

Unofficial PRR and CPT Code Guide

There has been some recent national dialogue about the possibility of converting the PRR codes used for logging of podiatric surgical and medical experiences during residency and for surgical board certification to be aligned with CPT codes, in part, to potentially provide some education to residents with respect to coding/billing.

This is unlikely to officially occur for a number of reasons, but a compromise might be as follows which describes the CPT codes that might be most likely associated with PRR codes.

- Note that >50% of PRR codes are potentially associated with multiple different CPT codes.
- Also note that several PRR codes are not associated with any specific CPT code.

This has also been combined with highlights from the CPME proper logging guide to further educate residents on appropriate logging.

- **THIS IS ABSOLUTELY NOT INTENDED TO SERVE AS BILLING ADVICE OR A BILLING GUIDE FOR RESIDENTS AND PODIATRIC FOOT/ANKLE SURGEONS.**
- **IT IS ALSO ABSOLUTELY NOT INTENDED TO SERVE AS A SUBSTITUTE FOR THE CPME PROPER LOGGING GUIDE WHICH IS MORE COMPREHENSIVE. THIS UNOFFICIAL GUIDE PROVIDES HIGHLIGHTS AND COMMONLY OBSERVED MISTAKES. THE FULL PROPER LOGGING GUIDE CAN BE FOUND AT: <https://www.cpme.org/wp-content/uploads/2024/08/Proper-Logging-Guide-May-2023.pdf>.**

PRR code	PRR description	Might possibly be associated with one of CPT codes:	CPME Proper Logging Guide notes
Category 1 Digital Surgery			*Generally speaking, both the hallux and lesser toe phalanges count as digital surgeries.
1.1	Partial ostectomy/exostectomy	-28124: Partial excision phalanx of toe -28153: Resection of condyles from distal phalanges -28160: Hemiphalangectomy of toe -28126: Partial or complete excision of phalangeal base	
1.2	Phalangectomy	-28150: Phalangectomy of toe	
1.3	Arthroplasty (interphalangeal joint [IPJ])	-28285: Hammertoe correction -28126: Partial or complete excision of phalangeal base	
1.4	Implant (IPJ) (Silastic implant or spacer)	-No specific CPT code for a digital implant. -28285: Hammertoe correction	

1.5	Diaphysectomy	-28285: Hammertoe correction -28312: Lesser digit phalangeal osteotomy	
1.6	Phalangeal osteotomy	-28312: Lesser digit phalangeal osteotomy -28310: Hallux phalangeal osteotomy	-May be logged to describe performance of an additional Akin phalangeal osteotomy with a category 2 first metatarsal osteotomy. This is <u>not</u> considered fragmentation. -But may not be used in conjunction with 2.1.1, 2.1.3, 2.1.7, 2.1.8, 2.2.1, 2.2.2, 2.2.6, 2.2.7, or 2.3.4.
1.7	Fusion (IPJ)	-28755: Hallux IPJ arthrodesis -28285: Hammertoe correction	
1.8	Amputation	-28820: MPJ disarticulation -28825: Partial digital amputation	-Includes hallux and lesser digits. -May not be logged in conjunction with 1.10, 2.3.4, 2.3.6, 3.8, 4.4, or 4.10.
1.9	Management of osseous tumor/neoplasm	-28175: Radical resection of tumor from phalanx of toe -28108: Excision or curettage of bone cyst or benign tumor of the phalanges	
1.10	Management of bone/joint infection	-28820: MPJ disarticulation -28825: Partial digital amputation -28022: Arthrotomy of interphalangeal joint -20220: Bone biopsy with Jamshidi needle -20700: Antibiotic bead delivery -20700, 20702 and 20704: Antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively. -20701, 20703, 20705: Removal of antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	-May not be logged in conjunction with 1.8 or 3.8.
1.11	Open management of digital fracture/dislocation	-28675: Open repair of IPJ dislocation including internal fixation -28666: Percutaneous fixation of IPJ dislocation	

