for download via the Technology Reference Data Update Distribution [TRUD website](#).

Chapter A

There is new guidance about standard EEG classified at code **A84.1 Electroencephalography NEC** on page 51 of the reference book..

Chapter B

Category **B35** now classifies **operations on nipple and areola**. **B36 Reconstruction of nipple and areola** has a new inclusion note of '*Includes skin of areola*'.

Category **B41 Excision of breast** contains code **B41.1 Radionuclide guided excision of lesion of breast** which has an inclusion of *radionuclide guided lumpectomy*. The category also includes code **B41.2 Radionuclide guided partial excision of breast**, which includes *radionuclide guided wedge* and *radionuclide guided wide excision of breast*.

Chapter D

Skin grafts to external ear are classified at **D06.4** and skin flaps to external ear are classified to **D06.5**.

Chapter E

Code **E09.7** classifies skin grafts to external nose. Skin flaps to external nose are classified at **E66.1**.

Category **E67 Other therapeutic fiberoptic endoscopic operations on lower respiratory tract** contains code **E67.1 Endoscopic thermal bronchoplasty** which classifies the use of short pulses of radiofrequency energy that are applied to portions of the airway for the treatment of severe asthma.

Chapter F

Code **F09.6 Coronectomy NEC** classifies a coronectomy which involves removing the crown (all enamel) of a tooth whilst leaving the root and pulp undisturbed.

Chapter G

Codes **G12.1** and **G42.3** classify endoscopic mucosal resection (EMR) of oesophagus and upper gastrointestinal tract.

Codes have been added at **G20.1** and **G46.2** that classify fiberoptic endoscopic coagulation of bleeding lesion of oesophagus and upper gastrointestinal tract. The new coding standard **PCSG5: Coagulation of bleeding lesion(s) of upper gastrointestinal tract (G20.1 and G46.2)** explains that these codes must only be assigned when coagulation of bleeding lesion(s) is performed as a therapeutic procedure. These codes must not be used to classify coagulation as a means of haemostasis at the end of a procedure.

New guidance has been added to page 61 of the reference book around use of code **G30.5 Maintenance of gastric band**; this code now includes: maintenance of gastric port, attention to gastric band connecting tube, resiting of gastric band access port and replacement of gastric band access port. New entries for these have also been added to the Alphabetical Index.

Chapter H

Codes have been added at **H20.7**, **H23.7** and **H37.1** to classify endoscopic mucosal resection (EMR) of lesion of colon, lower bowel and sigmoid colon.

Code **H56.1 Biopsy of lesion of anus** now includes *biopsy of perianal skin region*.

Chapter K

Renewal of cardioverter defibrillator using 3 electrode leads is classified at code **K59.7**.

Standard **PCSK7: Implantation and renewal of cardiac resynchronisation therapy defibrillator (K59.6, K59.7)** has been updated to include renewals.

There are new codes for renewal of single, dual and biventricular cardiac pacemakers at categories **K73 Other cardiac pacemaker system introduced through vein** and **K74 Cardiac pacemaker system**.

There has been a change to the instructional note at category **K75 Percutaneous transluminal balloon angioplasty and insertion of stent into coronary artery** which now states to use code **K50.4** as a supplementary code when a **percutaneous transluminal atherectomy of coronary artery** has also been performed with a procedure from category **K75**.

Chapter L

Category **L75 Other arteriovenous operations** now excludes operations on surgically created arteriovenous fistula which are classified at category **L74 Arteriovenous shunt**.

Chapter M

Code **M06.4 Attention to nephrostomy tube NEC** has been retired; the code description in the Tabular List has been replaced with Code retired – refer to introduction. Code **M16.2 Maintenance of drainage tube of kidney** should be used to classify 'attention to' procedures.

Code **M53.7** classifies total removal of transobturator tape and **M57.4** classifies partial removal of transobturator tape. Tension free vaginal tape (TVT) are also referred to as retropubic tape (**M53.3, M53.4 and M53.5**), so additional entries have been added to the Alphabetical Index to clarify this.

Code **M68.3 Endoscopic insertion of prosthesis to compress lobe of prostate** classifies the procedure to compress/lift enlarged prostate glands that are pressing on the prostatic urethra causing problems passing urine.

