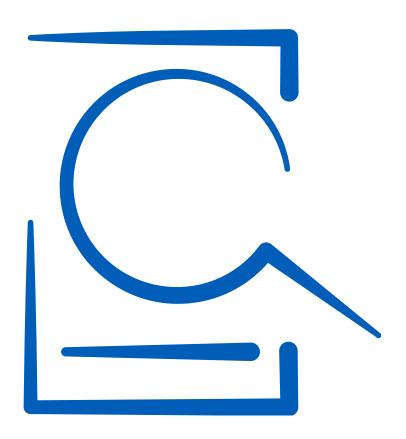
Evidence-based Interventions Clinical coding for all interventions



For further information on the Evidence Based Interventions programme visit the $\underline{\sf EBI\ website}$. Or contact $\underline{\sf england.ebiinterventions@nhs.net}$.

Contents

5	Background
6	Removal of adenoids for treatment of glue ear
9	Angioplasty for PCI (percutaneous coronary intervention) in stable angina
12	Appendicectomy without confirmation of appendicitis
14	MRI scan of the hip for arthritis
19	Low back pain imaging
21	Injection for non-specific low back pain without sciatica
23	Referral for bariatric surgery
26	Blood transfusion
30	Surgical intervention for benign prostatic hyperplasia
33	Breast prosthesis removal
36	Breast reduction
38	Carpal tunnel syndrome release
40	Asymptomatic carotid artery stenosis screening
43	Shared decision making for cataract surgery
46	Chalazia removal
48	Cholecystectomy
50	Penile circumcision
52	Appropriate colonoscopy in the management of hereditary colorectal cancer & Repeat colonoscopy
55	Diagnostic coronary angiography for low risk, stable chest pain
58	Exercise ECG for screening for coronary heart disease
60	Cystoscopy for uncomplicated lower urinary tract symptoms
62	Dupuytren's contracture release
64	Upper GI endoscopy
67	Fusion surgery for mechanical axial low back pain
70	Ganglion excision
72	Glaucoma referral criteria
75	Grommets for glue ear in children
77	Non-visible haematuria
80	Haemorrhoid surgery
83	Helmet therapy for treatment of positional plagiocephaly/ brachycephaly in children
85	Repair of minimally symptomatic inguinal hernia
87	Hysterectomy for heavy bleeding

90	Surgical removal of kidney stones
92	Knee arthroscopy with osteoarthritis
95	Lumbar Discectomy
98	Lumbar radiofrequency facet joint denervation
100	Arthroscopic surgery for meniscal tears
102	Dilatation and curettage for heavy menstrual bleeding
104	Knee MRI when symptoms are suggestive of osteoarthritis & Knee MRI for suspected meniscal tears
110	Optical coherence tomography (OCT) use in diabetic retinopathy referral
113	ERCP in acute gallstone pancreatitis without cholangitis
117	Needle biopsy of prostate
119	Surgical intervention for chronic rhinosinusitis
122	Scans for shoulder pain and guided injections for shoulder pain
125	Arthroscopic shoulder decompression for subacromial pain
127	Removal of benign skin lesions
132	Adult Snoring Surgery (in the absence of OSA)
134	Tonsillectomy for recurrent tonsillitis
136	Trigger finger release
138	Troponin test
140	Varicose vein surgery
143	Vertebral augmentation (vertebroplasty or kyphoplasty) for painful osteoporotic vertebral fractures

Background

The EBI programme began as an NHS England (NHSE) initiative in 2018/19 – at its heart, it is a programme designed to tackle over-medicalisation by not offering, or reducing the number of tests, treatments and procedures which are of no or little clinical value.

NHSE and the Academy of Medical Royal Colleges lead the programme, with other partners including NICE, The Patients Association and NHS Confederation.

The programme uses the best available evidence to provide guidance on when it is and is not appropriate to carry out specific interventions.

- By not carrying out tests, treatments and procedures which are not clinically effective, the EBI programme improves the quality-of-care patients receive.
- It also helps us tackle the backlog by making sure patients aren't waiting for treatments that we know are unlikely to improve their condition or where other treatments are likely to have a better outcome.
- And crucially it enables us to make the best use of clinical time and NHS resources by ensuring those who most need care are seen and treated sooner.

The programme has published a suite of 58 interventions in total.

Coding Review

The EBI programme has commissioned a review of the clinical codes used for all interventions released in and before 2023. This work was undertaken by specialist clinical coders in MIAA who have provided clinical coding attached to each policy, including diagnoses and procedures related to the commissioning of a procedure, and any exceptions.

This has been produced using the International Statistical Classifications of Diseases and Related Health Problems, Tenth Revision, Fifth Edition (ICD-10 5th Edition) and the OPCS Classification of Interventions and Procedures, Fourth Revision, Tenth Edition (OPCS-4.10).

It also includes adhering to the national clinical coding standards published in the National Clinical Coding Standards ICD-10 5th Edition (2022) reference book and the National Clinical Coding Standards OPCS-4 (2022) reference book.

Removal of adenoids for treatment of glue ear

EBI recommendation

Adjuvant adenoidectomy should not be routinely performed in children undergoing grommet insertion for the treatment of otitis media with effusion.

Coding

Code Script

```
WHEN apcs.der_procedure_all like '%E20[1489]%'
AND apcs.der_procedure_all like '%D151%'
AND der.Spell_Primary_Diagnosis like 'H65[2349]%'
AND not (apcs.der_diagnosis_all like '%G473%'
OR apcs.der_diagnosis_all like '%J32[0123489]%'
OR apcs.der_diagnosis_all like '%J352%'
OR apcs.der_diagnosis_all like '%Q35[13579]%'
OR apcs.der_diagnosis_all like '%Q37[01234589]%')
AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS_Activity_Date)<=18
AND APCS.Admission_Method not like ('2%')
THEN '2D adenoid removal'
```

Code Definitions

Procedure codes (OPCS)

Main

E201 Total adenoidectomy
E204 Suction diathermy adenoidectomy
E208 Other specified operations on adenoid
E209 Unspecified operations on adenoid
D151 Myringotomy with insertion of ventilation tube through tympanic membrane

(coded in addition to E20-)

Diagnosis codes (ICD)

Inclusion

- H652 Chronic serous otitis media
- H653 Chronic mucoid otitis media
- H654 Other chronic nonsuppurative otitis media
- H659 Nonsuppurative otitis media, unspecified

Exclusion

- G473 Sleep apnoea
- J320 Chronic maxillary sinusitis
- J321 Chronic frontal sinusitis
- J322 Chronic ethmoidal sinusitis
- J323 Chronic sphenoidal sinusitis
- J324 Chronic pansinusitis
- J328 Other chronic sinusitis
- J329 Chronic sinusitis, unspecified
- J352 Hypertrophy of adenoids
- Q351 Cleft hard palate
- Q353 Cleft soft palate
- Q355 Cleft hard palate with cleft soft palate
- Q357 Cleft uvula
- Q359 Cleft palate, unspecified
- Q370 Cleft hard palate with bilateral cleft lip
- Q371 Cleft hard palate with unilateral cleft lip
- Q372 Cleft soft palate with bilateral cleft lip
- Q373 Cleft soft palate with unilateral cleft lip
- Q374 Cleft hard and soft palate with bilateral cleft lip
- Q375 Cleft hard and soft palate with unilateral cleft lip
- Q378 Unspecified cleft palate with bilateral cleft lip
- Q379 Unspecified cleft palate with unilateral cleft lip

Potential

- H661 Chronic tubotympanic suppurative otitis media
- H662 Chronic atticoantral suppurative otitis media
- H663 Other chronic suppurative otitis media
- H664 Suppurative otitis media, unspecified
- H669 Otitis media, unspecified
- H670 Otitis media in bacterial diseases classified elsewhere

- H671 Otitis media in viral diseases classified elsewhere
- H678 Otitis media in other diseases classified elsewhere
- H681 Obstruction of Eustachian tube
- H698 Other specified disorders of Eustachian tube
- H699 Eustachian tube disorder, unspecified

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Angioplasty for PCI (percutaneous coronary intervention) in stable angina

EBI recommendation

PCI should only be performed in patients with stable angina that fulfil these criteria, after optimisation of medication. Patients should be properly consented with documented shared decision making.

Coding

Code script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ('K491', 'K492', 'K493', 'K494', 'K498', 'K499', 'K504', 'K751', 'K752', 'K753', 'K754', 'K758', 'K759')

AND (APCS.Der_Diagnosis_All LIKE '%I20[89]%')

AND (NOT ( APCS.Der_Diagnosis_All LIKE '%I50[01]%'

OR APCS.Der_Diagnosis_All LIKE '%I518%')

OR APCS.Der_Diagnosis_All IS NULL )

THEN '3G_Angioplasty_PCI'
```

Outpatient

```
WHEN (OPA.Der_Procedure_All LIKE '%K49[123489]%'
OR OPA.Der_Procedure_All LIKE '%K504%'
OR OPA.Der_Procedure_All LIKE '%K75[123489]%')
AND (NOT (OPA.Der_Diagnosis_All LIKE '%I50[01]%'
OR OPA.Der_Diagnosis_All LIKE '%I518%')
OR OPA.Der_Diagnosis_All IS NULL )
THEN '3G_Angioplasty_PCI'
```

Code Definitions

Procedure codes (OPCS)

- K491 Percutaneous transluminal balloon angioplasty of one coronary artery
- K492 Percutaneous transluminal balloon angioplasty of multiple coronary arteries
- K493 Percutaneous transluminal balloon angioplasty of bypass graft of coronary artery
- K494 Percutaneous transluminal cutting balloon angioplasty of coronary artery
- K498 Other specified transluminal balloon angioplasty of coronary artery
- K499 Unspecified transluminal balloon angioplasty of coronary artery
- K504 Percutaneous transluminal atherectomy of coronary artery
- K751 Percutaneous transluminal balloon angioplasty and insertion of 1-2 drugeluting stents into coronary artery
- K752 Percutaneous transluminal balloon angioplasty and insertion of 3 or more drugeluting stents into coronary artery
- K753 Percutaneous transluminal balloon angioplasty and insertion of 1-2 stents into coronary artery
- K754 Percutaneous transluminal balloon angioplasty and insertion of 3 or more stents into coronary artery NEC
- K758 Other specified percutaneous transluminal balloon angioplasty and insertion of stent into coronary artery
- K759 Unspecified percutaneous transluminal balloon angioplasty and insertion of stent into coronary artery

Diagnosis codes (ICD)

Inclusion

- 1208 Other forms of angina pectoris
- 1209 Angina pectoris, unspecified

Exclusion

- 1500 Congestive heart failure
- 1501 Left ventricular failure
- 1518 Other ill-defined heart diseases

No code specifically for left ventricular systolic dysfunction - SNOMED CT maps to I518 but local policies could include I500 and I501. Should be excluded as a secondary diagnosis.

1251 Atherosclerotic heart disease

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Appendicectomy without confirmation of appendicitis

EBI recommendation

Recent studies have shown there is a potential role for non-operative management of acute appendicitis, imaging can help identify which patients could be managed conservatively.

Coding

Code Script

```
WHEN LEFT(Der.spell_dominant_procedure,4) in ('H011','H012','H013','H018','H019')

AND not (apcs.der_diagnosis_all like '%K35[238]%'

OR apcs.der_diagnosis_all like '%K3[67]%')

THEN '2R CTappendicitis'
```

Code Definitions

Procedure codes (OPCS)

- H011 Emergency excision of abnormal appendix and drainage HFQ
- H012 Emergency excision of abnormal appendix NEC
- H013 Emergency excision of normal appendix
- H018 Other specified emergency excision of appendix
- H019 Unspecified emergency excision of appendix
- H011 Emergency excision of abnormal appendix and drainage HFQ
- H012 Emergency excision of abnormal appendix NEC
- H013 Emergency excision of normal appendix
- H018 Other specified emergency excision of appendix
- H019 Unspecified emergency excision of appendix

Diagnosis codes (ICD)

Exclusion

K352 Acute appendicitis with generalized peritonitis

K353 Acute appendicitis with localized peritonitis

K358 Acute appendicitis, other and unspecified

K36X Other appendicitis

K37X Unspecified appendicitis

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

--Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

MRI scan of the hip for arthritis

EBI recommendation

Do not request a hip MRI when the clinical presentation (history and examination) and X-rays demonstrate typical features of OA. MRI scans rarely add useful information to guide diagnosis or treatment.

Coding

Code Script

```
WHEN
           ((opa.Der Procedure All like '%U133%'
                       OR opa. Der Procedure All like '%U211%')
           AND (opa.Der Procedure_All like '%Z84[389]%'
                       OR opa.Der Procedure All like '%Z902%'))
                          opa.der diagnosis all like '%M00[01289]%'
           AND (not (
                       OR opa.der diagnosis all like '%M01[01234568]%'
                       OR opa.der diagnosis all like '%M0[25][012389]%'
                       OR opa.der diagnosis all like '%M03[0126]%' OR
                       opa.der diagnosis all like '%M0[68][0123489]%'
                       OR opa.der diagnosis all like '%M07[0-6]%' OR
                       opa.der diagnosis all like '%M09[0128]%'
                       OR opa.der diagnosis all like '%M10[012349]%' OR
                       opa.der diagnosis all like '%M11[01289]%'
                       OR opa.der diagnosis all like '%M12[0123458]%' OR
                       opa.der diagnosis all like '%M13[0189]%'
                       OR opa.der diagnosis all like '%M14[01234568]%'
                       OR opa.der diagnosis all like '%M15[12348]%'
                       OR opa.der diagnosis all like '%M16[234567]%' OR
                       opa.der diagnosis all like '%M17[0123459]%'
                       OR opa.der diagnosis all like '%C40[289]%' OR
                       opa.der_diagnosis_all like '%C7[69]5%'
                       OR opa.der diagnosis all like '%D162%')
                 OR opa.der diagnosis all IS NULL)
```

AND ISNULL(opa.Age_at_Start_of_Episode_SUS,opa.Der_Age_at_CD S_Activity_Date) between 19 AND 120 THEN '2X_hip_MRI'

Code Definitions

Procedure codes (OPCS)

- U133 Magnetic resonance imaging of bone
- U211 Magnetic resonance imaging NEC
- Z843 Hip joint
- Z848 Specified joint of pelvis or upper leg NEC*
- Z849 Joint of pelvis or upper leg NEC*
- Z902 Hip NEC*

Diagnosis codes (ICD)

Inclusion

- M150 Primary generalized (osteo)arthrosis
- M159 Polyarthrosis, unspecified
- M160 Primary coxarthrosis, bilateral
- M161 Other primary coxarthrosis
- M169 Coxarthrosis, unspecified

Exclusion

- M000 Staphylococcal arthritis and polyarthritis
- M001 Pneumococcal arthritis and polyarthritis
- M002 Other streptococcal arthritis and polyarthritis
- M008 Arthritis and polyarthritis due to other specified bacterial agents
- M009 Pyogenic arthritis, unspecified
- M010 Meningococcal arthritis
- M011 Tuberculous arthritis
- M012 Arthritis in Lyme disease
- M013 Arthritis in other bacterial diseases classified elsewhere
- M014 Rubella arthritis
- M015 Arthritis in other viral diseases classified elsewhere
- M016 Arthritis in mycoses
- M018 Arthritis in other infectious and parasitic diseases classified elsewhere

^{*} Secondary to U code

- M020 Arthropathy following intestinal bypass
- M021 Postdysenteric arthropathy
- M022 Postimmunization arthropathy
- M023 Reiter disease
- M028 Other reactive arthropathies
- M029 Reactive arthropathy, unspecified
- M030 Postmeningococcal arthritis
- M031 Postinfective arthropathy in syphilis
- M032 Other postinfectious arthropathies in diseases classified elsewhere
- M036 Reactive arthropathy in other diseases classified elsewhere
- M050 Felty syndrome
- M051 Rheumatoid lung disease
- M052 Rheumatoid vasculitis
- M053 Rheumatoid arthritis with involvement of other organs and systems
- M058 Other seropositive rheumatoid arthritis
- M059 Seropositive rheumatoid arthritis, unspecified
- M060 Seronegative rheumatoid arthritis
- M061 Adult-onset Still disease
- M062 Rheumatoid bursitis
- M063 Rheumatoid nodule
- M064 Inflammatory polyarthropathy
- M068 Other specified rheumatoid arthritis
- M069 Rheumatoid arthritis, unspecified
- M070 Distal interphalangeal psoriatic arthropathy
- M071 Arthritis mutilans
- M072 Psoriatic spondylitis
- M073 Other psoriatic arthropathies
- M074 Arthropathy in Crohn disease [regional enteritis]
- M075 Arthropathy in ulcerative colitis
- M076 Other enteropathic arthropathies
- M080 Juvenile rheumatoid arthritis
- M081 Juvenile ankylosing spondylitis
- M082 Juvenile arthritis with systemic onset
- M083 Juvenile polyarthritis (seronegative)
- M084 Pauciarticular juvenile arthritis
- M088 Other juvenile arthritis
- M089 Juvenile arthritis, unspecified
- M090 Juvenile arthritis in psoriasis

- M091 Juvenile arthritis in Crohn disease [regional enteritis]
- M092 Juvenile arthritis in ulcerative colitis
- M098 Juvenile arthritis in other diseases classified elsewhere
- M100 Idiopathic gout
- M101 Lead-induced gout
- M102 Drug-induced gout
- M103 Gout due to impairment of renal function
- M104 Other secondary gout
- M109 Gout, unspecified
- M110 Hydroxyapatite deposition disease
- M111 Familial chondrocalcinosis
- M112 Other chondrocalcinosis
- M118 Other specified crystal arthropathies
- M119 Crystal arthropathy, unspecified
- M120 Chronic postrheumatic arthropathy [Jaccoud]
- M121 Kaschin-Beck disease
- M122 Villonodular synovitis (pigmented)
- M123 Palindromic rheumatism
- M124 Intermittent hydrarthrosis
- M125 Traumatic arthropathy
- M128 Other specific arthropathies, not elsewhere classified
- M130 Polyarthritis, unspecified
- M131 Monoarthritis, not elsewhere classified
- M138 Other specified arthritis
- M139 Arthritis, unspecified
- M140 Gouty arthropathy due to enzyme defects and other inherited disorders
- M141 Crystal arthropathy in other metabolic disorders
- M142 Diabetic arthropathy
- M143 Lipoid dermatoarthritis
- M144 Arthropathy in amyloidosis
- M145 Arthropathies in other endocrine, nutritional and metabolic disorders
- M146 Neuropathic arthropathy
- M148 Arthropathies in other specified diseases classified elsewhere
- M151 Heberden nodes (with arthropathy)
- M152 Bouchard nodes (with arthropathy)
- M153 Secondary multiple arthrosis
- M154 Erosive (osteo)arthrosis
- M158 Other polyarthrosis

- M162 Coxarthrosis resulting from dysplasia, bilateral
- M163 Other dysplastic coxarthrosis
- M164 Post-traumatic coxarthrosis, bilateral
- M165 Other post-traumatic coxarthrosis
- M166 Other secondary coxarthrosis, bilateral
- M167 Other secondary coxarthrosis
- M170 Primary gonarthrosis, bilateral
- M171 Other primary gonarthrosis
- M172 Post-traumatic gonarthrosis, bilateral
- M173 Other post-traumatic gonarthrosis
- M174 Other secondary gonarthrosis, bilateral
- M175 Other secondary gonarthrosis
- M179 Gonarthrosis, unspecified
- C402 Malignant neoplasm: Long bones of lower limb
- C408 Malignant neoplasm: Overlapping lesion of bone and articular cartilage of limbs
- C409 Malignant neoplasm: Bone and articular cartilage of limb, unspecified
- C765 Malignant neoplasm of other and ill-defined sites: Lower limb
- C795 Secondary malignant neoplasm of bone and bone marrow
- D162 Benign neoplasm: Long bones of lower limb

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Low back pain imaging

EBI recommendation

Do not routinely offer imaging in a non-specialist setting for people with low back pain with or without sciatica in the absence of red flags, or suspected serious underlying pathology following medical history and examination.

Coding

Code Script