		-28525: Open treatment of lesser digital fracture including internal fixation -28505: Open treatment of hallux fracture including internal fixation -28494: Percutaneous fixation of hallux fracture	
1.12	Revision/repair of surgical outcome	-No specific CPT for revision of digital procedures. -Revisional procedures might be logged with the 78- modifier to indicate unrelated procedure during the global period.	
1.13	Other osseous digital procedure not listed above	-No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
Category 2 Hallux Valgus Surgery			-Generally speaking, only one category 2 procedure may be logged per foot per case.
2.1.1	Bunionectomy (partial ostectomy/Silver procedure), with or without capsulotendon balancing procedure	-28290: Correction of hallux valgus by simple exostectomy	
2.1.2	(Procedure code no longer used)	N/A	
2.1.3	Bunionectomy with phalangeal osteotomy	-28298: Correction of hallux valgus by phalanx osteotomy	
2.1.4	Bunionectomy with distal first metatarsal osteotomy	-28296: Correction of hallux valgus with metatarsal osteotomy	
2.1.5	Bunionectomy with first metatarsal base or shaft osteotomy	-28296: Correction of hallux valgus with metatarsal osteotomy -28308: First metatarsal osteotomy	
2.1.6	Bunionectomy with first metatarsocuneiform fusion	-29297: Correction of hallux valgus by Lapidus -28740: Arthrodesis of single tarsometatarsal joint	
2.1.7	Metatarsophalangeal joint (MPJ) fusion	-28750: 1 st MPJ arthrodesis	
2.1.8	MPJ implant	-28293: 1 st MPJ implant	
2.1.9	MPJ arthroplasty	-28293: Keller, McBride, or Mayo procedure	

		-28111: Osteotomy or complete excision of the first metatarsal head	
2.1.10	Buionectomy with double correction with osteotomy and/or arthrodesis	-28299: Correction of hallux valgus by double osteotomy	
Category 2 Hallux Limitus Surgery			
2.2.1	Cheilectomy	-28289: Hallux rigidus correction with cheilectomy	
2.2.2	Joint salvage with phalangeal osteotomy (Kessel-Bonney, enclavement)	-28298: Correction of hallux valgus by phalanx osteotomy	
2.2.3	Joint salvage with distal metatarsal osteotomy	-28296: Correction of hallux valgus with metatarsal osteotomy	
2.2.4	Joint salvage with first metatarsal shaft or base osteotomy	-28296: Correction of hallux valgus with metatarsal osteotomy -28308: First metatarsal osteotomy	
2.2.5	Joint salvage with first metatarsocuneiform fusion	-29297: Correction of hallux valgus by Lapidus -28740: Arthrodesis of single tarsometatarsal joint	
2.2.6	MPJ fusion	-28750: 1 st MPJ arthrodesis	
2.2.7	MPJ implant	-28293: 1 st MPJ implant	
2.2.8	MPJ arthroplasty	-28293: Keller, McBride, or Mayo procedure	
Category 2 Other First Ray Surgery			
2.3.1	Tendon transfer/lengthening/procedure	-28760: Jones tenosuspension including hallux IPJ arthrodesis -28294: Correction of hallux valgus with tendon transplant	
2.3.2	Osteotomy (e.g., dorsiflexory)	-28306: First metatarsal osteotomy with angular correction -28307: First metatarsal osteotomy with angular correction with autograft	
2.3.3	Metatarsocuneiform fusion (other than for hallux valgus or hallux limitus)	-29297: Correction of hallux valgus by Lapidus	

		- 28740 : Arthrodesis of single tarsometatarsal joint	
2.3.4	Amputation	- 28810 : Single ray resection (toe and metatarsal) - 28122 : Partial excision of metatarsal bone	-May not be logged in conjunction with 2.3.6 or 3.8.
2.3.5	Management of osseous tumor/neoplasm (with or without bone graft)	- 28104 : Excision or curettage of bone cyst or tumor - 28106 : Excision or curettage of bone cyst or tumor with autograft - 28107 : Excision or curettage of bone cyst or tumor with allograft	
2.3.6	Management of bone/joint infection (with or without bone graft)	- 28810 : Single ray resection (toe and metatarsal) - 28122 : Partial excision of metatarsal bone - 28005 : I&D of foot involving bone - 20220 : Bone biopsy with Jamshidi needle - 20240 : Superficial open biopsy - 20700, 20702 and 20704 : Antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively. - 20701, 20703, 20705 : Removal of antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	-May not be logged in conjunction with 1.8, 2.3.4, or 3.8.
2.3.7	Open management of fracture or MPJ dislocation	- 28645 : Open repair of MPJ dislocation including internal fixation - 28636 : Percutaneous fixation of MPJ dislocation - 28531 : Open repair of sesamoid fracture including internal fixation - 28485 : Open repair of metatarsal fracture including internal fixation - 28476 : Percutaneous fixation of metatarsal fracture	
2.3.8	Corticotomy/callus distraction	- 28306 : First metatarsal osteotomy with angular correction	

