

UMHS DEPARTMENT OF PATHOLOGY: Specimen To Charge Code Rapid Finder List

88304	Abortion—induced	88309	Breast mastectomy-simple with lymph nodes	88305	Cyst—ovarian, non-neoplastic
88305	Abortion—spontaneous or missed	88305	Breast needle core tissue biopsy	88304	Cyst—paratubal
88304	Abscess	88307	Breast, quadrantectomy	88304	Cyst—pilonidal
88302	Accessory digit, identification & report	88305	Breast reduction mammoplasty	88305	Cyst—sinus
88305	Accessory digit, diagnostic	88307	Breast, segmentectomy	88304	Cyst—skin
88304	Acrochordon, anus/skin	88307	Breast, tylectomy	88304	Cyst—synovial
88305	Acromioclavicular joint	88305	Bronchus (bronchial) biopsy	88305	Cyst—thyroglossal duct
88304	Adenoid(s)	88304	Bunion	88309	Cystectomy—partial or total bladder resection
88304	Adhesions, pelvic	88304	Bursa cyst	88302	Cystocele
88304	Adipose tissue (fat/fatty tissue)	88304	Carpal tunnel tissue	88304	Debridement—skin or soft tissue
88307	Adnexa—ovary w/ or w/o tube, neoplastic	88304	Cartilage shavings	88305	Dental cyst
88305	Adnexa—ovary w/ or w/o tube, non-neoplastic	88305	Cell block (any source)	88307	Dermoid cyst – of soft tissue or ovary (eg teratoma)
88307	Adrenal gland resection	88304	Cerebral aneurysm	88304	Dermoid cyst – skin
88305	Ampulla of Vater	88305	Cervical biopsy	88305	Diaphragm biopsy or tissue
88309	Amputation—extremity disarticulation	88307	Cervical cone/conization/cone biopsy	88309	Diaphragm – resection for tumor
88307	Amputation—extremity, non-traumatic	88305	Cervical cyst/polyp	88307	Diaphragm – resection other than for tumor
88305	Amputation—extremity, traumatic	88307	Cervix amputation without uterus	88309	Disarticulation—extremity
88305	Amputation—finger(s) or toe(s), non-traumatic	88307	Chips (TURB)—bladder	88304	Disc, intervertebral
88302	Amputation—finger(s) or toe(s), traumatic	88305	Chips (TURB)—prostate	88304	Diverticulum – bladder/urethra
88304	Aneurysm—aortic, arterial, cerebral or ventricular	88304	Cholesteatoma	88304	Diverticulum—esophagus, small bowel, colon
88304	Anus tag	88304	Cicatrix (skin scar)	88305	Donut., colon (eg, primary resection for tumor)
88304	Aortic aneurysm (eg. abdominal, thoracic)	88302	Circumcision—newborn	88304	Donut, colon (eg, primary resection not for tumor)
88302	Appendix—incidental	88304	Circumcision—other than newborn	88305	Duodenum biopsy
88304	Appendix—other than incidental	88305	Clot—bone marrow particle clot	88304	Dupuytren's contracture tissue
88304	Appendix, testis/epididymis	88305	Colon biopsy	88305	Dura mater—other than tumor resection
88305	Arachnoid mater —other than tumor resection	88304	Colon colostomy stoma	88307	Dura mater—tumor resection
88307	Arachnoid mater —tumor resection	88304	Colon diverticulum	88305	ECC (endocervical curetting)
88304	Arterial (artery) aneurysm	88305	Colon “donut” (eg, primary tissue for tumor)	88305	Ectopic pregnancy
88307	Arteriovenous malformation (AVM), complex	88304	Colon “donut” (eg, primary tissue not for tumor)	88304	Embolus
88305	Arteriovenous malformation (AVM), simple	88305	Colon polyp	88305	EMC (endometrial curetting)
88304	Artery atheromatous plaque	88309	Colon total resection w/or w/o mesenteric lymph nodes	88305	Endocervical curettings (ECC) or biopsy
88305	Artery biopsy/segment	88309	Colon w or w/o mesenteric lymph nodes-segmental resection for tumor	88305	Endometrial curettings (EMC) or biopsy
88305	Axillary tail/axilla—lymph node biopsy	88307	Colon w or w/o mesenteric lymph nodes – segmental resection other than for tumor	88305	Endometrial polyp
88307	Axillary tail/axilla—lymph nodes regional resection	88304	Colostomy stoma	88309	Endoscopic mucosal resection (EMR) for tumor, gastric or esophageal
88304	Bartholin's gland cyst	88307	Cone biopsy of cervix	88302	Enteroceles
88305	Bladder biopsy	88307	Conization of cervix (cone biopsy)	88304	Enterostomy stoma
88309	Bladder partial or total resection	88304	Conjunctiva biopsy or pterygium	88304	Epidermoid cyst
88307	Bladder transurethral resection (TUR)	88304	Contracture—Dupuytren's contracture tissue	88304	Epididymis
88304	Blood clot	88304	Cornea	88305	Epiglottis biopsy/simple excision
88307	Bone (except bone marrow) biopsy or curetting	88304	Cutaneous papilloma (tag), anus/skin	88304	Esophageal diverticulum
88307	Bone cyst	88304	Cyst—Bartholin's gland	88305	Esophageal polyp
88305	Bone exostosis	88307	Cyst - bone	88305	Esophagus biopsy
88304	Bone fragment(s)—other than pathologic fracture	88305	Cyst—brachial/branchial cleft	88309	Esophagus endoscopic mucosal resection for tumor
88307	Bone fragment(s)—pathologic fracture	88304	Cyst—bursa	88309	Esophagus partial or total resection
88305	Bone marrow biopsy	88305	Cyst—cervix	88305	Ethmoid tissue
88305	Bone marrow particle clot	88305	Cyst—dental/oral	88307	Extremity amputation—non-traumatic
88309	Bone resection	88307	Cyst—dermoid of soft tissue/ovary (eg teratoma)	88305	Extremity amputation—traumatic
88305	Brachial (branchial) cleft cyst	88304	Cyst – dermoid, skin	88309	Extremity disarticulation
88307	Brain biopsy	88304	Cyst—epidermoid	88307	Eye enucleation
88305	Brain—other than tumor resection or biopsy	88304	Cyst—ganglion	88305	Fallopian tube biopsy
88307	Brain tumor resection	88304	Cyst—hydatid	88305	Fallopian tube—ectopic pregnancy
88305	Breast biopsy, without margin exam	88304	Cyst – mucous retention (salivary)	88302	Fallopian tube for sterilization
88305	Breast, excision of discrete lesion (eg. fibroadenoma)	88307	Cyst, NOS, neoplastic	88304	Fat/fatty tissue NOS
88307	Breast, excision of lesion, with margin exam	88305	Cyst, NOS, nonneoplastic	88305	Fat pad, biopsy
88305	Breast, incisional biopsy	88305	Cyst—odontogenic	88305	Femoral head—fracture
88307	Breast, lumpectomy	88307	Cyst—ovarian, neoplastic	88304	Femoral head—other than fracture
88307	Breast mastectomy-partial or simple w/o lymph nodes	88307		88309	Fetus with dissection
88309	Breast mastectomy-radical/modified radical				