```
WHEN (opa.Der_Procedure_All like '%U05[45]%'
OR ((opa.Der_Procedure_All like '%U13[2356]%'
OR opa.Der_Procedure_All like '%U21[1267]%')
AND (opa.Der_Procedure_All like '%Z665%'
OR opa.Der_Procedure_All like '%O162%')))
AND
ISNULL(opa.Age_at_Start_of_Episode_SUS,opa.Der_Age_at_CD S_Activity_Date) between 19 AND 120
THEN '2S lower back imaging'
```

Code Definitions

Procedure codes (OPCS)

- U054 Computed tomography of spine
- U055 Magnetic resonance imaging of spine
- U132 Ultrasound of bone
- U133 Magnetic resonance imaging of bone
- U135 Plain x-ray of bone
- U136 Computed tomography of bone
- U211 Magnetic resonance imaging NEC
- U212 Computed tomography NEC
- U216 Ultrasound scan NEC
- U217 Plain x-ray NEC
- Z665 Lumbar vertebra (secondary to one of the codes above)

O162 Spine NEC (secondary to one of the codes above)

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category \$\lefts' 02'

Injection for non-specific low back pain without sciatica

EBI recommendation

Spinal injections of local anaesthetic and steroid should not be offered for patients with non-specific low back pain.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('A521','A522','A528','A529','A577','A735','V544')

AND LEFT(der.spell_primary_diagnosis,4) in ('M545')

AND APCS.Admission_Method not like ('2%')

THEN 'D low back pain inj'
```

Code Definitions

Procedure codes (OPCS)

Main

A521 Therapeutic lumbar epidural injection

A522 Therapeutic sacral epidural injection

A528 Other specified therapeutic epidural injection

A529 Unspecified therapeutic epidural injection

A577 Injection of therapeutic substance around spinal nerve root

A735 Injection of therapeutic substance around peripheral nerve

V544 Injection around spinal facet of spine

Potential

W903 Injection of therapeutic substance into joint (shouldn't be used but may be as workaround with *Z66 Vertebra* or *Z67 Intervertebral joint*)

V528 Other specified other operations on intervertebral disc(plus Y388 Other specified injection of therapeutic substance into organ NOC or Y389 Unspecified injection of therapeutic substance into organ NOC)

- V484 Denervation of spinal facet joint of thoracic vertebra NEC
- V486 Denervation of spinal facet joint of lumbar vertebra NEC
- V488 Other specified denervation of spinal facet joint of vertebra
- V489 Unspecified denervation of spinal facet joint of vertebra

Diagnosis codes (ICD)

Includes

M545 Low back pain

Potential

M546 Pain in thoracic spine

M548 Other dorsalgia

M549 Dorsalgia, unspecified

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Referral for bariatric surgery

EBI recommendation

Evidence shows that when commissioned as recommended, surgery is highly effective in causing weight loss, reduces the long-term impact of poor health and reduces the risk of premature death from obesity-related conditions. This proposed guidance establishes criteria for referral of a patient to a bariatric surgical centre for consideration of performing a bariatric surgical procedure.

Coding

Code script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ( 'G281', 'G282', 'G283', 'G284', 'G285', 'G301', 'G302', 'G303', 'G304', 'G321', 'G328', 'G329', 'G331', 'G338', 'G339')

AND (APCS.Der_Diagnosis_All LIKE '%E66[01289]%')

AND APCS.Admission Method NOT LIKE '2%'
```

Code Definitions

Procedure codes (OPCS)

G281 Partial gastrectomy and anastomosis of stomach to duodenum

THEN '3F Bariatric Surgery'

- G282 Partial gastrectomy and anastomosis of stomach to transposed jejunum
- G283 Partial gastrectomy and anastomosis of stomach to jejunum NEC
- G301 Gastroplasty NEC
- G321 Bypass of stomach by anastomosis of stomach to transposed jejunum
- G328 Other specified connection of stomach to transposed jejunum
- G329 Unspecified connection of stomach to transposed jejunum
- G331 Bypass of stomach by anastomosis of stomach to jejunum NEC
- G338 Other specified other connection of stomach to jejunum
- G339 Unspecified other connection of stomach to jejunum
- G284 Sleeve gastrectomy and duodenal switch

- G285 Sleeve gastrectomy NEC
- G302 Partitioning of stomach NEC
- G304 Partitioning of stomach using staples
- G303 Partitioning of stomach using band

Diagnosis codes (ICD)

Inclusion

- E660 Obesity due to excess calories
- E661 Drug-induced obesity
- E662 Extreme obesity with alveolar hypoventilation
- E668 Other obesity
- E669 Obesity, unspecified

There is no standard for BMI used as a diagnosis but often trusts will have local policies, e.g. >30 - 39 = E669, 40> = E668). Should be excluded as a secondary diagnosis.

Included in policy

- E110 Type 2 diabetes mellitus With coma
- E111 Type 2 diabetes mellitus With ketoacidosis
- E112 Type 2 diabetes mellitus With renal complications
- E113 Type 2 diabetes mellitus With ophthalmic complications
- E114 Type 2 diabetes mellitus With neurological complications
- E115 Type 2 diabetes mellitus With peripheral circulatory complications
- E116 Type 2 diabetes mellitus With other specified complications
- E117 Type 2 diabetes mellitus With multiple complications
- E118 Type 2 diabetes mellitus With unspecified complications
- E119 Type 2 diabetes mellitus Without complications
- G473 Sleep apnoea
- I10X Essential (primary) hypertension
- 1110 Hypertensive heart disease with (congestive) heart failure
- 1119 Hypertensive heart disease without (congestive) heart failure
- 1120 Hypertensive renal disease with renal failure
- 1129 Hypertensive renal disease without renal failure
- 1130 Hypertensive heart and renal disease with (congestive) heart failure
- 1131 Hypertensive heart and renal disease with renal failure
- 1132 Hypertensive heart and renal disease with both (congestive) heart failure and renal failure

Hypertensive heart and renal disease, unspecified
Renovascular hypertension
Hypertension secondary to other renal disorders
Hypertension secondary to endocrine disorders
Other secondary hypertension
Secondary hypertension, unspecified

All may be present as a secondary.

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Blood transfusion

EBI recommendation

A blood transfusion may be indicated if a patient has a shortage of red blood cells (RBC) causing haemodynamic instability or impeding oxygen delivery to tissues and organs. This can be for a variety of reasons including severe bleeding, cancer or a blood disorder. However, blood transfusion carries risks and only the minimum number of units should be transfused to avoid harm. It is recommended to use restrictive thresholds for transfusion, and to give only a single unit at a time, except where the patient has active bleeding.

Coding

Code Script

Inpatient

```
WHEN
           LEFT(der.Spell Dominant Procedure,4) in
('X331','X332','X338','X339')
           AND (apcs.der diagnosis all like '%D5[02][0189]%'
                       OR apcs.der diagnosis all like '%D51[012389]%')
           AND not (apcs.der diagnosis all like '%D5[38][01289]%'
                       OR apcs.der diagnosis all like '%D55[012389]%'
                       OR apcs.der diagnosis all like '%D56[0123489]%'
                       OR apcs.der diagnosis all like '%D57[01238]%'
                       OR apcs.der diagnosis all like '%D59[012345689]%'
                       OR apcs.der diagnosis all like '%D60[0189]%'
                       OR apcs.der diagnosis_all like '%D61[012389]%'
                       OR apcs.der diagnosis all like '%D62%'
                       OR apcs.der diagnosis all like '%D63[08]%'
                       OR apcs.der_diagnosis_all like '%D64[0123489]%')
           THEN 'EE blood transfusion'
```

WHEN LEFT(OPA.Der_Procedure_All,4) in ('X331','X332','X338','X339')
AND (not (OPA.der_diagnosis_all LIKE '%D5[38][01289]%'

OR OPA.der diagnosis all LIKE '%D55[012389]%'

OR OPA.der diagnosis all LIKE '%D56[0123489]%'

OR OPA.der diagnosis all LIKE '%D57[01238]%'

OR OPA.der_diagnosis_all LIKE

'%D59[012345689]%'

OR OPA.der diagnosis all LIKE '%D60[0189]%'

OR OPA.der diagnosis all LIKE '%D61[012389]%'

OR OPA.der diagnosis all LIKE '%D62%'

OR OPA.der diagnosis all LIKE '%D63[08]%'

OR OPA.der diagnosis all LIKE '%D64[0123489]%')

OR OPA.der_diagnosis_all IS NULL)

THEN 'proc 32 blood transfusion'

Code Definitions

Procedure codes (OPCS)

- X331 Intra-arterial blood transfusion
- X332 Intravenous blood transfusion of packed cells
- X338 Other specified other blood transfusion
- X339 Unspecified other blood transfusion

Diagnosis codes (ICD):

Inclusion

- D500 Iron deficiency anaemia secondary to blood loss (chronic)
- D501 Sideropenic dysphagia
- D508 Other iron deficiency anaemias
- D509 Iron deficiency anaemia, unspecified
- D510 Vitamin B₁₂ deficiency anaemia due to intrinsic factor deficiency
- D511 Vitamin B₁₂ deficiency anaemia due to selective vitamin B₁₂ malabsorption with proteinuria
- D512 Transcobalamin II deficiency
- D513 Other dietary vitamin B₁₂ deficiency anaemia
- D518 Other vitamin B₁₂ deficiency anaemias
- D519 Vitamin B₁₂ deficiency anaemia, unspecified
- D520 Dietary folate deficiency anaemia
- D521 Drug-induced folate deficiency anaemia
- D528 Other folate deficiency anaemias
- D529 Folate deficiency anaemia, unspecified

Diagnosis codes (ICD)

Exclusion

LACIU	51011
D530	Protein deficiency anaemia
D531	Other megaloblastic anaemias, not elsewhere classified
D532	Scorbutic anaemia
D538	Other specified nutritional anaemias
D539	Nutritional anaemia, unspecified
D550	Anaemia due to glucose-6-phosphate dehydrogenase [G6PD] deficiency
D551	Anaemia due to other disorders of glutathione metabolism
D552	Anaemia due to disorders of glycolytic enzymes
D553	Anaemia due to disorders of nucleotide metabolism
D558	Other anaemias due to enzyme disorders
D559	Anaemia due to enzyme disorder, unspecified
D560	Alpha thalassaemia
D561	Beta thalassaemia
D562	Delta-beta thalassaemia
D563	Thalassaemia trait
D564	Hereditary persistence of fetal haemoglobin [HPFH]
D568	Other thalassaemias
D569	Thalassaemia, unspecified
D570	Sickle-cell anaemia with crisis
D571	Sickle-cell anaemia without crisis
D572	Double heterozygous sickling disorders
D573	Sickle-cell trait
D578	Other sickle-cell disorders
D580	Hereditary spherocytosis
D581	Hereditary elliptocytosis
D582	Other haemoglobinopathies
D588	Other specified hereditary haemolytic anaemias
D589	Hereditary haemolytic anaemia, unspecified
D590	Drug-induced autoimmune haemolytic anaemia
D591	Other autoimmune haemolytic anaemias
D592	Drug-induced nonautoimmune haemolytic anaemia
D593	Haemolytic-uraemic syndrome
D594	Other nonautoimmune haemolytic anaemias

D595 Paroxysmal nocturnal haemoglobinuria [Marchiafava-Micheli]

- D596 Haemoglobinuria due to haemolysis from other external causes
- D598 Other acquired haemolytic anaemias
- D599 Acquired haemolytic anaemia, unspecified
- D600 Chronic acquired pure red cell aplasia
- D601 Transient acquired pure red cell aplasia
- D608 Other acquired pure red cell aplasias
- D609 Acquired pure red cell aplasia, unspecified
- D610 Constitutional aplastic anaemia
- D611 Drug-induced aplastic anaemia
- D612 Aplastic anaemia due to other external agents
- D613 Idiopathic aplastic anaemia
- D618 Other specified aplastic anaemias
- D619 Aplastic anaemia, unspecified
- D62X Acute posthaemorrhagic anaemia
- D630 Anaemia in neoplastic disease
- D638 Anaemia in other chronic diseases classified elsewhere
- D640 Hereditary sideroblastic anaemia
- D641 Secondary sideroblastic anaemia due to disease
- D642 Secondary sideroblastic anaemia due to drugs and toxins
- D643 Other sideroblastic anaemias
- D644 Congenital dyserythropoietic anaemia
- D648 Other specified anaemias
- D649 Anaemia, unspecified

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

--Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Surgical intervention for benign prostatic hyperplasia

EBI recommendation

Only men with severe voiding symptoms, or in whom conservative management options and drug treatment have been unsuccessful, should be offered surgical intervention.

Coding

Code Script

```
WHEN
           (LEFT(der.Spell Dominant Procedure,4) like '%M61[123489]%'
           OR LEFT(der.Spell Dominant Procedure,4) like '%M641%'
           OR LEFT(der.Spell Dominant Procedure,4) like
           '%M65[12345689]%'
           OR LEFT(der.Spell Dominant Procedure,4) like '%M66[12]%'
                      OR LEFT(der.Spell Dominant Procedure,4) like
                      '%M68[13]%'
           OR LEFT(der.Spell Dominant Procedure,4) like '%M704%'
           OR LEFT(der.Spell Dominant Procedure,4) like '%M71[189]%')
           AND der. Spell Primary Diagnosis like '%N40%'
           AND not (apcs.der diagnosis all like '%C61%'
                      OR apcs.der diagnosis all like '%N13[0-9]%'
                      OR apcs.der diagnosis all like '%N17[01289]%'
                      OR apcs.der diagnosis all like '%N18[123459]%'
                      OR apcs.der diagnosis all like '%N19%')
           AND apcs.sex=1
           AND
           isnull(APCS.Age At Start of Spell SUS,APCS.Der Age at CDS
           Activity Date) between 19 AND 120
           AND APCS. Admission Method not like ('2%')
           THEN '2I BPH surgery'
```

Code Definitions

Procedure codes (OPCS)

Main

- M611 Total excision of prostate and capsule of prostate
- M612 Retropubic prostatectomy
- M613 Transvesical prostatectomy
- M614 Perineal prostatectomy
- M618 Other specified open excision of prostate
- M619 Unspecified open excision of prostate
- M641 Open resection of outlet of male bladder
- M651 Endoscopic resection of prostate using electrotome
- M652 Endoscopic resection of prostate using punch
- M653 Endoscopic resection of prostate NEC
- M654 Endoscopic resection of prostate using laser
- M655 Endoscopic resection of prostate using vapotrode
- M656 Endoscopic ablation of prostate using steam
- M658 Other specified endoscopic resection of outlet of male bladder
- M659 Unspecified endoscopic resection of outlet of male bladder
- M661 Endoscopic sphincterotomy of external sphincter of male bladder
- M662 Endoscopic incision of outlet of male bladder NEC
- M681 Endoscopic insertion of prostatic stent
- M683 Endoscopic insertion of prosthesis to compress lobe of prostate
- M704 Balloon dilation of prostate
- M711 High intensity focused ultrasound of prostate
- M718 Other specified other operations on prostate
- M719 Unspecified other operations on prostate

Diagnosis codes (ICD)

Inclusion

N40X Hyperplasia of prostate

Exclusion

- C61X Malignant neoplasm of prostate
- N130 Hydronephrosis with ureteropelvic junction obstruction (with N40X)
- N131 Hydronephrosis with ureteral stricture, not elsewhere classified (with N40X)
- N132 Hydronephrosis with renal and ureteral calculous obstruction (with N40X)
- N133 Other and unspecified hydronephrosis (with N40X)
- N134 Hydroureter (with N40X)

- N135 Kinking and stricture of ureter without hydronephrosis (with N40X)
- N136 Pyonephrosis (with N40X)
- N137 Vesicoureteral-reflux-associated uropathy (with N40X)
- N138 Other obstructive and reflux uropathy (with N40X)
- N139 Obstructive and reflux uropathy, unspecified (with N40X)
- N170 Acute renal failure with tubular necrosis
- N171 Acute renal failure with acute cortical necrosis
- N172 Acute renal failure with medullary necrosis
- N178 Other acute renal failure
- N179 Acute renal failure, unspecified
- N181 Chronic kidney disease, stage 1
- N182 Chronic kidney disease, stage 2
- N183 Chronic kidney disease, stage 3
- N184 Chronic kidney disease, stage 4
- N185 Chronic kidney disease, stage 5
- N189 Chronic kidney disease, unspecified
- N19X Unspecified kidney failure

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Breast prosthesis removal

EBI recommendation

Surgery to remove breast implants should only be considered for specific clinical indications. Only patients whose initial procedure was funded by the NHS should be considered for both implant removal and replacement. In line with current guidance, patients eligible to have their implant replaced must be informed of the potential risk of BIA-ALCL.

Coding

Code script

Inpatient

```
WHEN
          LEFT(der.Spell Dominant Procedure,4) IN ('B303', 'B307')
          AND (APCS.Der Diagnosis All LIKE '%Z421%')
                          APCS.Der Diagnosis All LIKE '%T85[487]%'
          AND (NOT)
                     OR APCS.Der Diagnosis All LIKE
                     '%N60[0123489]%'
                     OR APCS.Der Diagnosis All LIKE '%N61%'
                     OR APCS.Der Diagnosis All LIKE '%N63%'
                     OR APCS.Der Diagnosis All LIKE
                     '%N64[01234589]%'
                     OR APCS.Der Diagnosis All LIKE '%C84[6789]%'
                     OR APCS.Der Diagnosis All LIKE '%Y812%')
                OR APCS.Der Diagnosis All IS NULL)
          AND APCS. Admission Method NOT LIKE '2%'
          THEN '3A Breast Prosthesis Removal'
```

Outpatient