		- 28307 : First metatarsal osteotomy with angular correction with autograft - 20690 : Uniplanar external fixation application	
2.3.9	Revision/repair of surgical outcome (e.g. non-union, hallux varus)	- No specific CPT for revision of first ray procedures , although 28322 might be used for repair of a metatarsal non-union or malunion. -Revisional procedures might be logged with the 78- modifier to indicate unrelated procedure during the global period.	
2.3.10	Other first ray procedure not listed above	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
Category 3 Other Soft Tissue Foot Surgery			
3.1	Excision of ossicle/sesamoid	- 28315 : 1 st MPJ sesamoidectomy	-May not be used in conjunction with a category 2 case or a category 4 case.
3.2	Excision of neuroma	- 28080 : Excision of interdigital neuroma - 64701 : Digital neuroplasty - 64704 : Neuroplasty of foot - 64720 : Decompression of a plantar digital nerve	
3.3	Removal of deep foreign body (excluding hardware removal)	- 28190 : Foreign body removal subcutaneous - 28292 : Foreign body removal deep - 28193 : Foreign body removal complicated	
3.4	Plantar fasciotomy	- 28250 : Division of the plantar fascia - 28060 : Partial plantar fasciectomy - 28062 : Radical plantar fasciectomy	-May include open, endoscopic or minimally incision approaches. -May not include PRP or Topaz. -Includes resection of a spur if performed. -May not be used in conjunction with 3.9.
3.5	Lesser MPJ capsulotendon balancing	- 28270 : MPJ capsulotomy - 28285 : Correction hammertoe	-Does not include percutaneous procedures.

		- 28313 : Reconstruction of angular deformity of toe with soft tissue procedure (i.e. plantar plate)	-May not be used in conjunction with 3.6, 3.7, 4.2, 4.3, 4.5, 4.6, or 4.7.
3.6	Tendon repair, lengthening, or transfer involving the forefoot (including digital flexor digitorum longus transfer)	- 28320 : Open flexor tenotomy - 28234 : Open extensor tenotomy - 28313 : Reconstruction of angular deformity of toe with soft tissue procedure	-Does not include percutaneous procedures. -May not be used in conjunction with 3.5, 3.7, or 4.2.
3.7	Open management of dislocation (MPJ/tarsometatarsal)	- 28645 : Open repair of MPJ dislocation including internal fixation - 28615 : Open treatment of tarsometatarsal dislocation including internal fixation	-Might best describes plantar plate repairs. -May not be used in conjunction with 3.5, 3.6, 4.2, 4.13, or 4.15. -Can be used in conjunction with a category 1 procedure. -May not be used with percutaneous procedures.
3.8	Incision and drainage/wide debridement of soft tissue infection (includes foot, ankle or leg)	- 27603 Incision and drainage of leg or ankle; deep abscess or hematoma - 27604 Incision and drainage of leg or ankle; infected bursa - 28001 : Foot I&D of bursa - 28002 : Foot I&D below fascia of a single space - 28003 : Foot I&D below fascia of multiple compartments - 13160 : Delayed primary closure	-May not be used in conjunction with 1.8, 1.10, 2.3.4, 2.3.6, 3.12, 3.17, 4.4, 4.10, 4.11, 5.1.1., 5.4.6, or 5.4.7. -Includes bone biopsy if performed. -May be logged in conjunction with an amputation if at a separate anatomic location.
3.9	Plantar fasciectomy/plantar fibroma resection	- 28250 : Division of the plantar fascia - 28060 : Partial plantar fasciectomy - 28062 : Radical plantar fasciectomy	-May not be used in conjunction with 3.4. -Does not include TOPAZ or PRP (these are 6.14).
3.10	Excision of soft tissue tumor/mass (without reconstruction surgery; includes foot, ankle or leg)	- 28043 : Foot tumor excision subcutaneous - 28045 : Foot tumor excision deep - 27630 : Excision of lesion of tendon sheath or capsule	
3.11	(procedure code no longer used)	N/A	
3.12	Plastic surgery techniques (including skin graft, skin plasty, flaps, syndactylization, desyndactilization, and debulking procedures limited to the forefoot)	- 28360 : Cleft foot reconstruction - 28345 : De-syndactyly reconstruction - 28344 : Polydactyly reconstruction - 28340 : Macrodactyly reconstruction	-Does not include synthetic or biologic graft application.