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88305	Fibroids (separate surgical procedure)	88305	Mammoplasty, breast reduction	88309	Peritoneum resection—for tumor
88305	Finger(s) amputation—non-traumatic	88305	Mediastinum biopsy (includes biopsy of mass)	88307	Peritoneum resection—other than for tumor
88302	Finger(s) amputation—traumatic	88307	Mediastinum mass	88305	Pharynx biopsy
88304	Fissure (fissura)	88304	Meningematoma/meninghematoma	88305	Pia mater—other than tumor resection
88304	Fistula	88305	Meninges—other than tumor resection	88307	Pia mater—tumor resection
88302	Foreskin—newborn	88307	Meninges—tumor resection	88304	Pilonidal cyst/sinus
88304	Foreskin—other than newborn	88307	Meningioma	88305	Pituitary tumor (biopsy or resection)
88304	Gallbladder	88304	Meniscus	88305	Placenta—other than third trimester
88304	Ganglion cyst	88304	Morton's neuroma	88307	Placenta—third trimester
88302	Ganglion—sympathetic	88304	Mucocele—salivary	88304	Plaque – atheromatous/fibrous/fibrofatty
88305	Gastric biopsy	88305	Mucosa biopsy—gingiva	88305	Plaque – senile/neuritic
88309	Gastric endoscopic mucosal resection for tumor	88305	Mucosa biopsy—nasal	88302	Plastic repair—skin
88305	Gastric polyp	88305	Mucosa biopsy—oral	88305	Pleura biopsy or tissue
88309	Gastric subtotal or total resection for tumor	88305	Mucosa - NOS	88309	Pleura resection—for tumor
88307	Gastric subtotal/total resection other than for tumor	88302	Mucosa—vaginal, incidental	88307	Pleura resection—other than for tumor
88305	Gingiva biopsy	88305	Mucosa—vaginal, other than incidental	88304	POC—induced abortion
88307	Heart biopsy	88305	Muscle biopsy	88305	POC—spontaneous or missed abortion
88305	Heart valve	88307	Myocardium biopsy	88304	Polyp – anal/anus
88305	Hemangioma, skin	88304	Nail, nail bed or scraping for fungus	88305	Polyp—cervical or endometrial
88309	Hemangioma, soft tissue, extensive resection	88305	Nasal mucosa biopsy	88305	Polyp - colon
88307	Hemangioma, soft tissue, simple excision	88304	Nasal polyp(s)	88305	Polyp—colorectal
88304	Hematoma	88304	Nasal septum	88305	Polyp – esophageal
88304	Hemorrhoids	88305	Nasopharynx biopsy	88304	Polyp – fibroepithelial, anus/skin
88302	Hernia sac (any location)	88304	Necrotic tissue (eg, soft tissue debridement), NOS	88304	Polyp – inflammatory nasal or sinusoidal
88304	Hydatid of Morgagni	88307	Nephrectomy, partial or total	88305	Polyp – rectal/rectum
88302	Hydrocele sac	88305	Nerve biopsy/segment	88304	Polyp—skin
88304	Ileostomy stoma	88307	Nerve tumor (eg, schwannoma)	88305	Polyp—stomach or small intestine
88302	Incidental appendix	88302	Nerve, identification & report only	88304	Products of conception—induced abortion
88302	Incidental thymus	88305	Neurofibroma	88305	Products of conception—spontaneous/missed abortion
88302	Incidental uvula	88304	Neuroma—Morton's or traumatic	88305	Prolapse, uterine with or without adnexa
88302	Incidental vaginal mucosa	88305	Neuroma—other	88307	Prostate except radical resection/TUR/needle biopsy
88304	Intervertebral disc	88305	Odontogenic cyst	88305	Prostate needle biopsy
88304	Jejunostomy stoma	88307	Odontogenic tumor	88309	Prostate radical resection
88304	Joint loose body	88305	Omentum biopsy	88305	Prostate transurethral resection (TUR)
88305	Joint resection	88309	Omentum resection—for tumor	88305	Pseudocyst (of skin)
88305	Kidney biopsy	88307	Omentum resection—other than for tumor	88304	Pseudoneuroma (traumatic neuroma)
88307	Kidney partial or total nephrectomy	88305	Oral cyst	88304	Pterygium
88305	Labia biopsy	88305	Oral mucosa biopsy	88307	Pulmonary wedge resection
88305	Larynx biopsy	88305	Oropharynx biopsy	88305	Rectal biopsy
88309	Larynx partial/total resection w/regional lymph nodes	88305	Osteochondroma (exostosis)	88302	Rectocele
88307	Larynx partial or total resection w/o lymph nodes	88307	Ovarian cyst—neoplastic	88305	Renal biopsy
88307	LEEP biopsy (if equivalent to cone biopsy)	88305	Ovarian cyst—non-neoplastic	88305	Retroperitoneal biopsy
88305	LEEP biopsy (if not equivalent to cone biopsy))	88305	Ovary biopsy or wedge resection	88307	Retroperitoneal mass
88305	Leiomyoma(s) uterine myomectomy without uterus	88307	Ovary with or without fallopian tube—neoplastic	88305	Rib, marrow squeeze
88304	Ligament	88305	Ovary w/ or w/o fallopian tube—non-neoplastic	88307	Salivary gland
88305	Lip biopsy or wedge resection	88307	Pancreas biopsy	88305	Salivary gland biopsy
88304	Lipoma	88309	Pancreas total or subtotal resection	88304	Salivary mucocele
88307	Liver needle or wedge biopsy	88305	Panniculus	88305	Scar - keloid
88307	Liver partial resection	88305	Parathyroid gland	88305	Scar – skin (tumor excision/re-excision)
88304	Loose body (except gross only)	88307	Parotid gland	88304	Scar – skin (simple/cicatrix)
88305	Lung biopsy—other than wedge biopsy	88305	Parotid gland biopsy	88304	Scar—soft tissue
88309	Lung total, lobe or segmental resection	88305	Particle clot, bone marrow	88307	Schwannoma (nerve tumor)
88305	Lung transbronchial biopsy	88305	Penis biopsy	88307	Sentinel lymph node(s)
88307	Lung wedge biopsy/resection	88309	Penis resection for tumor	88305	Sinus biopsy
88305	Lymph node biopsy (needle or incisional)	88305	Pericardium biopsy or tissue	88304	Sinus contents (eg, ethmoid, mucosa, turbinate)
88307	Lymph node for lymphoma workup (see chapter 5)	88309	Pericardium resection—for tumor	88304	Sinus cyst
88307	Lymph nodes regional resection	88307	Pericardium resection—other than for tumor	88305	Sinus mucosa stripping
88307	Lymph node, sentinel	88305	Peritoneum biopsy or tissue	88304	Sinus/sinusoidal polyp