```
WHEN OPA.Der_Procedure_All LIKE '%B30[37]%'
AND (OPA.Der_Diagnosis_All LIKE '%Z421%')
AND (NOT( OPA.Der Diagnosis All LIKE '%T85[487]%'
```

OR OPA.Der_Diagnosis_All LIKE "%N60[0123489]%'

OR OPA.Der_Diagnosis_All LIKE '%N61%'

OR OPA.Der Diagnosis All LIKE '%N63%'

OR OPA.Der_Diagnosis_All LIKE '%N64[01234589]%'

OR OPA.Der_Diagnosis_All LIKE '%C84[6789]%'

OR OPA.Der Diagnosis All LIKE '%Y812%')

OR OPA.Der Diagnosis All IS NULL)

THEN '3A_Breast_Prosthesis_Removal'

Code Definitions

Procedure codes (OPCS):

B303 Removal of prosthesis for breast NEC

B307 Removal of breast prosthesis from pre-pectoral space

Diagnosis codes (ICD)

Inclusion

Z421 Follow-up care involving plastic surgery of breast

Exclusion

- T854 Mechanical complication of breast prosthesis and implant
- T858 Other complications of internal prosthetic devices, implants and grafts, not elsewhere classified
- T857 Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts
- N600 Solitary cyst of breast
- N601 Diffuse cystic mastopathy
- N602 Fibroadenosis of breast
- N603 Fibrosclerosis of breast
- N604 Mammary duct ectasia
- N608 Other benign mammary dysplasias
- N609 Benign mammary dysplasia, unspecified
- N61X Inflammatory disorders of breast
- N63X Unspecified lump in breast
- N640 Fissure and fistula of nipple
- N641 Fat necrosis of breast
- N642 Atrophy of breast

- N643 Galactorrhoea not associated with childbirth
- N644 Mastodynia
- N645 Other signs and symptoms in breast
- N648 Other specified disorders of breast
- N649 Disorder of breast, unspecified
- C846 Anaplastic large cell lymphoma, ALK-positive
- C847 Anaplastic large cell lymphoma, ALK-negative
- C848 Cutaneous T-cell lymphoma, unspecified
- C849 Mature T/NK-cell lymphoma, unspecified
- Y812 General- and plastic-surgery devices associated with adverse incidents Prosthetic and other implants, materials and accessory devices (secondary to C84-)

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Breast reduction

EBI recommendation

Breast reduction is only successful in specific circumstances, and it can lead to serious complications. However, in some cases breast reduction surgery is necessary where large breasts impact on day-to-day life, for example, ability to drive a car. Breast reduction should only be undertaken under specific criteria.

Coding

Code script

WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('B311')

AND (der.Spell_Primary_Diagnosis like 'N62%'

OR (apcs.der_diagnosis_all like '%Z411%'

AND not apcs.der_diagnosis_all like '%Z853%'))

AND not (apcs.der_diagnosis_all like '%C50[0-9]%')

AND APCS.Admission_Method not like ('2%')

THEN 'E breast red'

Code Definitions

Procedure codes (OPCS)

B311 Reduction mammoplasty

Diagnosis codes (ICD)

Includes

N62X Hypertrophy of breast

Exclusions

C500 Malignant neoplasm of nipple and areola
C501 Malignant neoplasm of central portion of breast
C502 Malignant neoplasm of upper-inner quadrant of breast
C503 Malignant neoplasm of lower-inner quadrant of breast
C504 Malignant neoplasm of upper-outer quadrant of breast

- C505 Malignant neoplasm of lower-outer quadrant of breast
- C506 Malignant neoplasm of axillary tail of breast
- C508 Malignant neoplasm of overlapping lesion of breast
- C509 Malignant neoplasm of breast, unspecified
- Z411 Other plastic surgery for unacceptable cosmetic appearance (plus, Z853 Personal history of malignant neoplasm of breast for post breast cancer treatment)

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Carpal tunnel syndrome release

EBI recommendation

Carpal tunnel syndrome is common, and mild acute symptoms usually get better with time. Splinting at night, pain relief and corticosteroid injection should be considered. Surgery should be considered for persistent severe symptoms. Surgical treatment of carpal tunnel should only be offered under specific criteria.

Coding

Code script

WHEN LEFT(der.Spell_Dominant_Procedure,4) = 'A651'

AND der.Spell_Primary_Diagnosis like '%G560%'

AND APCS.Admission_Method not like ('2%')

THEN 'M carpal'

Code Definitions

Procedure codes (OPCS)

Main

A651 Carpal tunnel release

Potential

A658 Other specified release of entrapment of peripheral nerve at wrist

A659 Unspecified release of entrapment of peripheral nerve at wrist

Diagnosis codes (ICD)

G560 Carpal tunnel syndrome

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Asymptomatic carotid artery stenosis screening

EBI recommendation

Patients without symptoms should not be referred for imaging. If a patient is found to have narrowed arteries, they do not require follow up if they continue to have no symptoms. However, if a patient does have symptoms or evidence of an ischaemic event in the brain, they should be referred for a duplex ultrasound of the arteries as the first-line investigation.

Coding

Code script

Inpatient

```
WHEN
          ( APCS.Der Procedure All LIKE '%U111%'
          OR
                APCS.Der Procedure All LIKE '%U117%'
           ((
          OR APCS.Der Procedure All LIKE '%U21[126]%'
          OR APCS.Der Procedure All LIKE '%U355%')
                     APCS.Der Procedure All LIKE '%Z361%'
          AND (
                     APCS.Der Procedure All LIKE '%Z95[567]%')))
                OR
          AND (NOT (
                          APCS.Der Diagnosis All LIKE
          '%I63[01289]%'
                     OR APCS.Der Diagnosis All LIKE
                     '%G45[123489]%')
                OR APCS.Der Diagnosis All IS NULL)
          AND APCS. Admission Method NOT LIKE '2%'
          THEN '3E Carotid Stenosis Screening Any Position'
Outpatient
```

```
WHEN
               OPA.Der Procedure All LIKE '%U111%'
          (
          OR
               OPA.Der Procedure All LIKE '%U117%'
          ((
          OR OPA.Der Procedure All LIKE '%U21[126]%'
```

```
OR OPA.Der_Procedure_All LIKE '%U355%')

AND ( OPA.Der_Procedure_All LIKE '%Z361%'
OR OPA.Der_Procedure_All LIKE '%Z95[567]%')))

AND (NOT ( OPA.Der_Diagnosis_All LIKE '%I63[01289]%'
OR OPA.Der_Diagnosis_All LIKE
'%G45[123489]%')
OR OPA.Der_Diagnosis_All IS NULL)

THEN '3E_Carotid_Stenosis_Screening_No_Diagnosis'
```

NOTE: Outpatient data will include non-asymptomatic carotid artery stenosis scanning activity.

Code Definitions

Procedure codes (OPCS)

- U111 Ultrasound of carotid artery
- U216 Ultrasound scan NEC*
- Z361 Carotid artery NEC*
- Z955 External carotid artery*
- Z956 Common carotid artery*
- Z957 Internal carotid artery*
- U355 Computed tomography angiography NEC
- U212 Computed tomography NEC
- Z361 Carotid artery NEC**
- Z955 External carotid artery**
- Z956 Common carotid artery**
- Z957 Internal carotid artery**
- U117 Magnetic resonance angiography
- U211 Magnetic resonance imaging NEC
- Z361 Carotid artery NEC***
- Z955 External carotid artery***
- Z956 Common carotid artery***
- Z957 Internal carotid artery***

^{*}Secondary to U216

^{**}Secondary to U355 or U212

^{***}Secondary to U117 or U211

Diagnosis codes (ICD)

Inclusion

1652 Occlusion and stenosis of carotid artery

Exclusion

- 1630 Cerebral infarction due to thrombosis of precerebral arteries
- 1631 Cerebral infarction due to embolism of precerebral arteries
- 1632 Cerebral infarction due to unspecified occlusion or stenosis of precerebral arteries
- 1638 Other cerebral infarction
- 1639 Cerebral infarction, unspecified
- G451 Carotid artery syndrome (hemispheric)
- G452 Multiple and bilateral precerebral artery syndromes
- G453 Amaurosis fugax
- G454 Transient global amnesia
- G458 Other transient cerebral ischaemic attacks and related syndromes
- G459 Transient cerebral ischaemic attack, unspecified

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Shared decision making for cataract surgery

EBI recommendation

The pathway for patients with cataracts to be referred for surgery is updated across England to include shared decision making and not restrict access based on visual acuity.

In line with NICE guidance, do not restrict access to cataract surgery on the basis of visual acuity.

Coding

Code script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ('C751', 'C712','C754', 'C711','C713', 'C718', 'C719')

AND (APCS.Der_Diagnosis_All LIKE '%H25[01289]%'

OR APCS.Der_Diagnosis_All LIKE '%H26[012389]%'

OR APCS.Der_Diagnosis_All LIKE '%H28[012]%'

OR APCS.Der_Diagnosis_All LIKE '%Q120%' )

AND APCS.Admission_Method NOT LIKE '2%'

THEN '3C Cataract Surgery'
```

Code Definitions

Procedure codes (OPCS)

Main

C751 Insertion of prosthetic replacement for lens NEC *

C712 Phacoemulsification of lens *

C754 Insertion of prosthetic replacement for lens using suture fixation**

C711 Simple linear extraction of lens**

- C713 Aspiration of lens**
- C718 Other specified extracapsular extraction of lens**
- C719 Unspecified extracapsular extraction of lens**
- * Most common codes associated with cataracts
- ** Less common but are associated with cataracts

Potential

- C731 Membranectomy of lens
- C732 Capsulotomy of anterior lens capsule
- C733 Capsulotomy of posterior lens capsule
- C734 Capsulotomy of lens NEC
- C738 Other specified incision of capsule of lens
- C739 Unspecified incision of capsule of lens
- C741 Curettage of lens
- C742 Discission of cataract
- C743 Mechanical lensectomy
- C748 Other specified other extraction of lens
- C749 Unspecified other extraction of lens
- C752 Revision of prosthetic replacement for lens
- C753 Removal of prosthetic replacement for lens
- C758 Other specified prosthesis of lens
- C759 Unspecified prosthesis of lens

Diagnosis codes (ICD)

Inclusion

- H250 Senile incipient cataract
- H251 Senile nuclear cataract
- H252 Senile cataract, morgagnian type
- H258 Other senile cataract
- H259 Senile cataract, unspecified
- H260 Infantile, juvenile and presenile cataract
- H261 Traumatic cataract
- H262 Complicated cataract
- H263 Drug-induced cataract
- H268 Other specified cataract
- H269 Cataract, unspecified
- H280 Diabetic cataract
- H281 Cataract in other endocrine, nutritional and metabolic diseases
- H282 Cataract in other diseases classified elsewhere

Q120 Congenital cataract

Included in policy

H264 After-cataract (also used for posterior capsule opacification)

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Chalazia removal

EBI recommendation

The evidence shows that alternative treatment options (warm compresses, drops or ointment, steroid injection) or a "watch and wait" approach will lead to resolution of many chalazia without the risks of surgery.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('C121','C122','C123','C124','C125','C126','C128','C129','C191','C198','C199') AND LEFT(der.Spell_Primary_Diagnosis,4) in ('H000','H001') AND APCS.Admission_Method not like ('2%') THEN 'K chalazia'
```

Code Definitions

Procedure codes (OPCS)

- C121 Excision of lesion of eyelid NEC
- C122 Cauterisation of lesion of eyelid
- C123 Cryotherapy to lesion of eyelid
- C124 Curettage of lesion of eyelid
- C125 Destruction of lesion of eyelid NEC
- C126 Wedge excision of lesion of eyelid
- C128 Other specified extirpation of lesion of eyelid
- C129 Unspecified extirpation of lesion of eyelid
- C191 Drainage of lesion of eyelid
- C198 Other specified incision of eyelid
- C199 Unspecified incision of eyelid

Diagnosis codes (ICD)

- H000 Hordeolum and other deep inflammation of eyelid
- H001 Chalazion

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Cholecystectomy

EBI recommendation

Cholecystectomy is a surgical procedure that removes the gallbladder. The gallbladder in an organ located just below the liver on the right side of the body. It is usually performed laparoscopically (keyhole), but can be performed open, which involves a large cut under the right rib cage. A cholecystectomy can be performed for numerous indications, two of which are gallstones or gallstone pancreatitis. An interval cholecystectomy is one that is performed some weeks after the initial acute presentation, while an index cholecystectomy is one that is performed at the time of acute admission.

Coding

Code Script

```
WHEN LEFT(Der.Spell_Dominant_Procedure,4) in
('J181','J182','J183','J184','J185','J188','J189')

AND der.Spell_primary_diagnosis like '%K851%'

AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CD
S_Activity_Date) between 19 AND 120

THEN '2Q interval cholecystectomy'
```

Code Definitions

Procedure codes (OPCS)

- J181 Total cholecystectomy and excision of surrounding tissue
- J182 Total cholecystectomy and exploration of common bile duct
- J183 Total cholecystectomy NEC
- J184 Partial cholecystectomy and exploration of common bile duct
- J185 Partial cholecystectomy NEC
- J188 Other specified excision of gall bladder
- J189 Unspecified excision of gall bladder

Diagnosis codes (ICD)

K800 Calculus of gallbladder with acute cholecystitis

K810 Acute cholecystitis

K851 Biliary acute pancreatitis

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category \$\infty\$'02'

Penile circumcision

EBI recommendation

Medical penile circumcision is rarely indicated as a primary treatment. Most children and young people presenting with penile problems require no intervention other than reassurance. It is important to note that young children may be unable to give informed consent to penile circumcision, therefore it is especially important that surgeons and parents consider the evidence base and consider less radical options when making the decision to perform penile circumcision, which cannot be reversed once performed.

Coding

Code script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ('N303')

AND APCS.Der_Diagnosis_All LIKE '%N47%'

AND (NOT( APCS.Der_Diagnosis_All LIKE '%N390%'

OR APCS.Der_Diagnosis_All LIKE '%N48[01]%'

OR APCS.Der_Diagnosis_All LIKE '%N48[01]%'

OR APCS.Der_Diagnosis_All LIKE '%Q54[0123489]%'

OR APCS.Der_Diagnosis_All LIKE '%Q55[345689]%')

OR APCS.Der_Diagnosis_All IS NULL)

THEN '3J Penile Circumcision'
```

Code Definitions

Procedure codes (OPCS)

N303 Circumcision

Diagnosis codes (ICD)

Inclusion

N47X Redundant prepuce, phimosis and paraphimosis

Exclusion

- N390 Urinary tract infection, site not specified (current infection only added unspecified site code as most likely)
- Z874 Personal history of diseases of the genitourinary system (history of infection not specific to UTI)
- N480 Leukoplakia of penis
- N481 Balanoposthitis
- Q540 Hypospadias, balanic
- Q541 Hypospadias, penile
- Q542 Hypospadias, penoscrotal
- Q543 Hypospadias, perineal
- Q544 Congenital chordee
- Q548 Other hypospadias
- Q549 Hypospadias, unspecified
- Q553 Atresia of vas deferens
- Q554 Other congenital malformations of vas deferens, epididymis, seminal vesicles and prostate
- Q555 Congenital absence and aplasia of penis
- Q556 Other congenital malformations of penis
- Q558 Other specified congenital malformations of male genital organs
- Q559 Congenital malformation of male genital organ, unspecified

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Appropriate colonoscopy in the management of hereditary colorectal cancer Repeat colonoscopy

EBI recommendation

Appropriate colonoscopy in the management of hereditary colorectal cancer

While colonoscopy is a safe procedure, there is a small risk of complications – including pain, intestinal perforation or major haemorrhage as well as issues related to any sedative used. Colonoscopy should therefore be used appropriately in the management of CRC in people who have been identified with an increased lifetime risk of CRC due to hereditary factors.

Repeat colonoscopy

While reducing colorectal mortality is an important aim of colonoscopic surveillance, the main aim is to prevent colorectal cancer by resecting premalignant polyps. Many patients benefit from this alone and do not require subsequent surveillance.