		-28286: Cock-up fifth toe correction with plastic skin closure -28285: Syndactylization -14040: Adjacent tissue transfer <10cm ² -14041: Adjacent tissue transfer 10-30cm ² -14300: Adjacent tissue transfer >30cm ² -14350: Filleted toe flap	
3.13	Microscopic nerve/vascular repair (forefoot only)	-64727: Internal neurolysis requiring use of a microscope -The CPT code +69990 is often used as an add-on to indicate that a microscope was utilized.	
3.14	Other soft tissue procedures not listed above (limited to the foot)	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
3.15	(procedure code no longer used)	N/A	
3.16	External neurolysis/decompression (including tarsal tunnel)	-28035: Tarsal tunnel release -28055: Neurectomy -64701: Digital neuroplasty -64704: Neuroplasty of foot -64720: Decompression of a plantar digital nerve	-Multiple nerve decompressions count as a single procedure.
3.17	Decompression of compartment syndrome	-27600 Decompression fasciotomy of anterior and/or lateral leg -27892: Decompression fasciotomy of anterior and/or lateral leg with debridement of muscle -27601 Decompression fasciotomy of posterior compartment(s) of the leg only -27893: Decompression fasciotomy of posterior compartment(s) of the leg only with debridement of muscle -27602 Decompression fasciotomy of anterior and/or lateral and posterior compartments of the leg -27894: Decompression fasciotomy of anterior and/or lateral and posterior	

		compartments of the leg with debridement of muscle - 28008 : Fasciotomy of foot and/or toe	
Category 4 Other Osseous Foot Surgery			
4.1	Partial ostectomy (including the talus and calcaneus) (includes foot, ankle or leg)	- 28288 : Metatarsal head ostectomy or exostectomy - 28120 : Partial excision of talus or calcaneus - 28118 : Ostectomy of calcaneus - 28119 : Ostectomy of a calcaneal spur - 27635 : Partial excision of bone cyst or benign tumor from tibia or fibula - 27637 : Partial excision of bone cyst or benign tumor from tibia or fibula with autograft - 27638 : Partial excision of bone cyst or benign tumor from tibia or fibula with allograft - 27640 : Partial excision of tibia - 27641 : Partial excision of fibula	-May not be used in conjunction with 3.4, 2.9, 4.2, 4.3, 4.5, 4.6, or 4.7. -Includes os trigonum excision.
4.2	Lesser MPJ arthroplasty	- 28270 : MPJ capsulotomy - 28126 : Partial or complete excision of phalangeal base - 29112 : Complete excision of second, third and/or fourth metatarsal head - 28113 : Complete excision of fifth metatarsal head - 28114 : Complete excision of all metatarsal heads (including first)	-May not be used in conjunction with 3.5, 3.6, 3.7, 4.1, 4.3, 4.4, 4.5, 4.6, or 4.7.
4.3	Bunionectomy of the fifth metatarsal without osteotomy	- 28110 : Partial excision of fifth metatarsal head for bunionette - 28288 : Metatarsal head ostectomy	
4.4	Metatarsal head resection (single or multiple)	- 29112 : Complete excision of second, third and/or fourth metatarsal head - 28113 : Complete excision of fifth metatarsal head	-Counts as one procedure no matter how many metatarsal heads assuming they are adjacent.