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88304 Skin cyst, tag or debridement
 88305 Skin-other than cyst/tag/debridement/plastic repair
 88302 Skin—plastic repair
 88304 Skin polyp
 88305 Skin pseudocyst
 88305 Skin, wart (eg, verruca vulgaris)
 88304 Small bowel diverticulum
 88305 Small bowel polyp
 88305 Small intestine biopsy
 88309 Small intestine resection for tumor
 88307 Small intestine resection other than for tumor
 88305 Soft tissue (except mass), biopsy/simple excision
 88304 Soft tissue debridement
 88304 Soft tissue lipoma
 88307 Soft tissue mass (not lipoma) biopsy, simple excision
 88305 Soft tissue other than tumor/mass/lipoma/ debridement
 88309 Soft tissue tumor extensive resection
 88304 Spermatocele
 88305 Spinal cord biopsy
 88307 Spinal cord tumor excision
 88305 Spleen
 88304 Stoma (any site)
 88305 Stomach biopsy
 88305 Stomach polyp
 88309 Stomach subtotal or total resection for tumor
 88307 Stomach subtotal/total resection other than for tumor
 88307 Sublingual gland
 88305 Sublingual gland biopsy
 88307 Submandibular gland
 88305 Submandibular gland biopsy
 88307 Suprarenal gland resection (adrenal gland)
 88302 Supernumerary digit, identification & report
 88305 Supernumerary digit, diagnostic
 88307 Surgical margin, complicated exam
 88305 Surgical margin, uncomplicated exam
 88302 Sympathetic ganglion
 88304 Synovial cyst
 88305 Synovium (biopsy or resection)
 88304 Tag, anal (anus)
 88304 Tag, skin (eg, acrochordon, polyp)
 88304 Tendon
 88304 Tendon sheath
 88307 Teratoma, dermoid cyst or simple excision
 88309 Teratoma, extensive resection
 88304 Testicular appendage
 88307 Testis biopsy
 88302 Testis—castration
 88305 Testis—other than tumor, biopsy or castration
 88309 Testis tumor
 88304 Thrombus
 88302 Thymus, incidental
 88307 Thymus tumor
 88305 Thyroglossal duct cyst
 88305 Thyroid biopsy
 88307 Thyroid total or lobe resection
 88305 Toe(s) amputation—non-traumatic
 88302 Toe(s) amputation—traumatic
 88304 Toenail for fungus (see “nail”)