Coding

Code Script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in
('H221','H228','H682','H684','H688','H689')

AND not (apcs.der_diagnosis_all like '%D126%'

OR apcs.der_diagnosis_all like '%Q858%'

OR apcs.der_diagnosis_all like '%Z0[89][012789]%'

OR apcs.der_diagnosis_all like '%Z121%')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS_Activity_Date) between 19 AND 120

AND APCS.Der_Procedure_All not like '%H68[13]%'

AND APCS.Admission Method not like ('2%')
```

THEN '2NO UnnecColonoscopy'

Outpatient

WHEN (opa.Der_Procedure_All like '%H22[189]%'
OR opa.Der_Procedure_All like '%H68[2489]%')
AND ISNULL(opa.der_diagnosis_all,") not like '%D126%'
AND ISNULL(opa.der_diagnosis_all,") not like '%Q858%'
AND ISNULL(opa.der_diagnosis_all,") not like '%Z08[012789]%'
AND ISNULL(opa.der_diagnosis_all,") not like '%Z09[012789]%'
AND ISNULL(opa.der_diagnosis_all,") not like '%Z121%'
AND
ISNULL(opa.Age_at_Start_of_Episode_SUS,opa.Der_Age_at_CD
S_Activity_Date) between 19 AND 120
AND opa.Der_Procedure_All NOT like '%H68[13]%'
THEN '2NO UnnecColonoscopy'

Code Definitions

Procedure codes (OPCS)

Main

- H221 Diagnostic fibreoptic endoscopic examination of colon and biopsy of lesion of colon
- H228 Other specified diagnostic endoscopic examination of colon
- H229 Unspecified diagnostic endoscopic examination of colon
- H682 Diagnostic endoscopic examination of colonic pouch using colonoscope NEC
- H684 Diagnostic endoscopic examination of ileoanal pouch using colonoscope NEC
- H688 Other specified diagnostic endoscopic examination of enteric pouch using colonoscope
- H689 Unspecified diagnostic endoscopic examination of enteric pouch using colonoscope

Exclusion

- H681 Diagnostic endoscopic examination of colonic pouch and biopsy of colonic pouch using colonoscope
- H683 Diagnostic endoscopic examination of ileoanal pouch and biopsy of ileoanal pouch using colonoscope

Diagnosis codes (ICD)

Exclusion

- D126 Benign neoplasm: Colon, unspecified
- Q858 Other phakomatoses, not elsewhere classified
- Z080 Follow-up examination after surgery for malignant neoplasm
- Z081 Follow-up examination after radiotherapy for malignant neoplasm
- Z082 Follow-up examination after chemotherapy for malignant neoplasm
- Z087 Follow-up examination after combined treatment for malignant neoplasm
- Z088 Follow-up examination after other treatment for malignant neoplasm
- Z089 Follow-up examination after unspecified treatment for malignant neoplasm
- Z090 Follow-up examination after surgery for other conditions
- Z091 Follow-up examination after radiotherapy for other conditions
- Z092 Follow-up examination after chemotherapy for other conditions
- Z097 Follow-up examination after combined treatment for other conditions
- Z098 Follow-up examination after other treatment for other conditions
- Z099 Follow-up examination after unspecified treatment for other conditions
- Z121 Special screening examination for neoplasm of intestinal tract

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Diagnostic coronary angiography for low risk, stable chest pain

EBI recommendation

NICE guidelines recommend that where a diagnosis of chest pain cannot, by clinical assessment alone, exclude stable angina, 64-slice (or above) CT coronary angiography should be offered as first-line. Invasive coronary angiography should only be offered to patients with significant findings on CT coronary angiogram or with inconclusive further imaging.

Coding

Code Script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) like '%K63[12345689]%'

AND not (apcs.der_diagnosis_all like '%I20[018]%'

OR apcs.der_diagnosis_all like '%I21[012349]%'

OR apcs.der_diagnosis_all like '%I2[24][0189]%'

OR apcs.der_diagnosis_all like '%I23[01234568]%'

OR apcs.der_diagnosis_all like '%I25[012345689]%')

AND not (apcs.Der_Procedure_All like '%U10[1-9]%'

OR apcs.Der_Procedure_All like '%U205%'

OR apcs.Der_Procedure_All like '%U115%')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS_Activity_Date) between 19 and 120

THEN '2A Angio'
```

Code Definitions

Procedure codes (OPCS)

Main

K631 Angiocardiography of combination of right and left side of heart

K632 Angiocardiography of right side of heart NEC

- K633 Angiocardiography of left side of heart NEC
- K634 Coronary arteriography using two catheters
- K635 Coronary arteriography using single catheter
- K636 Coronary arteriography NEC
- K638 Other specified contrast radiology of heart
- K639 Unspecified contrast radiology of heart

Exclusion

- U205 Stress echocardiography
- U106 Myocardial perfusion scan
- U115 Thallium stress test
- U101 Cardiac computed tomography for calcium scoring
- U102 Cardiac computed tomography angiography
- U103 Cardiac magnetic resonance imaging
- U104 Myocardial positron emission tomography
- U105 Radionuclide angiocardiography
- U106 Myocardial perfusion scan
- U107 Cardiac multiple gated acquisition scan
- U108 Other specified diagnostic imaging of heart
- U109 Unspecified diagnostic imaging of heart
- U115 Thallium stress test

Diagnosis codes (ICD)

Exclusion

- 1200 Unstable angina
- 1201 Angina pectoris with documented spasm
- 1208 Other forms of angina pectoris
- 1210 Acute transmural myocardial infarction of anterior wall
- 1211 Acute transmural myocardial infarction of inferior wall
- 1212 Acute transmural myocardial infarction of other sites
- 1213 Acute transmural myocardial infarction of unspecified site
- 1214 Acute subendocardial myocardial infarction
- 1219 Acute myocardial infarction, unspecified
- 1220 Subsequent myocardial infarction of anterior wall
- 1221 Subsequent myocardial infarction of inferior wall
- 1228 Subsequent myocardial infarction of other sites
- 1229 Subsequent myocardial infarction of unspecified site
- I230 Haemopericardium as current complication following acute myocardial infarction

- I231 Atrial septal defect as current complication following acute myocardial infarction
- 1232 Ventricular septal defect as current complication following acute myocardial infarction
- 1233 Rupture of cardiac wall without haemopericardium as current complication following acute myocardial infarction
- 1234 Rupture of chordae tendineae as current complication following acute myocardial infarction
- I235 Rupture of papillary muscle as current complication following acute myocardial infarction
- 1236 Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction
- 1238 Other current complications following acute myocardial infarction
- 1240 Coronary thrombosis not resulting in myocardial infarction
- 1241 Dressler syndrome
- 1248 Other forms of acute ischaemic heart disease
- 1249 Acute ischaemic heart disease, unspecified
- 1250 Atherosclerotic cardiovascular disease, so described
- 1251 Atherosclerotic heart disease
- 1252 Old myocardial infarction
- 1253 Aneurysm of heart
- 1254 Coronary artery aneurysm and dissection
- 1255 Ischaemic cardiomyopathy
- 1256 Silent myocardial ischaemia
- 1258 Other forms of chronic ischaemic heart disease
- 1259 Chronic ischaemic heart disease, unspecified

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Exercise ECG for screening for coronary heart disease

EBI recommendation

Exercise electrocardiogram (ECG) is a type of cardiac stress test that should no longer be used to screen for coronary heart disease (CHD).

Coding

Code Script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) LIKE '%U194%'
AND (apcs.der_diagnosis_all like '%I20[189]%'
OR apcs.der_diagnosis_all like '%I24[08]%'
OR apcs.der_diagnosis_all like '%I25[012345689]%')
AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS_Activity_Date) between 19 AND 120
THEN '2L ExerciseECG'
```

Outpatient

```
WHEN OPA.Der_Procedure_All LIKE '%U194%'

AND
isnull(OPA.Age_at_Start_of_Episode_SUS,OPA.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

THEN '2L_ExerciseECG'
```

Code Definitions

Procedure codes (OPCS)

Main

U194 Exercise electrocardiography

Diagnosis codes (ICD)

- 1201 Angina pectoris with documented spasm
- 1208 Other forms of angina pectoris
- 1209 Angina pectoris, unspecified
- 1240 Coronary thrombosis not resulting in myocardial infarction
- 1248 Other forms of acute ischaemic heart disease
- 1250 Atherosclerotic cardiovascular disease, so described
- 1251 Atherosclerotic heart disease
- 1252 Old myocardial infarction
- 1253 Aneurysm of heart
- 1254 Coronary artery aneurysm and dissection
- 1255 Ischaemic cardiomyopathy
- 1256 Silent myocardial ischaemia
- 1258 Other forms of chronic ischaemic heart disease
- 1259 Chronic ischaemic heart disease, unspecified

All diagnoses and procedure only if admitted as an inpatient solely for the exercise ECG.

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Cystoscopy for uncomplicated lower urinary tract symptoms

EBI recommendation

Cystoscopy should be offered to men with LUTS only when clinically indicated.

Coding

Code Script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('M455','M458','M459')

AND apcs.sex=1

AND not (apcs.der_diagnosis_all like '%F171%'

OR apcs.der_diagnosis_all like '%N390%'

OR apcs.der_diagnosis_all like '%R31%'

OR apcs.der_diagnosis_all like '%R398%')

AND apcs.Der_Procedure_All not like '%M45[1-4]%'

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS_Activity_Date) between 19 AND 120

AND APCS.Admission_Method not like ('2%')

THEN '2H cystoscopy UTI'
```

Code Definitions

Procedure codes (OPCS)

Main

M455 Diagnostic endoscopic examination of bladder using rigid cystoscope

M458 Other specified diagnostic endoscopic examination of bladder

M459 Unspecified diagnostic endoscopic examination of bladder

Exclusion

M451 Diagnostic endoscopic examination of bladder and biopsy of lesion of bladder NEC

- M452 Diagnostic endoscopic examination of bladder and biopsy of lesion of prostate NFC
- M453 Diagnostic endoscopic examination of bladder and biopsy of lesion of bladder using rigid cystoscope
- M454 Diagnostic endoscopic examination of bladder and biopsy of lesion of prostate using rigid cystoscope

Diagnosis codes (ICD)

Exclusion

- F171 Mental and behavioural disorders due to use of tobacco Harmful use
- N390 Urinary tract infection, site not specified
- R31X Unspecified haematuria
- R398 Other and unspecified symptoms and signs involving the urinary system

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Dupuytren's contracture release

EBI recommendation

NICE recommends no treatment is necessary for people with Dupuytren's disease who do not have contracture. Referral to hand surgery should be made for people with Dupuytren's contractures according to specific criteria.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('T521','T522','T525','T526','T541','T543')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

AND LEFT(der.Spell_Primary_Diagnosis,4)='M720'

AND APCS.Admission_Method not like ('2%')

THEN 'N dupuytr'
```

Code Definitions

Procedure codes (OPCS)

Main

- T521 Palmar fasciectomy
- T522 Revision of palmar fasciectomy
- T525 Digital fasciectomy
- T526 Revision of digital fasciectomy
- T541 Division of palmar fascia NEC
- T543 Needle fasciotomy of palmar fascia

Potential

- T528 Other specified excision of other fascia
- T529 Unspecified excision of other fascia
- T548 Other specified division of fascia
- T549 Unspecified division of fascia

Diagnosis codes (ICD)

M720 Palmar fascial fibromatosis [Dupuytren] (there is no way to differentiate between Dupuytren's disease and contracture in the classification)

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Upper GI endoscopy

EBI recommendation

Endoscopy is an invasive procedure and is not always well tolerated. It carries significant risks and should not be used as a first-line indication in all patients. Upper GI Endoscopy should only be performed if the patient meets certain criteria.

Coding

Code Script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in

('G161','G162','G163','G168','G169','G191','G192','G198','G199','G451','G452','G

453','G454','G458','G459','G551','G558','G559','G651','G658','G659','G801','G80

3','G808','G809')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

AND APCS.Admission_Method not like ('2%')

THEN '2M UpperGIEndoscopy'
```

Outpatient

WHEN

```
('G161','G162','G163','G168','G169','G191','G192','G198','G199','G451','G452','G
453','G454','G458','G459','G551','G558','G559','G651','G658','G659','G801','G80
3','G808','G809')

AND

isnull(OPA.Age_at_Start_of_Episode_SUS,OPA.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

THEN '2M UpperGIEndoscopy'
```

LEFT(der.Attend Dominant Procedure,4) in

Code Definitions

Procedure codes (OPCS)

- G161 Diagnostic fibreoptic endoscopic examination of oesophagus and biopsy of lesion of oesophagus
- G162 Diagnostic fibreoptic endoscopic ultrasound examination of oesophagus
- G163 Diagnostic fibreoptic insertion of Bravo pH capsule into oesophagus
- G168 Other specified diagnostic fibreoptic endoscopic examination of oesophagus
- G169 Unspecified diagnostic fibreoptic endoscopic examination of oesophagus
- G191 Diagnostic endoscopic examination of oesophagus and biopsy of lesion of oesophagus using rigid oesophagoscope
- G192 Diagnostic endoscopic insertion of Bravo pH capsule using rigid oesophagoscope
- G198 Other specified diagnostic endoscopic examination of oesophagus using rigid oesophagoscope
- G199 Unspecified diagnostic endoscopic examination of oesophagus using rigid oesophagoscope
- G451 Fibreoptic endoscopic examination of upper gastrointestinal tract and biopsy of lesion of upper gastrointestinal tract
- G452 Fibreoptic endoscopic ultrasound examination of upper gastrointestinal tract
- G453 Fibreoptic endoscopic insertion of Bravo pH capsule into upper gastrointestinal tract
- G454 Fibreoptic endoscopic examination of upper gastrointestinal tract and staining of gastric mucosa
- G458 Other specified diagnostic fibreoptic endoscopic examination of upper gastrointestinal tract
- G459 Unspecified diagnostic fibreoptic endoscopic examination of upper gastrointestinal tract
- G551 Diagnostic endoscopic examination of duodenum and biopsy of lesion of duodenum
- G558 Other specified diagnostic endoscopic examination of duodenum
- G559 Unspecified diagnostic endoscopic examination of duodenum
- G651 Diagnostic endoscopic examination of jejunum and biopsy of lesion of jejunum
- G658 Other specified diagnostic endoscopic examination of jejunum
- G659 Unspecified diagnostic endoscopic examination of jejunum
- G801 Diagnostic endoscopic examination of ileum and biopsy of lesion of ileum
- G803 Diagnostic endoscopic balloon examination of ileum
- G808 Other specified diagnostic endoscopic examination of ileum
- G809 Unspecified diagnostic endoscopic examination of ileum

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Fusion surgery for mechanical axial low back pain

EBI recommendation

Spinal fusion is not indicated for the treatment of non-specific, mechanical back pain.

Coding

Code Script

```
WHEN
           (left(der.Spell Dominant Procedure,4) like '%V38[23456]%'
           OR left(der.Spell Dominant Procedure,4) like '%V39[34567]%'
                 OR left(der.Spell Dominant Procedure,4) like '%V404%')
           AND der. Spell Primary Diagnosis like '%M54[34589]%'
           AND not (apcs.der diagnosis all like '%M40[012]%'
                 OR apcs.der_diagnosis_all like '%M41[01234589]%'
                 OR apcs.der diagnosis all like '%M42[019]%'
                 OR apcs.der diagnosis all like '%M43[01589]%'
                 OR apcs.der diagnosis all like '%M45%'
                 OR (apcs.der diagnosis all like '%O268%'
           AND (apcs.der diagnosis all like '%M533%'
                 OR apcs.der diagnosis all like '%M54[345]%')))
           AND
           isnull(APCS.Age At Start of Spell SUS,APCS.Der Age at CDS
           Activity Date) between 19 AND 120
           AND APCS. Admission Method not like ('2%')
           THEN '2Y back pain fusion'
```

Code Definitions

Procedure codes (OPCS)

V382 Primary posterior interlaminar fusion of joint of lumbar spine

V383 Primary posterior fusion of joint of lumbar spine NEC

- V384 Primary intertransverse fusion of joint of lumbar spine NEC
- V385 Primary posterior interbody fusion of joint of lumbar spine
- V386 Primary transforaminal interbody fusion of joint of lumbar spine
- V393 Revisional posterior interlaminar fusion of joint of lumbar spine
- V394 Revisional posterior fusion of joint of lumbar spine NEC
- V395 Revisional intertransverse fusion of joint of lumbar spine NEC
- V396 Revisional posterior interbody fusion of joint of lumbar spine
- V397 Revisional transforaminal interbody fusion of joint of lumbar spine
- V404 Posterior instrumented fusion of lumbar spine NEC

Diagnosis codes (ICD)

Inclusion

- M543 Sciatica
- M544 Lumbago with sciatica
- M545 Low back pain
- M548 Other dorsalgia
- M549 Dorsalgia, unspecified

Exclusion

- M400 Postural kyphosis
- M401 Other secondary kyphosis
- M402 Other and unspecified kyphosis
- M410 Infantile idiopathic scoliosis
- M411 Juvenile idiopathic scoliosis
- M412 Other idiopathic scoliosis
- M413 Thoracogenic scoliosis
- M414 Neuromuscular scoliosis
- M415 Other secondary scoliosis
- M418 Other forms of scoliosis
- M419 Scoliosis, unspecified
- M420 Juvenile osteochondrosis of spine
- M421 Adult osteochondrosis of spine
- M429 Spinal osteochondrosis, unspecified
- M430 Spondylolysis
- M431 Spondylolisthesis
- M435 Other recurrent vertebral subluxation
- M438 Other specified deforming dorsopathies
- M439 Deforming dorsopathy, unspecified
- M45X Ankylosing spondylitis

O268 Other specified pregnancy-related conditions

M533 Sacrococcygeal disorders, not elsewhere classified*

M543 Sciatica*

M544 Lumbago with sciatica*

M545 Low back pain*

* Secondary to O268

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Ganglion excision

EBI recommendation

Most people live comfortably with ganglia and they often resolve spontaneously over time. Ganglion excision can be unnecessary, can cause complications, and recurrence is common following surgery. The complications may be similar to or worse than the original problem. Ganglion excision should only be offered under specific criteria.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('T591','T592','T601','T602')

AND (der.Spell_Primary_Diagnosis like '%M674%'

OR der.Spell_Primary_Diagnosis like '%M255%')

AND apcs.der_diagnosis_all not like '%M258%'

AND APCS.Admission_Method not like ('2%')

THEN 'O ganglion'
```

Code Definitions

Procedure codes (OPCS)

Main

T591 Excision of ganglion of wrist

T592 Excision of ganglion of hand NEC

T601 Re-excision of ganglion of wrist

T602 Re-excision of ganglion of hand NEC

Potential

T611 Aspiration of ganglion

T613 Injection of ganglion

T618 Other specified other operations on ganglion

T598 Other specified excision of ganglion

T599 Unspecified excision of ganglion

T608 Other specified re-excision of ganglion

T609 Unspecified re-excision of ganglion

Diagnosis codes (ICD)

Includes

M674 Ganglion (nothing to state that this is severe as per policy. Also nothing to demonstrate the site (although this can be picked up from the OPCS-4 code))

M255 Pain in joint (this code might be used to demonstrate that there is pain involved, but not a guarantee (fifth character would be '0', '4' or '7'))

Exclusions

M258 Other specified joint disorders (this is where cyst of joint is classified so might be used as a bypass)

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Glaucoma referral criteria

EBI recommendation

The pathway for the referral of glaucoma and related conditions (such as ocular hypertension [OHT] which is raised eye pressure without optic nerve damage) to a hospital eye service is consistent across England to include additional clinical assessments and repeat measurements performed by optometrists, as recommended by NICE NG81. These services are outside of the sight test and need to be locally commissioned.

Coding

Code script

Inpatient

```
WHEN (APCS.Der_Diagnosis_All LIKE '%H40[012345689]%'
OR APCS.Der_Diagnosis_All LIKE '%H42[08]%'
OR APCS.Der_Diagnosis_All LIKE '%H445%'
OR APCS.Der_Diagnosis_All LIKE '%P153%'
OR APCS.Der_Diagnosis_All LIKE '%Q150%')
AND (NOT (APCS.Der_Diagnosis_All LIKE '%H46%'
OR APCS.Der_Diagnosis_All LIKE '%H470%')
OR APCS.Der_Diagnosis_All IS NULL )
AND APCS.Admission_Method NOT LIKE '2%'
THEN '3D_Glaucoma_Referral'
```

Outpatient