Chapter P

There is a new standard at **PCSP2: Oversewing of exposed prosthetic mesh from previous vaginal prolapse repair (P22.8, P23.8 and P24.8)**.

Code **P27.4 Endoscopic examination of vagina** includes *vaginoscopy NEC*.

Codes **P28.1, P28.2, P30.1 and P30.2** classify total and partial removal of repair material from previous vaginal and vault of vagina prolapse repair.

Chapter Q

Standard **PCSQ2 Dilation, curettage (D&C), and hysteroscopy and intrauterine coil (Q10.3, Q10.8, Q18.8, Q18.9, Q12)** has been updated to instruct that when coding intrauterine coils procedures performed at the same time as hysteroscopy the hysteroscopy must be sequenced before the intrauterine coil. The associated guidance has also been updated.

Codes **Q54.7 and Q57.1** classify total and partial removal of repair material from previous suspension of uterus.

Chapter R

Standard **PCSR7: Obstetric scans (R36-R43)** now states that procedures classified to categories **R36-R43** are always carried out using ultrasound therefore a code from category **Y53** is not required to identify the method of image control.

Chapter S

There are changes to the table at the beginning of Chapter S Skin. Skin site nipple is now nipple and areola **B35-B36**. New additions are skin of perianal region **H48-H49**, **H56.1** and abdominal wall **T32**. Guidance on page 93 of the reference book has been updated to reflect these changes.

Chapter T

Code **T05.2 Resuture of previous incision of chest wall** has a new inclusion term for rewiring of sternum.

Abdominal cavity is a new inclusion at categories **T30 Opening of abdomen** and **T31 Other operations on anterior abdominal wall**.

Category **T32 Reconstruction of anterior abdominal wall** classifies procedures performed when the muscles and tissues that support the abdomen are destroyed, typically due to wound breakdown and infection following previous surgery. Damaged tissue is removed and healthy tissue is brought into the area using surgical techniques, such as local flaps, tissue advancement and if necessary, skin grafts. In addition, supporting materials such as artificial mesh material can be used when muscle has been lost.

Chapter U

Guidance about EEG telemetry, classified at code **U22.1 Electroencephalograph telemetry**, has been added to **PCSU5: Diagnostic tests (U22-U33 and U40)**.

Chapter V

Codes **V41.5**, **V41.6** and **V41.7** classify growing/lengthening rods; these are magnetically or surgically adjustable systems that are inserted posteriorly into the spine of younger patients for the treatment of scoliosis. There is new standard at **PCSV6: Magnetic adjustment of spinal growing system (V41.6)**.

New code **V51.1 Primary direct lateral excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine** has been added to standard **PCSV5: Lumbar interbody fusion (V33.3, V33.6, V38.5 and V38.6)**. **V51.1** and classifies Direct lumbar interbody fusion (DLIF).

Chapter W

The term 'small' has been replaced by 'short' at codes **W19.4 Primary open reduction of fracture of short bone and fixation using screw**, **W24.4 Closed reduction of fracture of short bone and fixation using screw** and **O17.4 Remanipulation of fracture of short bone and fixation using screw**.

There are new codes at **W24.7 Closed reduction of fracture of bone and fixation using plate** and **O17.6 Remanipulation of fracture of bone and fixation using plate**.

There are new codes at **W92.6** and **W92.7** for chemical and radiation synovectomy.

New standard **PCSW13: Patella resurfacing/patella button (W58.1)** has been added.

Chapter X

There is a new instructional note at categories **X32 Exchange blood transfusion** and **X47 Other exchange blood transfusion** to use a subsidiary code for **extracorporeal circulation NEC (Y73.2)** if the exchange is documented as being automated.

Chapter Y

Code **Y20.7 Vacuum biopsy of lesion of organ NOC** has an inclusion term of *vacuum assisted biopsy of lesion of organ NOC*.

Codes **Y74.9**, **Y75.9** and **Y76.9** are used as subsidiary codes to classify **minimally invasive approach NEC**.

Chapter Z

Code **Z15.7 Areola** has an inclusion note for *skin of areola*. Abdominal cavity is classified at code **Z53.7**. Category **Z88 Respiratory tract** contains code **Z88.1** which classifies hyoid.