88305 Tongue biopsy
 88309 Tongue resection for tumor
 88304 Tonsil and/or adenoids
 88305 Tonsil biopsy
 88309 Tonsil resection for tumor
 88305 Trachea biopsy
 88305 Transbronchial biopsy
 88304 Traumatic neuroma
 88304 Turbinates (nasal conchae)
 88307 TUR—bladder
 88305 TUR—prostate
 88305 Ureter biopsy
 88307 Ureter resection
 88305 Urethra biopsy
 88305 Urinary bladder biopsy
 88309 Urinary bladder partial or total resection
 88307 Urinary bladder transurethral resection (TUR)
 88305 Uterine fibroids (separate surgical procedure)
 88307 Uterus w/ or w/o adnexa—except neoplastic/ prolapse
 88305 Uterus with or without tubes & ovaries for prolapse
 88309 Uterus with or without tubes & ovaries—neoplastic
 88302 Uvula simple excision (eg. sleep apnea)
 88302 Uvula - incidental
 88305 Vagina biopsy
 88302 Vaginal mucosa—incidental
 88305 Vaginal mucosa—other than incidental
 88305 Valve, heart
 88304 Varicocele
 88304 Varicose vein
 88304 Vas deferens—other than sterilization
 88302 Vas deferens—sterilization
 88307 Vascular malformation (AVM), complex
 88305 Vascular malformation (AVM), simple
 88305 Vein biopsy/segment
 88304 Vein varicosity
 88304 Ventricular (ventricle) aneurysm
 88302 Vermiform appendix—incidental
 88304 Vermiform appendix—other than incidental
 88305 Vocal cord biopsy
 88307 Vocal cord resection
 88305 Vulva biopsy
 88309 Vulva total or subtotal resection
 88305 Wart, skin (eg, verruca vulgaris)