```
WHEN (OPA.Der_Diagnosis_All LIKE '%H40[012345689]%'
OR OPA.Der_Diagnosis_All LIKE '%H42[08]%'
OR OPA.Der_Diagnosis_All LIKE '%H445%'
OR OPA.Der_Diagnosis_All LIKE '%P153%'
OR OPA.Der_Diagnosis_All LIKE '%Q150%')
AND (NOT (OPA.Der_Diagnosis_All LIKE '%H46%'
OR OPA.Der_Diagnosis_All LIKE '%H46%')
OR OPA.Der_Diagnosis_All LIKE '%H470%')
OR OPA.Der Diagnosis All IS NULL)
```

THEN '3D Glaucoma Referral'

Code Definitions

Diagnosis codes (ICD)

Inclusion

- H400 Glaucoma suspect
- H401 Primary open-angle glaucoma
- H402 Primary angle-closure glaucoma
- H403 Glaucoma secondary to eye trauma
- H404 Glaucoma secondary to eye inflammation
- H405 Glaucoma secondary to other eye disorders
- H406 Glaucoma secondary to drugs
- H408 Other glaucoma
- H409 Glaucoma, unspecified
- H420 Glaucoma in endocrine, nutritional and metabolic diseases
- H428 Glaucoma in other diseases classified elsewhere
- H445 Degenerated conditions of globe (absolute glaucoma is classified to this code)
- P153 Birth injury to eye (traumatic glaucoma due to birth injury is classified to this code)
- Q150 Congenital glaucoma

Exclusion

- H46X Optic neuritis
- H470 Disorders of optic nerve, not elsewhere classified

Procedure codes (OPCS)

Potential exclusions (indicating treatment rather than referral)

- C52.1 Deep sclerectomy with spacer
- C52.2 Deep sclerectomy without spacer
- C60.1 Trabeculectomy
- C60.5 Insertion of tube into anterior chamber of eye to assist drainage of aqueous humour
- C60.6 Viscocanulostomy
- C60.8 Other specified filtering operations on iris
- C60.9 Unspecified filtering operations on iris
- C61.1 Laser trabeculoplasty
- C61.2 Trabeculotomy

- C61.3 Goniotomy
- C61.4 Goniopuncture
- C61.5 Viscogonioplasty
- C61.8 Other specified other operations on trabecular meshwork of eye
- C61.9 Unspecified other operations on trabecular meshwork of eye
- C62.1 Iridosclerotomy
- C62.2 Surgical iridotomy
- C62.3 Laser iridotomy
- C62.8 Other specified incision of iris
- C62.9 Unspecified incision of iris

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category \$\infty\$'02'

Grommets for glue ear in children

EBI recommendation

Evidence suggests that grommets only offer a short-term hearing improvement in children with glue ear who have no other serious medical problems or disabilities. They should be offered in cases that have a history of persistent (at least 3 months) bilateral, hearing loss as defined by the NICE guidance. Hearing aids can also be offered as an alternative to surgery.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('D151')

AND (der.Spell_Primary_Diagnosis like 'H65[2349]%'

OR der.Spell_Primary_Diagnosis like 'H66[012349]%')

AND (
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 0 AND 18

OR

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_a
 t_CDS_Activity_Date) between 7001 AND 7007 )

AND APCS.Admission_Method not like ('2%')

THEN 'G_gromm'
```

Code Definitions

Procedure codes (OPCS)

D151 Myringotomy with insertion of ventilation tube through tympanic membrane

Diagnosis codes (ICD)

```
H652 Chronic serous otitis media
H653 Chronic mucoid otitis media
H654 Other chronic nonsuppurative otitis media
H659 Nonsuppurative otitis media, unspecified
H660 Acute suppurative otitis media
```

- H661 Chronic tubotympanic suppurative otitis media
- H662 Chronic atticoantral suppurative otitis media
- H663 Other chronic suppurative otitis media
- H664 Suppurative otitis media, unspecified
- H669 Otitis media, unspecified

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category \$\infty\$'02'

Non-visible haematuria

EBI recommendation

Patients should be referred from primary care to secondary care for investigation of non-visible haematuria in line with guideline NG12 from the National Institute for Health and

Care Excellence (NICE). The EBI programme proposes clear, evidence-based criteria on how to investigate in hospitals

Coding

Code script

Inpatient

```
WHEN
               APCS.Der Procedure All LIKE '%U12[34]%'
          (
               APCS.Der Procedure All LIKE '%U372%'
          OR
               (APCS.Der Procedure All LIKE '%U21[26]%'
          OR
                          APCS.Der Procedure All LIKE
               AND (
               '%Z41[123489]%'
                    OR APCS.Der Procedure All LIKE '%Z421%')))
                    APCS.Der Diagnosis All LIKE '%R31%'
          AND (
                    APCS.Der Diagnosis All LIKE
               '%N02[0123456789]%')
                          APCS.Der Diagnosis All LIKE '%R300%'
          AND (NOT (
                          APCS.Der Diagnosis All LIKE '%R72%'
                     OR
                          APCS.Der Diagnosis All LIKE '%N390%')
                     OR
                    APCS.Der Diagnosis All IS NULL)
               AND APCS. Admission Method NOT LIKE '2%'
          THEN '3H Non-visible Haematuria'
```

Outpatient

```
WHEN (OPA.Der_Procedure_All LIKE '%U12[34]%'
OR OPA.Der_Procedure_All LIKE '%U372%'
OR (OPA.Der_Procedure_All LIKE '%U21[26]%'
AND (OPA.Der_Procedure_All LIKE '%Z41[123489]%'
```

```
OR OPA.Der_Procedure_All LIKE '%Z421%')))

AND ( OPA.Der_Diagnosis_All LIKE '%R31%'
OR OPA.Der_Diagnosis_All LIKE '%N02[0123456789]%'
)

AND (NOT ( OPA.Der_Diagnosis_All LIKE '%R300%'
OR OPA.Der_Diagnosis_All LIKE '%R72%'
OR OPA.Der_Diagnosis_All LIKE '%N390%')
OR OPA.Der_Diagnosis_All LIKE '%N390%')
THEN '3H Non-visible Haematuria'
```

NOTE: Outpatient data will include scanning for conditions and symptoms other than non-visible haematuria.

Coding comment

It might be difficult to generate meaningful data from the codes due to restrictiveness of the classification and variety of symptoms associated with this.

Code Definitions

Procedure codes (OPCS)

- U123 Ultrasound of kidneys
- U124 Ultrasound of bladder
- U216 Ultrasound scan NEC
- Z411 Kidney*
- Z412 Ureteric orifice*
- Z413 Ureter NEC*
- Z414 Renal pelvis NEC*
- Z418 Specified upper urinary tract NEC*
- Z419 Upper urinary tract NEC*
- Z421 Bladder NEC*
- U212 Computed tomography NEC
- Z411 Kidney**
- Z412 Ureteric orifice**
- Z413 Ureter NEC**
- Z414 Renal pelvis NEC**
- Z418 Specified upper urinary tract NEC**
- Z419 Upper urinary tract NEC**

Z421 Bladder NEC**

U372 Computed tomography of kidneys

Diagnosis codes (ICD)

Inclusion

- R31X Unspecified haematuria (most likely code to return results)
- N020 Recurrent and persistent haematuria Minor glomerular abnormality
- N021 Recurrent and persistent haematuria Focal and segmental glomerular lesions
- N022 Recurrent and persistent haematuria Diffuse membranous glomerulonephritis
- N023 Recurrent and persistent haematuria Diffuse mesangial proliferative glomerulonephritis
- N024 Recurrent and persistent haematuria Diffuse endocapillary proliferative glomerulonephritis
- N025 Recurrent and persistent haematuria Diffuse mesangiocapillary glomerulonephritis
- N026 Recurrent and persistent haematuria Dense deposit disease
- N027 Recurrent and persistent haematuria Diffuse crescentic glomerulonephritis
- N028 Recurrent and persistent haematuria Other
- N029 Recurrent and persistent haematuria Unspecified

Exclusion

- R300 Dysuria
- R72X Abnormality of white blood cells, not elsewhere classified
- N390 Urinary tract infection, site not specified (Only added unspecified site code as most likely)

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

^{*}Secondary to U216

^{**}Secondary to U212

Haemorrhoid surgery

EBI recommendation

Numerous interventions exist for the management of haemorrhoids (piles). The evidence recommends that surgical treatment should only be considered for haemorrhoids that keep coming back after treatment or for haemorrhoids that are significantly affecting daily life.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('H511','H512','H513','H518','H519')

AND (apcs.der_diagnosis_all like '%K64[01234589]%'

OR apcs.der_diagnosis_all like '%O224%'

OR apcs.der_diagnosis_all like '%O872%')

AND not (apcs.der_diagnosis_all like '%C[0-8][0-9]%'

OR apcs.der_diagnosis_all like '%C9[0-7]%')

AND APCS.Admission_Method not like ('2%')

THEN 'I haemmor'
```

Code Definitions

Procedure codes (OPCS)

Main

H511 Haemorrhoidectomy

H512 Partial internal sphincterotomy for haemorrhoid

H513 Stapled haemorrhoidectomy

H518 Other specified excision of haemorrhoid

H519 Unspecified excision of haemorrhoid

Potential

H521 Cryotherapy to haemorrhoid

H522 Infrared photocoagulation of haemorrhoid

H523 Injection of sclerosing substance into haemorrhoid

- H524 Rubber band ligation of haemorrhoid
- H528 Other specified destruction of haemorrhoid
- H529 Unspecified destruction of haemorrhoid
- H531 Evacuation of perianal haematoma
- H532 Forced manual dilation of anus for haemorrhoid
- H533 Manual reduction of prolapsed haemorrhoid
- H538 Other specified other operations on haemorrhoid
- H539 Unspecified other operations on haemorrhoid
- L703 Ligation of artery NEC (coding for the HALO procedure)
- Y524 Peranal transrectal approach to organ (secondary to L703)
- Y532 Approach to organ under ultrasonic control (secondary to Y524)
- Z378 Specified lateral branch of abdominal aorta NEC (secondary to Y532)

Diagnosis codes (ICD)

Includes

- K640 First degree haemorrhoids
- K641 Second degree haemorrhoids
- K642 Third degree haemorrhoids
- K643 Fourth degree haemorrhoids
- K644 Residual haemorrhoidal skin tags
- K645 Perianal venous thrombosis
- K648 Other specified haemorrhoids
- K649 Haemorrhoids, unspecified
- O224 Haemorrhoids in pregnancy
- O872 Haemorrhoids in the puerperium

Potential

C00-C97 Malignant neoplasms

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category > '02'

Helmet therapy for treatment of positional plagiocephaly / brachycephaly in children

EBI recommendation

There is clear evidence and expert consensus that a helmet does not affect the natural course of skull growth and should not be used.

Coding

Code Script

For interventions with fewer than 10 episodes during 2018/19, the activity and coding has not been included.

```
WHEN apcs.Der_Procedure_All like '%V04[89]%'

AND (apcs.Der_Diagnosis_All LIKE '%Q673%')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date)<=2

AND APCS.Admission_Method not like ('2%')

THEN 'Z Helmet therapy'
```

Code Definitions

No appropriate classification procedure codes available for this treatment.

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Repair of minimally symptomatic inguinal hernia

EBI recommendation

Watchful waiting is a safe option for people with minimally symptomatic inguinal hernias. Delaying and not doing surgical repair unless symptoms increase is acceptable because acute hernia incarcerations occur rarely. Many people with an inguinal hernia are asymptomatic or minimally symptomatic and may never need surgery.

Coding

Code Script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in
('T201','T202','T203','T204','T208','T209')

AND der.Spell_Primary_Diagnosis like 'K40[29]%'

AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 and 120

AND APCS.Admission_Method not like ('2%')

THEN '2B hernia repair'
```

Code Definitions

Procedure codes (OPCS)

- T201 Primary repair of inguinal hernia using insert of natural material
- T202 Primary repair of inguinal hernia using insert of prosthetic material
- T203 Primary repair of inguinal hernia using sutures
- T204 Primary repair of inguinal hernia and reduction of sliding hernia
- T208 Other specified primary repair of inquinal hernia
- T209 Unspecified primary repair of inguinal hernia
- T211 Repair of recurrent inguinal hernia using insert of natural material
- T212 Repair of recurrent inguinal hernia using insert of prosthetic material
- T213 Repair of recurrent inguinal hernia using sutures

- T214 Removal of prosthetic material from previous repair of inguinal hernia
- T218 Other specified repair of recurrent inguinal hernia
- T219 Unspecified repair of recurrent inguinal hernia

Diagnosis codes (ICD)

- K402 Bilateral inguinal hernia, without obstruction or gangrene
- K409 Unilateral or unspecified inguinal hernia, without obstruction or gangrene

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Hysterectomy for heavy bleeding

EBI recommendation

NICE recommends that hysterectomy should not be used as a first-line treatment solely for heavy menstrual bleeding (HMB). Heavy periods can be reduced by using medicines or intrauterine systems (IUS) or losing weight (if necessary).

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('Q071','Q072','Q073','Q074','Q075','Q076','Q078','Q079','Q081','Q082','Q083','Q088','Q089')

AND (apcs.der_diagnosis_all like '%N92[0124]%'
OR apcs.der_diagnosis_all like '%N950%')

AND apcs.der_diagnosis_all not like '%D25[0129]%'
AND not (apcs.der_diagnosis_all like '%C52%'
OR apcs.der_diagnosis_all like '%C53[0189]%'
OR apcs.der_diagnosis_all like '%C54[012389]%'
OR apcs.der_diagnosis_all like '%C5[56]%'
OR apcs.der_diagnosis_all like '%C57[01234789]%'
OR apcs.der_diagnosis_all like '%C58%')
AND APCS.Admission_Method not like ('2%')
THEN 'J hysterec'
```

Code Definitions

Procedure codes (OPCS)

- Q071 Abdominal hysterocolpectomy and excision of periuterine tissue
- Q072 Abdominal hysterectomy and excision of periuterine tissue NEC
- Q073 Abdominal hysterocolpectomy NEC
- Q074 Total abdominal hysterectomy NEC
- Q075 Subtotal abdominal hysterectomy

- Q076 Excision of accessory uterus
- Q078 Other specified abdominal excision of uterus
- Q079 Unspecified abdominal excision of uterus
- Q081 Vaginal hysterocolpectomy and excision of periuterine tissue
- Q082 Vaginal hysterectomy and excision of periuterine tissue NEC
- Q083 Vaginal hysterocolpectomy NEC
- Q088 Other specified vaginal excision of uterus
- Q089 Unspecified vaginal excision of uterus

Diagnosis codes (ICD)

Includes

- N920 Excessive and frequent menstruation with regular cycle
- N921 Excessive and frequent menstruation with irregular cycle
- N922 Excessive menstruation at puberty
- N924 Excessive bleeding in the premenopausal period
- N950 Postmenopausal bleeding (used to classify postmenopausal menorrhagia)

Exclusions

- D250 Submucous leiomyoma of uterus (can be used in exception searches based on criteria that it is accepted)
- D251 Intramural leiomyoma of uterus (can be used in exception searches based on criteria that it is accepted)
- D252 Subserosal leiomyoma of uterus (can be used in exception searches based on criteria that it is accepted)
- D259 Leiomyoma of uterus, unspecified (can be used in exception searches based on criteria that it is accepted)
- C52X Malignant neoplasm of vagina
- C530 Malignant neoplasm of endocervix
- C531 Malignant neoplasm of exocervix
- C538 Malignant neoplasm of overlapping lesion of cervix uteri
- C539 Malignant neoplasm of cervix uteri, unspecified
- C540 Malignant neoplasm of isthmus uteri
- C541 Malignant neoplasm of endometrium
- C542 Malignant neoplasm of myometrium
- C543 Malignant neoplasm of fundus uteri
- C548 Malignant neoplasm of overlapping lesion of corpus uteri
- C549 Malignant neoplasm of corpus uteri, unspecified
- C55X Malignant neoplasm of uterus, part unspecified
- C56X Malignant neoplasm of ovary
- C570 Malignant neoplasm of fallopian tube

- C571 Malignant neoplasm of broad ligament
- C572 Malignant neoplasm of round ligament
- C573 Malignant neoplasm of parametrium
- C574 Malignant neoplasm of uterine adnexa, unspecified
- C577 Malignant neoplasm of other specified female genital organs
- C578 Malignant neoplasm of overlapping lesion of female genital organs
- C579 Malignant neoplasm of female genital organ, unspecified
- C58X Malignant neoplasm of placenta

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Surgical removal of kidney stones

EBI recommendation

Stones can be observed to see if they pass spontaneously, or treated with shockwave lithotripsy, or surgical techniques such as ureteroscopy (URS) and percutaneous stone surgery (PCNL), both of which may involve placing a stent.

Coding

Code Script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in
('M071','M072','M078','M091','M092','M093','M094','M098','M261','M262','M2
63','M268','M271','M272','M273','M278','M284','M285','M288','M289')

AND (der.Spell_Primary_Diagnosis like '%N132%'

OR der.Spell_Primary_Diagnosis like '%N20[0129]%')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

THEN '2G_kidney_stone_surgery'
```

Code Definitions

Procedure codes (OPCS)

- M071 Ureteroscopic laser fragmentation of calculus of kidney
- M072 Ureteroscopic extraction of calculus of kidney NEC
- M078 Other specified therapeutic ureteroscopic operations on kidney
- M091 Endoscopic ultrasound fragmentation of calculus of kidney
- M092 Endoscopic electrohydraulic shockwave fragmentation of calculus of kidney
- M093 Endoscopic laser fragmentation of calculus of kidney
- M094 Endoscopic extraction of calculus of kidney NEC
- M098 Other specified therapeutic endoscopic operations on calculus of kidney
- M261 Nephroscopic laser fragmentation of calculus of ureter
- M262 Nephroscopic fragmentation of calculus of ureter NEC
- M263 Nephroscopic extraction of calculus of ureter

- M268 Other specified therapeutic nephroscopic operations on ureter
- M271 Ureteroscopic laser fragmentation of calculus of ureter
- M272 Ureteroscopic fragmentation of calculus of ureter NEC
- M273 Ureteroscopic extraction of calculus of ureter
- M278 Other specified therapeutic ureteroscopic operations on ureter
- M284 Endoscopic catheter drainage of calculus of ureter
- M285 Endoscopic drainage of calculus of ureter by dilation of ureter
- M288 Other specified other endoscopic removal of calculus from ureter
- M289 Unspecified other endoscopic removal of calculus from ureter

Diagnosis codes (ICD)

- N132 Hydronephrosis with renal and ureteral calculous obstruction
- N200 Calculus of kidney
- N201 Calculus of ureter
- N202 Calculus of kidney with calculus of ureter
- N209 Urinary calculus, unspecified

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Knee arthroscopy for patients with osteoarthritis

EBI recommendation

Arthroscopic knee washout (lavage and debridement) should not be used as a treatment for osteoarthritis because it is clinically ineffective.