		-28114: Complete excision of all metatarsal heads (including first)	
4.5	Lesser MPJ implant	-No specific CPT for lesser MPJ implants.	
4.6	Central metatarsal osteotomy	-28308: Lesser metatarsal osteotomy -28309: Multiple metatarsal osteotomies	
4.7	Bunionectomy of the fifth metatarsal with osteotomy	-28308: Lesser metatarsal osteotomy	
4.8	Open management of lesser metatarsal fracture(s)	-28645: Open repair of MPJ dislocation including internal fixation -28636: Percutaneous fixation of MPJ dislocation -28485: Open repair of metatarsal fracture including internal fixation -28476: Percutaneous fixation of metatarsal fracture	-Multiple fractures count as a single procedure
4.9	Harvesting of bone graft (includes foot, ankle, or leg)	-20900: Bone graft harvest (minor/small/cancellous) -20902: Bone graft harvest (major/cortical)	
4.10	Amputation (lesser ray, transmetatarsal amputation)	-28805: Transmetatarsal amputation -28810: Single ray resection (toe and metatarsal) -28122: Partial excision of metatarsal bone -28140: Metatarsectomy	
4.11	Management of bone/joint infection distal to the tarsometatarsal joints (with or without bone graft)	-28005: I&D of foot involving bone -20220: Bone biopsy with Jamshidi needle -20700: Antibiotic bead delivery -28805: Transmetatarsal amputation -28810: Single ray resection (toe and metatarsal) -28122: Partial excision of metatarsal bone -28140: Metatarsectomy -28005: I&D of foot involving bone -20220: Bone biopsy with Jamshidi needle	

		-20240: Superficial open biopsy -20700, 20702 and 20704: Antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively. -20701, 20703, 20705: Removal of antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	
4.12	Management of bone tumor/neoplasm distal to the tarsometatarsal joints (with or without bone graft)	-28104: Excision or curettage of bone cyst or benign tumor from metatarsal -28016: Excision or curettage of bone cyst or benign tumor from metatarsal with autograft -28107: Excision or curettage of bone cyst or benign tumor from metatarsal with allograft	
4.13	Open management of tarsometatarsal fracture/dislocation	-28615: Open treatment of tarsometatarsal dislocation including internal fixation -28606: Percutaneous fixation of tarsometatarsal dislocation	-Includes metatarsal-cuneiform and metatarsal-cuboid fixation.
4.14	Multiple osteotomy management of metatarsus adductus	-28308: Lesser metatarsal osteotomy -28309: Multiple metatarsal osteotomies	
4.15	Tarsometatarsal fusion	-28740: Single joint tarsometatarsal arthrodesis -28730: Multiple joint tarsometatarsal arthrodesis	- Not to be used for hallux valgus or hallux rigidus correction.
4.16	Corticotomy/callus distraction of lesser metatarsal	-28308: Lesser metatarsal osteotomy -20690: External fixation application	
4.17	Revision/repair of surgical outcome in the forefoot	-No specific CPT for revision of first ray procedures, although 28322 might be used for repair of a metatarsal non-union or malunion. -Revisional procedures might be logged with the 78- modifier to indicate unrelated procedure during the global period.	