TISSUE EXAM ADD-ONS:	
88311	Decalcification, per separately identified specimen
88348	Electron Microscopy; Diagnostic
88305	Electron Microscopy; Thick Section
88314	Histochemical Stain, with Frozen Section(s)
88318	Chemical Histochemistry (copper, zinc)
88319	Enzyme Histochemistry
88346	Immunofluorescence, Direct, each antibody
88347	Immunofluorescence, Indirect, each antibody
88342	Immunoperoxidase, each antibody
88365	In situ hybridization (eg, FISH), each probe
88312	Special Stain Group I, Microorganism (Gridley, acid fast, methenamine Silver)
88313	Special Stain Group II, Other (eg, iron, trichrome)
88363	Examination and selection of archival tissue for molecular analysis.

FROZEN SECTIONS:	
88329	Pathology consultation during surgery, Gross only operating room consultation
88331	First rapid microscopic diagnosis; with frozen section(s), per separately identified specimen
88332	Each additional frozen section block examined per specimen beyond initial block

CONSULTATIONS ON OUTSIDE SLIDES:	
88321	Referred Consultation – Prepared slides, Routine
88323	Referred Consultation – Requiring preparation of routine slides (recuts, deeper sections)
88325	Referred Consultation – Complex: Prepared slides, including review of chart, laboratory results, oncologist’s consultation (Requires admin approval)

A GROSS ONLY REVIEW SHOULD BE CODED 88300 FOR ALL SPECIMEN TYPES

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MANDATORY BUNDLING SPECIMEN TYPES:	
88309	Radical or modified radical mastectomy: One or more lymph nodes from any anatomic site in the chest area, including high axillary node(s) but excluding a designated "sentinel lymph node" must be billed as one specimen.
88309	Larynx Resection: one or more lymph nodes, except on designated as a "sentinel lymph node", from any anatomic site in the neck area must be billed as one specimen.
88309	Segmental or Total Large Bowel Resection For Tumor: One or more lymph nodes from the mesentery must be combined and billed as a single specimen.
88307	Segmental or Total Large Bowel Resection Other Than For Tumor: One or more lymph nodes from the mesentery must be combined and billed as a single specimen.
88305	Uterus For Prolapse: the right and left adnexa must be combined with the uterus for a hysterectomy or other surgery involving such combination of tissues.
88309	Uterus Neoplastic: the right and left adnexa must be combined with the uterus for a hysterectomy or other surgery involving such combination of tissues.
88307	Uterus Other Than Neoplastic or Prolapse: the right and left adnexa must be combined with the uterus for a hysterectomy or other surgery involving such combination of tissues.
88307	Ovary Neoplastic: The ovary and fallopian tube from the same side of the pelvis must be bundled even when the uterus is not involved in the case. If the ovary and fallopian tube from both sides of the pelvis are separately submitted and diagnosed, you may post a charge for each side.
88305	Ovary Non- neoplastic: The ovary and fallopian tube from the same side of the pelvis must be bundled even when the uterus is not involved in the case. If the ovary and fallopian tube from both sides of the pelvis are separately submitted and diagnosed, you may post a charge for each side.
88304	Adenoid Tissue With/Without Tonsils: All adenoid tissue must be bundled with one of the tonsils for a single charge. If both tonsils are submitted and are physically distinct by separate container or other means, a charge may be posted for each tonsil. Adenoid tissue is still bundled with one of the tonsils.
88305	Fingers or Toes Amputation – Non-traumatic: Two or more fingers/toes from the same hand/foot must be combined as a single charge. Fingers/toes from an apposing hand/foot are separately charged.