Coding

Code script

```
WHEN (LEFT(der.Spell_Dominant_Procedure,4) in ('W851','W852')
OR (LEFT(der.Spell_Dominant_Procedure,4) = 'W802'
AND apcs.der_procedure_all like '%Y767%'
AND apcs.der_procedure_all like '%Z846%') )
AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 AND 120
AND (der.Spell_Primary_Diagnosis like 'M17[0123459]'
OR der.Spell_Primary_Diagnosis like 'M15[0123489]')
AND apcs.der_diagnosis_all not like '%M238%'
AND APCS.Admission_Method not like ('2%')
THEN 'C knee arth'
```

Code Definitions

Procedure codes (OPCS)

Main

```
W852 Endoscopic irrigation of knee joint
W802 Open debridement of joint NEC
Y767 Arthroscopic approach to joint (only when supplementary to W802)
Z846 Knee joint (only when supplementary to W802)
W851 Endoscopic removal of loose body from of knee joint
```

Potential

- W821 Endoscopic total excision meniscus of knee joint
- W822 Endoscopic resection of meniscus of knee joint
- W823 Endoscopic repair of meniscus of knee joint
- W824 Endoscopic total replacement of meniscus of knee joint
- W825 Endoscopic partial replacement of meniscus of knee joint
- W861 Endoscopic removal of loose body from joint NEC (plus, *Z846 Knee joint*)

Diagnosis codes (ICD)

Includes

- M170 Primary gonarthrosis, bilateral
- M171 Other primary gonarthrosis
- M172 Post-traumatic gonarthrosis, bilateral
- M173 Other post-traumatic gonarthrosis
- M174 Other secondary gonarthrosis, bilateral
- M175 Other secondary gonarthrosis
- M179 Gonarthrosis, unspecified
- M150 Primary generalized (osteo)arthrosis (if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M151 Heberden nodes (with arthropathy) (if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M152 Bouchard nodes (with arthropathy) (if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M153 Secondary multiple arthrosis(if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M154 Erosive (osteo)arthrosis(if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M158 Other polyarthrosis(if patient has OA of the knee and another joint not a reason for arthroscopy without locking)
- M159 Polyarthrosis, unspecified(if patient has OA of the knee and another joint not a reason for arthroscopy without locking)

Exclusion

M238 Other internal derangements of knee (locking of knee, but code is not dedicated to this description)

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category \$\lefts' 102'

Lumbar Discectomy

EBI recommendation

In the presence of concordant MRI changes, Discectomy may be offered to patients with compressive nerve root signs and symptoms lasting three months (except in severe cases) despite best efforts with non-operative management.

Coding

Code Script

```
WHEN (LEFT(der.Spell_Dominant_Procedure,4) in
('V331','V332','V333','V334','V335','V336','V337','V338','V339','V511','V518','V
519','V583','V603')

OR (LEFT(der.Spell_Dominant_Procedure,4) in
('V521','V522','V525','V528','V529','V588','V589','V608','V6
09')

AND apcs.Der_Procedure_All like '%Z993%'))

AND (der.Spell_Primary_Diagnosis like '%M51[01]%'
OR der.Spell_Primary_Diagnosis like '%M54[134]%')

AND
isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS
_Activity_Date) between 19 AND 120

AND APCS.Admission_Method not like ('2%')
THEN '2J Discectomy'
```

Code Definitions

Procedure codes (OPCS)

- V331 Primary laminectomy excision of lumbar intervertebral disc
- V332 Primary fenestration excision of lumbar intervertebral disc
- V333 Primary anterior excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine
- V334 Primary anterior excision of lumbar intervertebral disc NEC
- V335 Primary anterior excision of lumbar intervertebral disc and posterior graft fusion of joint of lumbar spine

- V336 Primary anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spine
- V337 Primary microdiscectomy of lumbar intervertebral disc
- V338 Other specified primary excision of lumbar intervertebral disc
- V339 Unspecified primary excision of lumbar intervertebral disc
- V511 Primary direct lateral excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine
- V518 Other specified other primary excision of lumbar intervertebral disc
- V519 Unspecified other primary excision of lumbar intervertebral disc
- V521 Enzyme destruction of intervertebral disc (must have *Z993 Intervertebral disc* of lumbar spine in addition)
- V522 Destruction of intervertebral disc NEC (must have *Z993 Intervertebral disc of lumbar spine* in addition)
- V525 Aspiration of intervertebral disc NEC (must have *Z993 Intervertebral disc of lumbar spine* in addition)
- V528 Other specified other operations on intervertebral disc (must have *Z993 Intervertebral disc of lumbar spine* in addition)
- V529 Unspecified other operations on intervertebral disc (must have Z993 Intervertebral disc of lumbar spine in addition)
- V583 Primary automated percutaneous mechanical excision of lumbar intervertebral disc
- V588 Other specified primary automated percutaneous mechanical excision of intervertebral disc (must have Z993 Intervertebral disc of lumbar spine in addition)
- V589 Unspecified primary automated percutaneous mechanical excision of intervertebral disc (must have *Z993 Intervertebral disc of lumbar spine* in addition)
- V603 Primary percutaneous decompression using coblation to lumbar intervertebral disc
- V608 Other specified primary percutaneous decompression using coblation to intervertebral disc (must have Z993 Intervertebral disc of lumbar spine in addition)
- V609 Unspecified primary percutaneous decompression using coblation to intervertebral disc (must have Z993 Intervertebral disc of lumbar spine in addition)

Diagnosis codes (ICD)

- M510 Lumbar and other intervertebral disc disorders with myelopathy
- M511 Lumbar and other intervertebral disc disorders with radiculopathy
- M541 Radiculopathy
- M543 Sciatica
- M544 Lumbago with sciatica

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Lumbar radiofrequency facet joint denervation

EBI recommendation

Lumbar radiofrequency facet joint denervation (RFD) should only be offered in accordance with NICE Guideline NG59 which recommends it as an adjunct in the management of chronic low back pain only when non-operative treatment has failed, and the main source of pain is thought to arise from one or more degenerate facet joints.

Coding

Code Script

```
WHEN (LEFT(der.Spell_Dominant_Procedure,4) in ('V485','V487')

AND (apcs.der_procedure_all like '%Z67[567]%'

OR apcs.der_procedure_all like '%Z993%'))

AND LEFT(der.spell_primary_diagnosis,4) in

('M512','M518','M519','M545','M549')

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS

_Activity_Date) between 19 AND 120

AND APCS.Admission_Method not like ('2%')

THEN '2K_RFD_back'
```

Code Definitions

Procedure codes (OPCS):

Main

- V485 Radiofrequency controlled thermal denervation of spinal facet joint of lumbar vertebra
- V487 Radiofrequency controlled thermal denervation of spinal facet joint of vertebra NEC
- Z675 Lumbar intervertebral joint (secondary to V48)
- Z676 Lumbosacral joint (secondary to V48)

- Z677 Sacrococcygeal joint (secondary to V48)
- Z993 Intervertebral disc of lumbar spine (secondary to V48)

Potential

- V486 Denervation of spinal facet joint of lumbar vertebra NEC
- Y114 Radiofrequency controlled thermal destruction of organ NOC (secondary to V486)
- A572 Rhizotomy of spinal nerve root (this code could be used if documented as rhizotomy)
- A573 Radiofrequency controlled thermal destruction of spinal nerve root (this code could be used if documented as rhizotomy)

Diagnosis codes (ICD)

- M512 Other specified intervertebral disc displacement
- M518 Other specified intervertebral disc disorders
- M519 Intervertebral disc disorder, unspecified
- M545 Low back pain
- M549 Dorsalgia, unspecified

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category <> '02'

Arthroscopic surgery for meniscal tears

EBI recommendation

The British Association for surgery of the Knee (BASK) recently published guidelines for the use of arthroscopic surgery to treat degenerate meniscal tears.

Coding

Code Script

```
WHEN (LEFT(der.Spell_Dominant_Procedure,4) in ('W821','W822','W823','W829')

OR (LEFT(der.Spell_Dominant_Procedure,4) = 'W714' and (APCS.der_procedure_all like '%Y767%' and APCS.der_procedure_all like '%Z846%'))

OR (LEFT(der.Spell_Dominant_Procedure,4) = 'W715' and (APCS.der_procedure_all like '%Y767%' and APCS.der_procedure_all like '%Y767%' and APCS.der_procedure_all like '%Z846%')))

AND (APCS.Der_Diagnosis_All like '%M232%' OR (APCS.Der_Diagnosis_All like '%M233%' and APCS.Der_Diagnosis_All like '%M238%'))

AND APCS.der_diagnosis_all not like '%S832%'

AND APCS.Admission_Method not like ('2%')

THEN '2E arthroscopic surgery'
```

Code Definitions

Procedure codes (OPCS)

Main

W714 Open autologous chondrocyte implantation into articular structure W715 Open stem cell implantation into articular structure

Y767 Arthroscopic approach to joint (secondary to W714/W715)

Z846 Knee joint (secondary to W714/W715 and Y767)

W821 Endoscopic total excision meniscus of knee joint

W822 Endoscopic resection of meniscus of knee joint

- W823 Endoscopic repair of meniscus of knee joint
- W824 Endoscopic total replacement of meniscus of knee joint
- W825 Endoscopic partial replacement of meniscus of knee joint
- W828 Other specified therapeutic endoscopic operations on meniscus of knee joint
- W829 Unspecified therapeutic endoscopic operations on meniscus of knee joint

Diagnosis codes (ICD)

Inclusion

- M232 Derangement of meniscus due to old tear or injury
- M238 Other internal derangements of knee (with M232/3)

Exclusions

S832 Tear of meniscus, current

Potential

M233 Other meniscus derangements

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category <> '02'

Dilatation and curettage for heavy menstrual bleeding

EBI recommendation

Dilatation and curettage (D&C) should not be used for diagnosis or treatment for heavy menstrual bleeding in women because it is clinically ineffective.

Code Script

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('Q108', 'Q103')

AND (der.Spell_Primary_Diagnosis like '%N920%'

OR der.Spell_Primary_Diagnosis like '%N921%'

OR der.Spell_Primary_Diagnosis like '%N922%'

OR der.Spell_Primary_Diagnosis like '%N924%'

OR der.Spell_Primary_Diagnosis like '%N950%')

AND APCS.Admission_Method not like ('2%')

THEN 'B_menstr_D&C'
```

Code Definitions

Procedure codes (OPCS)

- Q108 Other specified curettage of uterus
- Q188 Other specified diagnostic endoscopic examination of uterus (included this here, rather than the exclusions, as it is unlikely to be used for anything else, but there is the potential for it to be)
- Q103 Dilation of cervix uteri and curettage of uterus NEC

Diagnosis codes (ICD)

- N920 Excessive and frequent menstruation with regular cycle
- N921 Excessive and frequent menstruation with irregular cycle
- N922 Excessive menstruation at puberty
- N924 Excessive bleeding in the premenopausal period

N950 Postmenopausal bleeding (trails from menorrhagia, postmenopausal - unlikely to be found on search)

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs.Administrative_Category<>'02'

Knee MRI when symptoms are suggestive of osteoarthritis Knee MRI for suspected meniscal tears

EBI recommendation

Knee MRI when symptoms are suggestive of osteoarthritis

An initial diagnosis of OA can be made when clinical assessment is suggestive of this pathology. If imaging is required to confirm the diagnosis, then weight bearing radiographs are the first-line of investigation. Magnetic resonance imaging (MRI) for knees is not usually needed.

Knee MRI for suspected meniscal tears

The majority of patients who present to primary care with knee pain do not require initial investigation with an MRI scan once red flag symptoms and signs have been excluded. Patients with persistent mechanical knee symptoms should be referred to secondary care and should have an MRI scan of the knee to investigate for a meniscal tear and/or other pathology.

Coding

Code Script

Coding and count merged for T Knee MRI when symptoms are suggestive of osteoarthritis and U Knee MRI for suspected meniscal tears, producing a single metric.

Outpatient

```
WHEN LEFT(opa.Der_Procedure_All,4) in ('U133','U211')

AND (opa.Der_Procedure_All like '%Z846%'

OR opa.Der_Procedure_All like '%O132%')

AND (not ( opa.der_diagnosis_all like '%M00[01289]%'

OR opa.der_diagnosis_all like '%M01[01234568]%'

OR opa.der_diagnosis_all like '%M0[25][012389]%'

OR opa.der_diagnosis_all like '%M03[0126]%'

OR opa.der_diagnosis_all like '%M0[68][0123489]%'

OR opa.der_diagnosis_all like '%M0[68][0123489]%'
```

```
OR opa.der_diagnosis_all like '%M09[0128]%'
```

OR opa.der diagnosis all like '%M10[012349]%'

OR opa.der_diagnosis_all like '%M11[01289]%'

OR opa.der_diagnosis_all like '%M12[0123458]%'

OR opa.der diagnosis all like '%M13[0189]%'

OR opa.der diagnosis all like '%M14[01234568]%'

OR opa.der_dragnosis_dri fike /00011+[0125+500]/

OR opa.der_diagnosis_all like '%M15[12348]%'

OR opa.der_diagnosis_all like '%M16[012345679]%'

OR opa.der diagnosis all like '%M17[2345]%'

OR opa.der_diagnosis_all like '%M238%'

OR opa.der diagnosis all like '%C40[289]%'

OR opa.der_diagnosis_all like '%C7[69]5%'

OR opa.der_diagnosis_all like '%D162%')

OR opa.der diagnosis all IS NULL)

AND

ISNULL(opa.Age_at_Start_of_Episode_SUS,opa.Der_Age_at_CD S_Activity_Date) between 19 AND 120 THEN 'C knee arth'

Code Definitions

Procedure codes (OPCS)

- U133 Magnetic resonance imaging of bone
- U211 Magnetic resonance imaging NEC
- Z846 Knee joint (secondary to U code)
- O132 Knee NEC (secondary to U code)

Diagnosis codes (ICD)

Inclusion

- M150 Primary generalized (osteo)arthrosis
- M159 Polyarthrosis, unspecified
- M170 Primary gonarthrosis, bilateral
- M171 Other primary gonarthrosis
- M179 Gonarthrosis, unspecified
- M232 Derangement of meniscus due to old tear or injury
- S832 Tear of meniscus, current

Exclusion

- M000 Staphylococcal arthritis and polyarthritis
- M001 Pneumococcal arthritis and polyarthritis
- M002 Other streptococcal arthritis and polyarthritis
- M008 Arthritis and polyarthritis due to other specified bacterial agents
- M009 Pyogenic arthritis, unspecified
- M010 Meningococcal arthritis
- M011 Tuberculous arthritis
- M012 Arthritis in Lyme disease
- M013 Arthritis in other bacterial diseases classified elsewhere
- M014 Rubella arthritis
- M015 Arthritis in other viral diseases classified elsewhere
- M016 Arthritis in mycoses
- M018 Arthritis in other infectious and parasitic diseases classified elsewhere
- M020 Arthropathy following intestinal bypass
- M021 Postdysenteric arthropathy
- M022 Postimmunization arthropathy
- M023 Reiter disease
- M028 Other reactive arthropathies
- M029 Reactive arthropathy, unspecified
- M030 Postmeningococcal arthritis
- M031 Postinfective arthropathy in syphilis
- M032 Other postinfectious arthropathies in diseases classified elsewhere
- M036 Reactive arthropathy in other diseases classified elsewher
- M050 Felty syndrome
- M051 Rheumatoid lung disease
- M052 Rheumatoid vasculitis
- M053 Rheumatoid arthritis with involvement of other organs and systems
- M058 Other seropositive rheumatoid arthritis
- M059 Seropositive rheumatoid arthritis, unspecified
- M060 Seronegative rheumatoid arthritis
- M061 Adult-onset Still disease
- M062 Rheumatoid bursitis
- M063 Rheumatoid nodule
- M064 Inflammatory polyarthropathy
- M068 Other specified rheumatoid arthritis
- M069 Rheumatoid arthritis, unspecified
- M070 Distal interphalangeal psoriatic arthropathy

- M071 Arthritis mutilans
- M072 Psoriatic spondylitis
- M073 Other psoriatic arthropathies
- M074 Arthropathy in Crohn disease [regional enteritis]
- M075 Arthropathy in ulcerative colitis
- M076 Other enteropathic arthropathies
- M080 Juvenile rheumatoid arthritis
- M081 Juvenile ankylosing spondylitis
- M082 Juvenile arthritis with systemic onset
- M083 Juvenile polyarthritis (seronegative)
- M084 Pauciarticular juvenile arthritis
- M088 Other juvenile arthritis
- M089 Juvenile arthritis, unspecified
- M090 Juvenile arthritis in psoriasis
- M091 Juvenile arthritis in Crohn disease [regional enteritis]
- M092 Juvenile arthritis in ulcerative colitis
- M098 Juvenile arthritis in other diseases classified elsewhere
- M100 Idiopathic gout
- M101 Lead-induced gout
- M102 Drug-induced gout
- M103 Gout due to impairment of renal function
- M104 Other secondary gout
- M109 Gout, unspecified
- M110 Hydroxyapatite deposition disease
- M111 Familial chondrocalcinosis
- M112 Other chondrocalcinosis
- M118 Other specified crystal arthropathies
- M119 Crystal arthropathy, unspecified
- M120 Chronic postrheumatic arthropathy [Jaccoud]
- M121 Kaschin-Beck disease
- M122 Villonodular synovitis (pigmented)
- M123 Palindromic rheumatism
- M124 Intermittent hydrarthrosis
- M125 Traumatic arthropathy
- M128 Other specific arthropathies, not elsewhere classified
- M130 Polyarthritis, unspecified
- M131 Monoarthritis, not elsewhere classified
- M138 Other specified arthritis

- M139 Arthritis, unspecified
- M140 Gouty arthropathy due to enzyme defects and other inherited disorders
- M141 Crystal arthropathy in other metabolic disorders
- M142 Diabetic arthropathy
- M143 Lipoid dermatoarthritis
- M144 Arthropathy in amyloidosis
- M145 Arthropathies in other endocrine, nutritional and metabolic disorders
- M146 Neuropathic arthropathy
- M148 Arthropathies in other specified diseases classified elsewhere
- M151 Heberden nodes (with arthropathy)
- M152 Bouchard nodes (with arthropathy)
- M153 Secondary multiple arthrosis
- M154 Erosive (osteo)arthrosis
- M158 Other polyarthrosis
- M160 Primary coxarthrosis, bilateral
- M161 Other primary coxarthrosis
- M162 Coxarthrosis resulting from dysplasia, bilateral
- M163 Other dysplastic coxarthrosis
- M164 Post-traumatic coxarthrosis, bilateral
- M165 Other post-traumatic coxarthrosis
- M166 Other secondary coxarthrosis, bilateral
- M167 Other secondary coxarthrosis
- M169 Coxarthrosis, unspecified
- M172 Post-traumatic gonarthrosis, bilateral
- M173 Other post-traumatic gonarthrosis
- M174 Other secondary gonarthrosis, bilateral
- M175 Other secondary gonarthrosis
- M238 Other internal derangements of knee (code for knee locking but not specific to this)
- C402 Malignant neoplasm: Long bones of lower limb
- C408 Malignant neoplasm: Overlapping lesion of bone and articular cartilage of limbs
- C409 Malignant neoplasm: Bone and articular cartilage of limb, unspecified
- C765 Malignant neoplasm of other and ill-defined sites: Lower limb
- C795 Secondary malignant neoplasm of bone and bone marrow
- D162 Benign neoplasm: Long bones of lower limb

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and

apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Optical coherence tomography (OCT) use in diabetic retinopathy referral

EBI recommendation

Referral to/ assessment in secondary care face to face treatment clinics should NOT be accepted for any patient with diabetic maculopathy grading of M1 or above without an OCT scan and assessment of images to filter referrals. The OCT scan can be performed at either: Diabetic eye screening (DES) OR Local referral refinement.

Coding

Code script

Inpatient

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ('C873', 'C911')

AND (APCS.Der_Diagnosis_All LIKE '%H36[08]%'

OR APCS.Der_Diagnosis_All LIKE '%E103%'

OR APCS.Der_Diagnosis_All LIKE '%E113%'

OR APCS.Der_Diagnosis_All LIKE '%E123%'

OR APCS.Der_Diagnosis_All LIKE '%E133%'

OR APCS.Der_Diagnosis_All LIKE '%E143%'

OR APCS.Der_Diagnosis_All LIKE '%E143%'

OR APCS.Der_Diagnosis_All LIKE '%O24[012349]%')

AND APCS.Admission_Method NOT LIKE '2%'

THEN '3B_OCT_in_Diabetic_Retinopathy'
```