4.18	Other osseous procedure not listed above (distal to the tarsometatarsal joint)	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
4.19	Detachment/reattachment of Achilles tendon with partial ostectomy	- 27652 : Secondary repair of Achilles tendon - 28120 : Partial excision calcaneus	-May not be used in conjunction with 4.1 or 5.3.1.
Category 5 Elective Soft Tissue			
5.1.1	Plastic surgery techniques involving the midfoot, rearfoot, or ankle	- 15100 : Split thickness skin graft harvest and application	
5.1.2	Tendon transfer involving the midfoot, rearfoot, ankle, or leg	- 27690 : Superficial tendon transfer - 27691 : Deep tendon transfer	-May not be used in conjunction with 5.1.4.
5.1.3	Tendon lengthening involving the midfoot, rearfoot, ankle, or leg	- 27605 : Percutaneous TAL with local anesthesia - 27606 : Percutaneous TAL with general anesthesia - 27687 : Gastrocnemius recession - 27685 : Lengthening or shortening of a single tendon - 27686 : Lengthening or shortening of multiple tendons	-Includes percutaneous TALs.
5.1.4	Soft tissue repair of complex congenital foot/ankle deformity (clubfoot, vertical talus)	- 28262 : Extensive midfoot capsulotomy including posterior talotibial capsulotomy and tendon lengthening	
5.1.5	Delayed primary or secondary repair of ligamentous structures	- 27675 : Repair of dislocating peroneal tendons - 27676 : Repair of dislocating peroneal tendons with osteotomy - 27698 : Secondary repair of ankle ligament	
5.1.6	Tendon augmentation/supplementation/restoration	- 27654 : Secondary Achilles tendon repair - 28238 : Kidner-type posterior tibial tendon advancement with navicular accessory bone excision - 28200 : Flexor tendon repair - 28202 : Flexor tendon repair with free graft - 28208 : Extensor tendon repair	-May not be used with 5.1.2.

		-28210: Extensor tendon repair with free graft -27659: Secondary repair of flexor tendon -27665: Secondary repair of extensor tendon	
5.1.7	Open synovectomy of the rearfoot/ankle	-27625: Ankle arthrotomy with synovectomy	-May not be used with 5.1.7, 5.2.7, 5.2.8, 5.2.11.
5.1.8	(procedure code no longer used)	N/A	
5.1.9	Other elective rearfoot reconstructive/ankle soft tissue surgery not listed above	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
Category 5 Elective Osseous			
5.2.1	Operative arthroscopy without removal of loose body or other osteochondral debridement	-29884: Diagnostic ankle arthroscopy -29895: Ankle arthroscopy with synovectomy -29897: Arthroscopy with limited debridement -29898: Arthroscopy with extensive debridement	-May not be logged in conjunction with 5.2.7 or 5.2.8.
5.2.2	(procedure code number no longer used)	N/A	
5.2.3	Subtalar arthroeresis	No specific CPT code for this procedure.	
5.2.4	Midfoot, rearfoot, or ankle fusion	-28740: Single joint midtarsal arthrodesis -28739: Multiple joint midtarsal arthrodesis -28725: Subtalar arthrodesis -28715: Triple arthrodesis -27870: Ankle arthrodesis -27871: Syndesmotomic arthrodesis -28705: Pantalar arthrodesis -28320: Repair of tarsal bone nonunion or malunion -27726: Repair of fibula nonunion or malunion -27720-27725: Repair of tibia nonunion or malunion	
5.2.5	Midfoot, rearfoot, or tibial osteotomy	-28304: Tarsal bone osteotomy	

		- 28305 : Tarsal bone osteotomy with autograft - 28300 : Calcaneal osteotomy - 28302 : Talar osteotomy	
5.2.6	Coalition resection	- 28116 : Tarsal coalition ostectomy	
5.2.7	Open management of talar dome lesion (with or without osteotomy)	- 28446 : Open talar osteochondral autograft	-May not be logged in conjunction with 5.2.1, 5.2.4, 5.2.5, 5.2.8, 5.2.9, or 5.2.11.
5.2.8	Ankle arthrotomy/arthroscopy with removal of loose body or other osteochondral debridement	- 27610 : Ankle arthrotomy including exploration, drainage, or removal of foreign body - 29896 : Ankle arthroscopy with removal of loose body or foreign body - 29897 : Ankle arthroscopy with limited debridement - 29898 : Ankle arthroscopy with extensive debridement	-May not be logged in conjunction with 5.2.4, 5.2.5, 5.2.9, 5.2.11.
5.2.9	Ankle implant	- 27702 : Ankle implant - 27703 : Ankle implant revision	-May not be used in conjunction with 5.1.5, 5.1.7, 5.2.1, 5.2.7, 5.2.8, 5.3.2, or 5.4.3.
5.2.10	Corticotomy or osteotomy with callus distraction/correction of complex deformity of the midfoot, rearfoot, ankle, or tibia	- 27705 : Osteotomy of tibia - 27707 : Osteotomy of fibula - 27709 : Osteotomy of tibia and fibula - 27712 : Reconstructive realignment of the leg	
5.2.11	Other elective rearfoot reconstructive/ankle osseous surgery not listed above	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
Category 5 Non-Elective Soft Tissue			
5.3.1	Repair of acute tendon injury	- 27650 : Primary repair of an Achilles tendon rupture - 27658 : Primary repair of a flexor tendon - 27664 : Primary repair of an extensor tendon	
5.3.2	Repair of acute ligament injury	- 27695 : Primary repair of single ankle ligament - 27686 : Primary repair of multiple ankle ligaments	-May not be used in conjunction with 5.2.9, 5.3.6, 5.4.1, 5.4.2, 5.4.3, or 5.4.4.