88302 **Fingers or Toes Amputation – Traumatic:** Two or more fingers/toes from the same hand/foot must be combined as a single charge. Fingers/toes from an apposing hand/foot are separately charged.

OTHER TISSUES THAT SHOULD BE BUNDLED:	
88304 or 88305	Abortion (spontaneous/missed/induced, including "POC") -- the fetal parts, blood clot, etc. are an inherent part of the total specimen and are not to be separately charged.
88305	Bone exostosis -- any cartilage or soft tissue is an integral part of the bony growth specimen, and it (they) is not separately charged.
88304	Cholesteatoma -- any connective tissue surrounding a cholesteatoma is an integral part of the specimen and is not to be separately charged.
88304	Conjunctiva -- any connective tissue with a conjunctiva is an integral part of the specimen and is not separately charged.
88304 or 88305 or 88307	Cysts (all types, including hydatid) -- any soft tissue cavity material is an integral part of a cyst and is not to be separately charged.
88302 or 88305 or 88307 or 88309	Extremity amputation (traumatic, non-traumatic, and disarticulation) -- the bone, soft tissue, cartilage, vein segments, etc. are an inherent part of the total specimen and are not to be separately charged.
88309	Fetus with dissection -- all parts of the fetus, whether submitted intact or fragmented, are an inherent part of the total specimen and are not to be separately charged.
88302 or 88305	Finger(s) & Toe(s) -- the bone, soft tissue, cartilage, vein segments, etc. are an inherent part of the total specimen and are not separately charged.
88304	Fissure/fistula/fissura -- these specimens include the capsule and contents (if any).
88305	Joint resection -- the bone, soft tissue, cartilage, etc. are an inherent part of the total specimen and are not separately charged.
88305 or 88307	Placenta -- the cord, blood clot, etc. are an inherent part of the total specimen and are not separately billed (but see "fetus with dissection" that may qualify as a separately chargeable specimen with a placenta).
88304	Pterygium -- a conjunctiva or connective tissue attached to a pterygium is an integral part of the specimen and is not to be separately charged.

DEFINITIONS & SPECIMEN ASSIGNMENTS:

- Any unlisted specimen should be assigned to the [CPT charge] code [category] that most closely reflects the physician work involved when compared to other specimens assigned to that code.
- Two or more lymph nodes from the same anatomic site constitute a "regional resection" for charge classification. A single lymph node is classified as a "lymph node biopsy" (88305), unless it is a designated "sentinel lymph node" (88307) or a node for lymphoma study (see next point).
- A single lymph node for evaluation for lymphoma is considered a soft tissue mass coded 88307. However, if multiple lymph nodes are separately submitted to assess lymphoma, the secondary node(s) should be billed with 88305; that is, one 88307 charge for the primary lymph node and one or more 88305 charges for the secondary node(s), depending on how many separate containers are present.
- Excisional breast tissue (e.g., lumpectomy, tylectomy, quadrantectomy, wire localization excision, the entire palpitated or radiologically identified mass) is classified for charge as "breast mastectomy—partial or simple" (88307). Only a breast needle core biopsy, an incisional breast biopsy (i.e., sampling of a suspect area to determine the probable nature of the larger contiguous area), a discrete lesion biopsy not requiring microscopic evaluation of surgical margins (e.g., fibroadenoma per the CAP), or a separately submitted and diagnosed surgical margin qualifies for coding as a "breast biopsy" (88305).
- The term "traumatic" that appears in several CPT descriptors is to be interpreted literally. Similarly, the term "non-traumatic" is to be literally applied, meaning "other than for reasons of trauma."
- The term "neoplasm" that appears in several CPT descriptors encompasses both malignant and benign conditions. It also includes pre-malignant conditions such as dysplasia (whether mild or otherwise). Note, however,