Outpatient

```
WHEN (OPA.Der_Procedure_All LIKE '%C873%'
OR OPA.Der_Procedure_All LIKE '%C911%')
AND (OPA.Der_Diagnosis_All LIKE '%H36[08]%'
OR OPA.Der_Diagnosis_All LIKE '%E103%'
OR OPA.Der_Diagnosis_All LIKE '%E113%'
OR OPA.Der_Diagnosis_All LIKE '%E123%'
OR OPA.Der_Diagnosis_All LIKE '%E133%'
```

OR OPA.Der_Diagnosis_All LIKE '%E143%' OR OPA.Der_Diagnosis_All LIKE '%O24[012349]%') THEN '3B_OCT_in_Diabetic_Retinopathy'

Code Definitions

Procedure codes (OPCS)

- C873 Tomography evaluation of retina
- C911 Optical coherence tomography of anterior segment of eye

Diagnosis codes (ICD)

- H360 Diabetic retinopathy (must be assigned with, either directly in front of or directly below E10-E14 or O24)
- H368 Other retinal disorders in diseases classified elsewhere (must be assigned with, either directly in front of or directly below E10-E14 or O24)
- E103 Type 1 diabetes mellitus With ophthalmic complications
- E113 Type 2 diabetes mellitus With ophthalmic complications
- E123 Malnutrition-related diabetes mellitus With ophthalmic complications
- E133 Other specified diabetes mellitus With ophthalmic complications
- E143 Unspecified diabetes mellitus With ophthalmic complications
- O240 Diabetes mellitus in pregnancy: Pre-existing type 1 diabetes mellitus*
- O241 Diabetes mellitus in pregnancy: Pre-existing type 2 diabetes mellitus*
- O242 Diabetes mellitus in pregnancy: Pre-existing malnutrition-related diabetes mellitus*
- O243 Diabetes mellitus in pregnancy: Pre-existing diabetes mellitus, unspecified*
- O244 Diabetes mellitus arising in pregnancy*
- O249 Diabetes mellitus in pregnancy, unspecified*

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

^{*} Unlikely to be O24

-- Private Appointment Exclusion

ERCP in acute gallstone pancreatitis without cholangitis

EBI recommendation

Early endoscopic retrograde cholangiopancreatography (ERCP) for acute gallstone pancreatitis without cholangitis is not recommended, should only be performed if there is evidence of cholangitis or obstructive jaundice with imaging evidence of a stone in the common bile duct.

Coding

Code Script

-- APCS Procedure

WHERE 1=1

-- Main Procedure

AND apcs.[Der Procedure All] LIKE '%J43[12389]%'

-- Diagnosis

AND (APCs.[Der Diagnosis All] LIKE '%K851%')

-- With no APCE Procedure within 30 days

AND (CASE WHEN apcep.[Primary_Procedure_Code] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Primary_Procedure_Date])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_2] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_2])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_3] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_3])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_4] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_4])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_5] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission Date,[Procedure Date 5])<=3 THEN 1 ELSE 0

- END+
- CASE WHEN apcep.[Procedure_Code_6] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_6])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_7] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_7])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_8] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_8])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_9] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_9])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_10] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_10])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_11] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_11])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_12] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_12])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_13] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_13])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_14] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_14])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_15] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_15])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_16] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_16])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_17] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_17])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_18] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_18])<=3 THEN 1 ELSE 0 END +
- CASE WHEN apcep.[Procedure_Code_19] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission Date,[Procedure Date 19])<=3 THEN 1 ELSE 0

END+

CASE WHEN apcep.[Procedure_Code_20] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_20])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_21] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_21])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_22] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_22])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_23] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_23])<=3 THEN 1 ELSE 0 END +

CASE WHEN apcep.[Procedure_Code_24] LIKE '%J43[12389]%' AND datediff(dd,apcs.Admission_Date,[Procedure_Date_24])<=3 THEN 1 ELSE 0 END

)>0

Code Definitions

Procedure codes (OPCS)

- J431 Endoscopic retrograde cholangiopancreatography and biopsy of lesion of ampulla of Vater
- J432 Endoscopic retrograde cholangiopancreatography and biopsy of lesion of biliary or pancreatic system NEC
- J433 Endoscopic retrograde cholangiopancreatography and collection of bile
- J438 Other specified diagnostic endoscopic retrograde examination of bile duct and pancreatic duct
- J439 Unspecified diagnostic endoscopic retrograde examination of bile duct and pancreatic duct
- J451 Endoscopic retrograde pancreatography and biopsy of lesion of pancreas
- J452 Endoscopic retrograde pancreatography and collection of pancreatic juice
- J453 Endoscopic retrograde pancreatography through accessory ampulla of Vater
- J458 Other specified diagnostic endoscopic retrograde examination of pancreatic duct
- J459 Unspecified diagnostic endoscopic retrograde examination of pancreatic duct

Diagnosis codes (ICD)

K851 Biliary acute pancreatitis

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Needle biopsy of prostate

EBI recommendation

Traditionally needle biopsies would have been taken for diagnosis of prostate cancer. However, studies now show that multiparametric magnetic resonance imaging (mpMRI) scans, which produce a detailed picture of the prostate gland, can more accurately detect clinically significant prostate cancer compared to biopsy alone. This proposal details who should be referred, how they should be triaged, over what time period, and how they should be managed, including the type of imaging, how to report, the need for biopsy and how this should be performed.

Coding

Code script

Inpatient

WHEN LEFT(der.Spell_Dominant_Procedure,4) IN ('M702', 'M703')

AND (APCS.Der_Diagnosis_All LIKE '%R798%')

AND (NOT (APCS.Der_Diagnosis_All LIKE '%Z804%')

OP_APCS_Der_Diagnosis_All LIS_NULL)

OR APCS.Der_Diagnosis_All IS NULL)

THEN '31 Needle Biopsy Prostate'

Outpatient

WHEN OPA.Der_Procedure_All LIKE '%M70[23]%'

AND (NOT (OPA.Der_Diagnosis_All LIKE '%Z804%')

OR OPA.Der Diagnosis All IS NULL)

THEN '3I Needle Biopsy Prostate

Code Definitions

Procedure codes (OPCS)

Main

M702 Perineal needle biopsy of prostate

M703 Rectal needle biopsy of prostate

Other codes in policy

- U211 Magnetic resonance imaging NEC (code does not reflect multiparametric nature)
- Z422 Prostate (secondary to U211)
- H444 Examination of rectum under anaesthetic*
- H448 Other specified manipulation of rectum*
- * No codes available for this and no SNOMED CT cross map, but might be coded to these

Diagnosis codes (ICD)

Inclusion

R798 Other specified abnormal findings of blood chemistry (ode is not specific to PSA)

Exclusion

Z804 Family history of malignant neoplasm of genital organs (not specific to the prostate. Might be excluded as a secondary diagnosis.

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Surgical intervention for chronic rhinosinusitis

EBI recommendation

First-line treatment is with appropriate medical therapy, which should include intranasal steroids and nasal saline irrigation. In the case of CRSwNP a trial of a short course of oral steroids should also be considered. Where first-line medical treatment has failed patients should be referred for diagnostic confirmation and they then may be considered for endoscopic sinus surgery.

Coding

Code Script

```
WHEN ((apcs.der_procedure_all like '%E081%'
OR apcs.der_procedure_all like '%E1[257][123489]%'
OR apcs.der_procedure_all like '%E1[34][1-9]%'
OR apcs.der_procedure_all like '%E14[1-9]%'
OR apcs.der_procedure_all like '%E16[1289]%'
OR apcs.der_procedure_all like '%E641%')
AND apcs.der_procedure_all like '%Y76[12]%')
AND (der.Spell_Primary_Diagnosis like '%J310%'
OR der.Spell_Primary_Diagnosis like'J32[0123489]%'
OR der.Spell_Primary_Diagnosis like'J33[0189]%')
AND APCS.Admission_Method not like ('2%')
THEN '2C_sinus_surgery'
```

Code Definitions

Procedure codes (OPCS)

- E081 Polypectomy of internal nose
- E121 Ligation of maxillary artery using sublabial approach
- E122 Drainage of maxillary antrum using sublabial approach
- E123 Irrigation of maxillary antrum using sublabial approach

- E124 Transantral neurectomy of vidian nerve using sublabial approach
- E128 Other specified operations on maxillary antrum using sublabial approach
- E129 Unspecified operations on maxillary antrum using sublabial approach
- E131 Drainage of maxillary antrum NEC
- E132 Excision of lesion of maxillary antrum
- E133 Intranasal antrostomy
- E134 Biopsy of lesion of maxillary antrum
- E135 Closure of fistula between maxillary antrum and mouth
- E136 Puncture of maxillary antrum
- E137 Neurectomy of vidian nerve NEC
- E138 Other specified other operations on maxillary antrum
- E139 Unspecified other operations on maxillary antrum
- E141 External frontoethmoidectomy
- E142 Intranasal ethmoidectomy
- E143 External ethmoidectomy
- E144 Transantral ethmoidectomy
- E145 Bone flap to frontal sinus
- E146 Trephine of frontal sinus
- E147 Median drainage of frontal sinus
- E148 Other specified operations on frontal sinus
- E149 Unspecified operations on frontal sinus
- E151 Drainage of sphenoid sinus
- E152 Puncture of sphenoid sinus
- E153 Repair of sphenoidal sinus
- E154 Excision of lesion of sphenoid sinus
- E158 Other specified operations on sphenoid sinus
- E159 Unspecified operations on sphenoid sinus
- E161 Frontal sinus osteoplasty
- E162 Drainage of frontal sinus NEC
- E168 Other specified other operations on frontal sinus
- E169 Unspecified other operations on frontal sinus
- E171 Excision of nasal sinus NEC
- E172 Excision of lesion of nasal sinus NEC
- E173 Biopsy of lesion of nasal sinus NEC
- E174 Lateral rhinotomy into nasal sinus NEC
- E178 Other specified operations on unspecified nasal sinus
- E179 Unspecified operations on unspecified nasal sinus
- E641 Endoscopic extirpation of lesion of nasal cavity

- Y761 Functional endoscopic sinus surgery (secondary to one of the codes above)
- Y762 Functional endoscopic nasal surgery (secondary to one of the codes above)

Diagnosis codes (ICD)

- J310 Chronic rhinitis
- J320 Chronic maxillary sinusitis
- J321 Chronic frontal sinusitis
- J322 Chronic ethmoidal sinusitis
- J323 Chronic sphenoidal sinusitis
- J324 Chronic pansinusitis
- J328 Other chronic sinusitis
- J329 Chronic sinusitis, unspecified
- J330 Polyp of nasal cavity
- J331 Polypoid sinus degeneration
- J338 Other polyp of sinus
- J339 Nasal polyp, unspecified

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Scans for shoulder pain and guided injections for shoulder pain

EBI recommendation

Scans for Shoulder pain

X-rays should be used routinely as the first line of radiological investigation for the diagnosis of most routine shoulder pathology. This practice should be followed in primary, intermediate and secondary care. Primary care patients that are deemed urgent or have red flags should be referred urgently to the appropriate secondary care team.

Image Guided Injections for Shoulder pain

Evidence does not support the use of guided subacromial injections over unguided subacromial injections in the treatment of subacromial shoulder pain. Other image guided shoulder injections should only be offered under the guidance of a secondary care shoulder service.

Coding

Code Script

```
WHEN
           ((opa.Der Procedure All like '%U13[23456]%'
                OR opa. Der Procedure All like '%U21[1267]%'
                OR opa. Der Procedure All like '%U365%')
           AND (opa.Der Procedure All like '%Z54[289]%'
                OR opa. Der Procedure All like '%Z68[89]%'
                OR opa.Der Procedure All like '%Z81[123489]%'))
           AND
           ISNULL(opa.Age at Start of Episode SUS,opa.Der Age at CD
           S Activity Date) between 19 AND 120
           THEN '2W I shoulder imaging I'
           (opa.Der Procedure All like '%W90[34]%'
WHEN
           AND (opa.Der Procedure All like '%Y53[123456789]%'
                OR opa. Der Procedure All like '%Y681%'
                OR opa. Der Procedure All like '%Z81[34]%'))
```

AND ISNULL(opa.Age_at_Start_of_Episode_SUS,opa.Der_Age_at_CD S_Activity_Date) between 19 AND 120 THEN '2W II shoulder guided injections'

Code Definitions

Procedure codes (OPCS)

- U132 Ultrasound of bone
- U133 Magnetic resonance imaging of bone
- U134 Plain x-ray of joint
- U135 Plain x-ray of bone
- U136 Computed tomography of bone
- U211 Magnetic resonance imaging NEC
- U212 Computed tomography NEC
- U216 Ultrasound scan NEC
- U217 Plain x-ray NEC
- U365 Cone beam computed tomography NEC
- Z542 Rotator cuff of shoulder*
- Z548 Specified muscle of shoulder or upper arm NEC*
- Z549 Muscle of shoulder or upper arm NEC*
- Z688 Specified bone of shoulder girdle NEC*
- Z689 Bone of shoulder girdle NEC*
- Z811 Sternoclavicular joint*
- Z812 Acromioclavicular joint*
- Z813 Glenohumeral joint*
- Z814 Shoulder joint*
- Z818 Specified joint of shoulder girdle or arm NEC*
- Z819 Joint of shoulder girdle or arm NEC*
- * Secondary to one of the above U codes
- W903 Injection of the rapeutic substance into joint
- W904 Injection into joint NEC
- Y531 Approach to organ under radiological control**
- Y532 Approach to organ under ultrasonic control**
- Y533 Approach to organ under computed tomography scan control**
- Y534 Approach to organ under fluoroscopic control**

- Y535 Approach to organ under image intensifier**
- Y536 Approach to organ under video control**
- Y537 Approach to organ under magnetic resonance imaging control**
- Y538 Other specified approach to organ under image control**
- Y539 Unspecified approach to organ under image control**
- Y681 Approach to organ under contrast enhanced ultrasonic control**
- Z813 Glenohumeral joint**
- Z814 Shoulder joint**
- ** Secondary to one of the above W codes

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Arthroscopic shoulder decompression for subacromial pain

EBI recommendation

Recent research has indicated that in patients with pure subacromial impingement (with no other associated diagnoses such as rotator cuff tears, calcific tendinopathy and acromio-clavicular joint pain), non-operative management with a combination of exercise and physiotherapy is effective in the majority of cases. Patients suffering with persistent symptoms, despite appropriate non-operative management, should be given the option to choose decompression surgery.

Coding

Code script

```
WHEN ((LEFT(der.Spell_Dominant_Procedure,4) ='O291'
AND apcs.der_procedure_all like '%Y767%')
OR (LEFT(der.Spell_Dominant_Procedure,4) ='W844'
AND apcs.der_procedure_all like '%Z812%')
OR (LEFT(der.Spell_Dominant_Procedure,4) ='W572'
AND apcs.der_procedure_all like '%Z812%'))
AND apcs.der_diagnosis_all like '%M754%'
AND apcs.der_diagnosis_all not like '%M751%'
AND APCS.Admission_Method not like ('2%')
THEN 'L_should_decom'
```

Code Definitions

Procedure codes (OPCS)

Main

O291 Subacromial decompression

Y767 Arthroscopic approach to joint (must be supplementary to O291)

W844 Endoscopic decompression of joint (may be performed along with O291)

Z812 Acromioclavicular joint (secondary to W844)

W572 Endoscopic decompression of joint (may be performed along with O291)

Z812 Acromioclavicular joint (secondary to W572)

Potential

O291 Subacromial decompression (when Y767 is not included in the supplementary position this indicates an open procedure)

Diagnosis codes (ICD)

Includes

M754 Impingement syndrome of shoulder

Exclusions

M751 Rotator cuff syndrome (code for rotator cuff tear)

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Removal of benign skin lesions

EBI recommendation

Removal of benign skin lesions means treating asymptomatic lumps, bumps or tags on the skin that are not suspicious of cancer. Treatment carries a small risk of infection, bleeding or scarring and is not usually offered by the NHS if it is just to improve appearance. In certain cases, treatment (surgical excision or cryotherapy) may be offered if certain criteria are met.

Code Script

Code script

WHEN LEFT(der.Spell_Dominant_Procedure,4) in 'S063','S064','S066','S066','S067','S068','S069','S081','S082','S083','S088','S089','S091','S092','S093','S094','S095','S098','S099','S101','S102','S111','S112','B353','C101','C108','C109','C111','C112','C118','C119','C121','C122','C123','C124','C125','C126','C128','C129','D021','D022','D028','D029','E091','E092','E096','E098','E099','F011','F018','F019','F021','F022','F028','F029','N012','N013','N018','N019','N242','N271','N272','N273','N278','N279','P054','P058','P059','P061','P062','P063','P065','P068','P069','P111','P112','P113','P114','P118','P119','T291','T292','T293','T298','T298','T299')

AND not (apcs.der_diagnosis_all like '%C4[34][0123456789]%')
AND not (apcs.der_diagnosis_all like '%D0[34][0123456789]%' or apcs.der_diagnosis_all like '%L570%')
AND APCS.Admission_Method not like ('2%')
THEN 'F skin lesions'

Code Definitions

Procedure codes (OPCS)

- S063 Shave excision of lesion of skin of head or neck
- S064 Shave excision of lesion of skin NEC
- S065 Excision of lesion of skin of head or neck NEC
- S066 Re-excision of skin margins of head or neck
- S067 Re-excision of skin margins NEC

- S068 Other specified other excision of lesion of skin
- S069 Unspecified other excision of lesion of skin
- S081 Curettage and cauterisation of lesion of skin of head or neck
- S082 Curettage and cauterisation of lesion of skin NEC
- S083 Curettage of lesion of skin of head or neck NEC
- S088 Other specified curettage of lesion of skin
- S089 Unspecified curettage of lesion of skin
- S091 Laser destruction of lesion of skin of head or neck
- S092 Laser destruction of lesion of skin NEC
- S093 Photodestruction of lesion of skin of head or neck NEC
- S094 Infrared photocoagulation of lesion of skin of head or neck
- S095 Infrared photocoagulation of lesion of skin NEC
- S098 Other specified photodestruction of lesion of skin
- S099 Unspecified photodestruction of lesion of skin
- S101 Cauterisation of lesion of skin of head or neck NEC
- S102 Cryotherapy to lesion of skin of head or neck
- S111 Cauterisation of lesion of skin NEC
- S112 Cryotherapy to lesion of skin NEC
- B353 Extirpation of lesion of nipple
- C101 Excision of lesion of eyebrow
- C108 Other specified operations on eyebrow
- C109 Unspecified operations on eyebrow
- C111 Excision of lesion of canthus
- C112 Destruction of lesion of canthus
- C118 Other specified operations on canthus
- C119 Unspecified operations on canthus
- C121 Excision of lesion of eyelid NEC
- C122 Cauterisation of lesion of eyelid
- C123 Cryotherapy to lesion of eyelid
- C124 Curettage of lesion of eyelid
- C125 Destruction of lesion of eyelid NEC
- C126 Wedge excision of lesion of eyelid
- C128 Other specified extirpation of lesion of eyelid
- C129 Unspecified extirpation of lesion of eyelid
- D021 Excision of lesion of external ear
- D022 Destruction of lesion of external ear
- D028 Other specified extirpation of lesion of external ear
- D029 Unspecified extirpation of lesion of external ear

- E091 Excision of lesion of external nose
- E092 Destruction of lesion of external nose NEC
- E096 Laser destruction of lesion of external nose
- E098 Other specified operations on external nose
- E099 Unspecified operations on external nose
- F011 Excision of vermilion border of lip and advancement of mucosa of lip
- F018 Other specified partial excision of lip
- F019 Unspecified partial excision of lip
- F021 Excision of lesion of lip
- F022 Destruction of lesion of lip
- F028 Other specified extirpation of lesion of lip
- F029 Unspecified extirpation of lesion of lip
- N012 Excision of lesion of scrotum
- N013 Destruction of lesion of scrotum
- N018 Other specified extirpation of scrotum
- N019 Unspecified extirpation of scrotum
- N242 Operations on skin of male perineum NEC
- N271 Excision of lesion of penis
- N272 Cauterisation of lesion of penis
- N273 Destruction of lesion of penis NEC
- N278 Other specified extirpation of lesion of penis
- N279 Unspecified extirpation of lesion of penis
- P054 Excision of lesion of vulva NEC
- P058 Other specified excision of vulva
- P059 Unspecified excision of vulva
- P061 Laser destruction of lesion of vulva
- P062 Cryosurgery to lesion of vulva
- P063 Cauterisation of lesion of vulva
- P065 Excision of lesion of labia
- P068 Other specified extirpation of lesion of vulva
- P069 Unspecified extirpation of lesion of vulva
- P111 Excision of lesion of female perineum
- P112 Laser destruction of lesion of female perineum
- P113 Cauterisation of lesion of female perineum
- P114 Destruction of lesion of female perineum NEC
- P118 Other specified extirpation of lesion of female perineum
- P119 Unspecified extirpation of lesion of female perineum
- T291 Excision of umbilicus

- T292 Excision of urachus
- T293 Extirpation of lesion of umbilicus
- T298 Other specified operations on umbilicus
- T299 Unspecified operations on umbilicus

Diagnosis codes (ICD)

Exclusions

- C430 Malignant melanoma of lip
- C431 Malignant melanoma of eyelid, including canthus
- C432 Malignant melanoma of eyelid, including canthus
- C433 Malignant melanoma of other and unspecified parts of face
- C434 Malignant melanoma of scalp and neck
- C435 Malignant melanoma of trunk
- C436 Malignant melanoma of upper limb, including shoulder
- C437 Malignant melanoma of lower limb, including hip
- C438 Overlapping malignant melanoma of skin
- C439 Malignant melanoma of skin, unspecified
- C440 Other malignant neoplasms of skin of lip
- C441 Other malignant neoplasms of skin of eyelid, including canthus
- C442 Other malignant neoplasms of skin of ear and external auricular canal
- C443 Other malignant neoplasms of skin of other and unspecified parts of face
- C444 Other malignant neoplasms of skin of scalp and neck
- C445 Other malignant neoplasms of skin of trunk
- C446 Other malignant neoplasms of skin of upper limb, including shoulder
- C447 Other malignant neoplasms of skin of lower limb, including hip
- C448 Other malignant neoplasms of skin Overlapping lesion of skin
- C449 Other malignant neoplasms of skin, unspecified
- D030 Melanoma in situ of lip
- D031 Melanoma in situ of eyelid, including canthus
- D032 Melanoma in situ of ear and external auricular canal
- D033 Melanoma in situ of other and unspecified parts of face
- D034 Melanoma in situ of scalp and neck
- D035 Melanoma in situ of trunk
- D036 Melanoma in situ of upper limb, including shoulder
- D037 Melanoma in situ of lower limb, including hip
- D038 Melanoma in situ of other sites
- D039 Melanoma in situ, unspecified
- D040 Carcinoma in situ of skin of lip

- D041 Carcinoma in situ of skin of eyelid, including canthus
- D042 Carcinoma in situ of skin of ear and external auricular canal
- D043 Carcinoma in situ of skin of other and unspecified parts of face
- D044 Carcinoma in situ of skin of scalp and neck
- D045 Carcinoma in situ of skin of trunk
- D046 Carcinoma in situ of skin of upper limb, including shoulder
- D047 Carcinoma in situ of skin of lower limb, including hip
- D048 Carcinoma in situ of skin of other sites
- D049 Carcinoma in situ of skin, unspecified
- L570 Actinic keratosis

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category \$\infty\$'02'

Adult Snoring Surgery (in the absence of OSA)

EBI recommendation

Snoring surgery should not be offered for snoring (in people who don't have obstructive sleep apnoea (OSA)) as it does not provide any additional benefit compared to non-surgical treatments and has severe complications.

Coding

Code script

WHEN (LEFT(der.Spell_Dominant_Procedure,4) in ('F324','F325','F326')
AND der.Spell Primary Diagnosis like '%R065%')

AND apcs.der diagnosis all not like '%G473%'

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS

Activity Date) between 19 and 120

AND APCS.Admission_Method not like ('2%')

THEN 'A_snoring'

Code Definitions

Procedure codes (OPCS)

Main

F324 Operations on uvula NEC

F325 Uvulopalatopharyngoplasty

F326 Uvulopalatoplasty

Potential

F328 Other specified other operations on palate

Y067 Radiofrequency excision of lesion of organ NOC (Secondary to F328)

Y081 Laser excision of organ NOC (Secondary to F328)

Diagnosis codes (ICD)

Includes

R065 Mouth breathing

Exclusion

G473 Sleep apnoea

Additional Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Tonsillectomy for recurrent tonsillitis

EBI recommendation

Recurrent sore throats are a very common condition that present a considerable health burden. In most cases they can be treated with conservative measures. In some cases, where there are recurrent, documented episodes of acute tonsillitis that are disabling to normal function, then tonsillectomy is beneficial, but it should only be offered when the frequency of episodes set out by the Scottish Intercollegiate Guidelines Network criteria are met.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('F341','F342','F343','F344','F345','F346','F347','F348','F349','F361')

AND (apcs.der_diagnosis_all like '%J030%'

OR apcs.der_diagnosis_all like '%J039%'

OR apcs.der_diagnosis_all like '%J350%')

AND not (apcs.der_diagnosis_all like '%C[0-8][0-9]%'

OR apcs.der_diagnosis_all like '%C9[0-7]%')

AND not (apcs.der_diagnosis_all like '%G473%'

OR apcs.der_diagnosis_all like '%G473%'

OR apcs.der_diagnosis_all like '%J36%'

OR apcs.der_diagnosis_all like '%J390%')

AND APCS.Admission_Method not like ('2%')

THEN 'H tonsil'
```

Code Definitions

Procedure codes (OPCS)

F341 Bilateral dissection tonsillectomy
 F342 Bilateral guillotine tonsillectomy
 F343 Bilateral laser tonsillectomy
 F344 Bilateral excision of tonsil NEC

- F345 Excision of remnant of tonsil
- F346 Excision of lingual tonsil
- F347 Bilateral coblation tonsillectomy
- F348 Other specified excision of tonsil
- F349 Unspecified excision of tonsil
- F351 Bilateral intracapsular tonsillectomy NEC
- F352 Bilateral intracapsular coblation tonsillectomy
- F358 Other specified intracapsular excision of tonsil
- F359 Unspecified intracapsular excision of tonsil
- F361 Destruction of tonsil

Includes

- J030 Streptococcal tonsillitis
- J038 Acute tonsillitis due to other specified organisms
- J039 Acute tonsillitis, unspecified
- J350 Chronic tonsillitis

Exclusions

C00-C97 Malignant neoplasms

G473 Sleep apnoea

J36X Peritonsillar abscess

J390 Retropharyngeal and parapharyngeal abscess

Additional Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

Trigger finger release

EBI recommendation

Trigger finger often resolves over time and is often a nuisance rather than a serious problem. If treatment is necessary steroid injection can be considered. Surgery should only be offered in specific cases according to NICE accredited guidelines by the British Society for Surgery to the Hand, where alternative measures have not been successful and persistent or recurrent triggering, or a locked finger occurs.

Coding

WHEN

Code script

```
LEFT(der.Spell Dominant Procedure,4) in
('T691','T692','T698','T699','T701','T702','T711','T718','T719','T723','T728','T72
9')
           AND (der.Spell Primary Diagnosis like '%M653%'
                 OR der. Spell Primary Diagnosis like '%M6584%'
                 OR der. Spell Primary Diagnosis like '%M6594%')
           AND
           isnull(APCS.Age At Start of Spell SUS,APCS.Der Age at CDS
           Activity Date) between 19 AND 120
           AND APCS. Admission Method not like ('2%')
           THEN 'P trigger fing'
```

Code Definitions

Procedure codes (OPCS)

Main

T691 Primary tenolysis T692 Revision of tenolysis T698 Other specified freeing of tendon T699 Unspecified freeing of tendon T701 Subcutaneous tenotomy T702 Tenotomy NEC

- T711 Tenosynovectomy
- T718 Other specified excision of sheath of tendon
- T719 Unspecified excision of sheath of tendon
- T723 Release of constriction of sheath of tendon (this is the code that should be used for this procedure)
- T728 Other specified other operations on sheath of tendon
- T729 Unspecified other operations on sheath of tendon
- Z563 Flexor digitorum superficialis (secondary to T code)
- Z564 Flexor digitorum profundus (secondary to T code)
- Z894 Hand NEC (secondary to T code)
- Z895 Thumb NEC (secondary to T code)
- Z896 Finger NEC (secondary to T code)
- Z897 Multiple digits of hand NEC (secondary to T code)

Potential

- T703 Adjustment to muscle origin of tendon
- T705 Lengthening of tendon
- T708 Other specified adjustment to length of tendon
- T709 Unspecified adjustment to length of tendon

Diagnosis codes (ICD)

- M653 Trigger finger
- M6584 Other synovitis and tenosynovitis Hand
- M6594 Synovitis and tenosynovitis, unspecified Hand

Exclusions

```
apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'
```

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion

AND apcs. Administrative Category \$\infty\$'02'

Troponin test

EBI recommendation

Troponin blood testing should be used to diagnose acute myocardial infarction. It should only be used in cases where a clinical diagnosis of acute coronary syndrome or myocarditis is suspected or for prognostic purposes when pulmonary embolism is confirmed.

Coding

Code Script

WHEN

ecds.Der EC Investigation All like '%105000003%'

OR ecds.Der EC Investigation All like '%121870001%'

OR ecds.Der EC Investigation All like '%121871002%' OR ecds.Der EC Investigation All like '%313724009%'

OR ecds.Der EC Investigation All like '%313616005%' OR ecds.Der EC Investigation All like '%314068007%'

OR ecds.Der EC Investigation All like '%166794009%' OR ecds.Der EC Investigation All like '%105001004%'

OR ecds.Der EC Investigation All like '%784261000000103%'

THEN '2F Troponintest'

Code Definitions

Diagnosis codes (ICD)

R070 Pain in throat

R071 Chest pain on breathing

R072 Precordial pain

R073 Other chest pain

R074 Chest pain, unspecified

SNOMED CT

105000003 Troponin measurement 121870001 Troponin I measurement 121871002 Troponin T measurement
313724009 Plasma troponin I measurement
313616005 Serum troponin I measurement
314068007 Plasma troponin T measurement
166794009 Serum troponin T measurement
105001004 Troponin T cardiac measurement
784261000000103 High sensitivity cardiac troponin T measurement

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

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-- Private Appointment Exclusion

Varicose vein surgery

EBI recommendation

Intervention, in terms of endovenous thermal (laser ablation, and radiofrequency ablation), ultrasound guided foam sclerotherapy, open surgery (ligation and stripping), is cost effective for managing symptomatic varicose veins compared to no treatment or the use of compression hosiery. For patients whose veins are purely cosmetic and are not associated with any symptoms do not refer for NHS treatment.

Coding

Code script

```
WHEN LEFT(der.Spell_Dominant_Procedure,4) in ('L841','L842','L843','L844','L845','L846','L848','L849','L851','L852','L853','L858','L859','L861','L862','L863','L868','L869','L871','L872','L873','L874','L875','L876','L877','L878','L879','L881','L882','L883','L888','L889')
```

```
AND (der.Spell_Primary_Diagnosis like '%I83[0129]%'
OR der.Spell_Primary_Diagnosis like '%O220%'
OR der.Spell_Primary_Diagnosis like '%O878%'
OR der.Spell_Primary_Diagnosis like '%Q278%')
AND APCS.Admission_Method not like ('2%')
THEN 'Q_var_veins'
```

Code Definitions

Procedure codes (OPCS)

- L841 Combined operations on primary long saphenous vein
- L842 Combined operations on primary short saphenous vein
- L843 Combined operations on primary long and short saphenous vein
- L844 Combined operations on recurrent long saphenous vein
- L845 Combined operations on recurrent short saphenous vein
- L846 Combined operations on recurrent long and short saphenous vein
- L848 Other specified combined operations on varicose vein of leg
- L849 Unspecified combined operations on varicose vein of leg

- L851 Ligation of long saphenous vein
- L852 Ligation of short saphenous vein
- L853 Ligation of recurrent varicose vein of leg
- L858 Other specified ligation of varicose vein of leg
- L859 Unspecified ligation of varicose vein of leg
- L861 Injection of sclerosing substance into varicose vein of leg NEC
- L862 Ultrasound guided foam sclerotherapy for varicose vein of leg
- L863 Injection of glue into varicose vein of leg
- L868 Other specified injection into varicose vein of leg
- L869 Unspecified injection into varicose vein of leg
- L871 Stripping of long saphenous vein
- L872 Stripping of short saphenous vein
- L873 Stripping of varicose vein of leg NEC
- L874 Avulsion of varicose vein of leg
- L875 Local excision of varicose vein of leg
- L876 Incision of varicose vein of leg
- L877 Transilluminated powered phlebectomy of varicose vein of leg
- L878 Other specified other operations on varicose vein of leg
- L879 Unspecified other operations on varicose vein of leg
- L881 Percutaneous transluminal laser ablation of long saphenous vein
- L882 Radiofrequency ablation of varicose vein of leg
- L883 Percutaneous transluminal laser ablation of varicose vein of leg NEC
- L888 Other specified transluminal operations on varicose vein of leg
- L889 Unspecified transluminal operations on varicose vein of leg

Diagnosis codes (ICD)

- 1830 Varicose veins of lower extremities with ulcer
- 1831 Varicose veins of lower extremities with inflammation
- 1832 Varicose veins of lower extremities with both ulcer and inflammation
- 1839 Varicose veins of lower extremities without ulcer or inflammation
- O220 Varicose veins of lower extremity in pregnancy
- O878 Other venous complications in the puerperium (this code is used to classify conditions puerperal varicose veins, but also classifies other venous puerperal complications)
- Q278 Other specified congenital malformations of peripheral vascular system (this code is used to classify congenital varicose veins, but also classifies other peripheral vascular complications)

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

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-- Private Appointment Exclusion

Vertebral augmentation (vertebroplasty or kyphoplasty) for painful osteoporotic vertebral fractures

EBI recommendation

Vertebroplasty (VP) or kyphoplasty (KP) should be offered as a treatment for painful osteoporotic vertebral fractures on a case-by-case basis.

Coding

Code Script

WHEN LEFT

LEFT(der.Spell_Dominant_Procedure,4) in ('V444','V445')

AND der.Spell Primary Diagnosis like '%M80[01234589]%'

AND

isnull(APCS.Age_At_Start_of_Spell_SUS,APCS.Der_Age_at_CDS

_Activity_Date) between 19 AND 120

THEN '2V_vertebroplasty'

Code Definitions

Procedure codes (OPCS)

V444 Vertebroplasty of fracture of spine

V445 Balloon kyphoplasty of fracture of spine

Diagnosis codes (ICD)

M800 Postmenopausal osteoporosis with pathological fracture

M801 Postoophorectomy osteoporosis with pathological fracture

M802 Osteoporosis of disuse with pathological fracture

M803 Postsurgical malabsorption osteoporosis with pathological fracture

M804 Drug-induced osteoporosis with pathological fracture

M805 Idiopathic osteoporosis with pathological fracture

M808 Other osteoporosis with pathological fracture

M809 Unspecified osteoporosis with pathological fracture

Exclusions

apcs.der_diagnosis_all not like '%C[0-9][0-9]%' and apcs.der_diagnosis_all not like '%D0%' and apcs.der_diagnosis_all not like '%D3[789]%' and apcs.der_diagnosis_all not like '%D4[012345678]%'

This code captures code in the ranges C00-C99, D00-D09 and D37-D48. Age range: the codes use the following age ranges 0-18 for children and 19-120 for adults.

-- Private Appointment Exclusion