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- that the College of American Pathologists has declared a leiomyoma of the uterus to be a non-neoplastic condition.
7. The term “pathologic fracture” in several CPT descriptors refers to a weakening in or actual fracture of bone due to a pathologic process, such as neoplasia, osteomalacia, osteomyelitis, osteoporosis, etc. (An actual “fracture” of the bone does not need to be in evidence for the specimen to be classified under a “pathologic fracture” descriptor.) The term does not, however, apply to an inflammatory condition such as rheumatoid arthritis.
 8. Except as noted in the next point, the pathologic findings and diagnosis, not the clinical diagnosis, medical history, or clinical suspicion, govern the “specimen type” to be assigned for pathology charge purposes. For example: (a) a specimen labeled “right obturator nodes” found to contain only fat would be coded 88304 (lipoma), not 88307 (lymph nodes regional resection); (b) a specimen labeled “prolapse” would be coded 88309 (uterus with or without tubes & ovaries—neoplastic) if dysplasia were diagnosed, not 88305 (uterus with or without tubes & ovaries for prolapse); and (c) a partial hysterectomy submitted for a patient with an earlier positive ovary resection would be classified under 88307 (uterus with or without tubes & ovaries—non-neoplastic) if no residual neoplasia is found.
 9. Selection of the correct “specimen type” for descriptors that distinguish “for tumor” versus “other than for tumor” is based on the patient’s medical history or clinical diagnosis, clinical suspicion, and/or operative procedure, not on the basis of the actual pathologic findings and diagnosis. That is, for example, a colectomy specimen submitted with a clinical diagnosis of “malignant polyp two weeks ago” would still be classified under 88309 (colon segmental resection for tumor) even though tumor or neoplasia was not actually found. The referring physician’s clinical diagnosis ICD9CM code must be reported together with the pathologic diagnosis for such a situation.
 10. If only a single LEEP cervical cone biopsy is submitted for a case, whether fragmented or otherwise in a single container, it should be billed with 88307. However, if two or more LEEP cervical biopsies are separately submitted, each should be billed with 88305 (with the charge count dependent on the number of separate containers that are present), unless the pathologist is confident that one or more of the specimens is indeed consistent with a “cervix, conization” as described in the CPT text. Multiple 88307 codes may be appropriate for a case (e.g., endo- and ecto-cervical LEEP cone biopsies), when the pathologist judges two or more specimens to be consistent with a conization. A fragmented conization sent in two separate containers should be billed 88305x2, not as a single 88307.
 11. Tissue that is predominantly debridement of the sinus cavity and/or nasal passage (e.g., ethmoid, turbinate, nasal septum) is, by convention, equated to 88304 for charge.
 12. The products of a “total knee” arthroscopic procedure are usually classified as a “joint resection” (88305) for charge.
 13. In most instances a “skin” specimen, other than a cyst, tag, plastic repair, or debridement, must be classified under 88305, even when the specimen is diagnosed as “melanoma.”
 14. The specimen descriptors in CPT are to be read and applied literally, without reference to medical convention. For example, a descriptor that uses the singular word form (e.g., polyp, vas deferens, fallopian tube) means “each”; however, a descriptor set in the plural form [e.g., polyps, finger(s)] means “as many as apply.” This convention typically has greatest impact on the accurate number of 88300-88309 billing units per case, and Section I of this guide should be consulted when necessary.
 15. A tissue core biopsy is a histologic specimen, regardless of the procurement circumstances. Therefore, the correct coding for such a specimen is 88305 (e.g., lung source) or 88307 (e.g., liver source), even when the material was extracted under CT or ultrasound guidance by a radiologist in a situation that might otherwise be construed as a “fine needle aspirate” surgical procedure.