5.3.3	Microscopic nerve/vascular repair of the midfoot, rearfoot, or ankle	- 64727 : Internal neurolysis requiring use of a microscope -The CPT code + 69990 is often used as an add-on to indicate that a microscope was utilized.	
5.3.4	Excision of soft tissue tumor/mass of the foot, ankle, or leg (with reconstructive surgery)	- 27615 : Radical resection of tumor from ankle/leg	
5.3.5	(procedure code number no longer used)	N/A	
5.3.6	Open repair of dislocation (proximal to tarsometatarsal joints)	- 28555 : Open treatment of tarsal bone dislocation including internal fixation - 28546 : Percutaneous fixation of tarsal bone dislocation - 28585 : Open treatment of talotarsal dislocation including internal fixation - 28576 : Percutaneous fixation of talotarsal dislocation	-May not be used in conjunction with 5.4.1, 5.4.2, 5.4.3, 5.4.4, or 5.3.2.
5.3.7	Other non-elective rearfoot reconstructive/ankle soft tissue surgery not listed above	No specific CPT code.	*Procedures logged as “other” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
5.3.8	(procedure code number no longer used)	N/A	
Category 5 Non-Elective Osseous			
5.4.1	Open repair of adult midfoot fracture	- 28465 : Open treatment of tarsal bone fracture including internal fixation (excludes talus and calcaneus) - 28456 : Percutaneous fixation of tarsal bone fracture (excludes talus and calcaneus)	
5.4.2	Open repair of adult rearfoot fracture	- 28445 : Open treatment of talar fracture including internal fixation - 28436 : Percutaneous fixation of talar fracture - 28415 : Open treatment of calcaneal fracture - 28406 : Percutaneous fixation of calcaneal fracture	

5.4.3	Open repair of adult ankle fracture	-27766: ORIF isolated medial malleolar fracture -27769: ORIF isolated posterior malleolar fracture -27784: ORIF proximal fibula fracture -27792: ORIF isolated distal fibula fracture -27814: ORIF bimalleolar fracture -27822: ORIF trimalleolar fracture -27827: ORIF pilon fracture (tibia only) -27828: ORIF pilon fracture (both tibia and fibula) -27829: Open treatment of syndesmosis -27846: Delta frame of ankle fracture	
5.4.4	Open repair of pediatric rearfoot/ankle fractures or dislocations	Same codes as adult fractures.	
5.4.5	Management of bone tumor/neoplasm (with or without bone graft)	-27635: Excision or curettage of bone cyst or benign tumor from tibia or fibula -27637: Excision or curettage of bone cyst or benign tumor from tibia or fibula with autograft -27628: Excision or curettage of bone cyst or benign tumor from tibia or fibula with allograft -27645: Radical resection of tibia tumor -27626: Radical resection of fibula tumor -27647: Radical resection of talar or calcaneal tumor	
5.4.6	Management of bone/joint infection (with or without bone graft)	-27607: Incision of leg or ankle (eg, osteomyelitis or bone abscess) -28005: I&D of foot involving bone -20220: Bone biopsy with Jamshidi needle -20240: Superficial open biopsy -20700, 20702, 20704: Antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	

		- 20701, 20703, 20705 : Removal of antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	
5.4.7	Amputation proximal to the tarsometatarsal joints	- 28800 : Midfoot or Chopart amputation - 27889 : Ankle disarticulation - 27888 : Symes amputation	
5.4.8	Other non-elective rearfoot reconstructive/ankle osseous surgery not listed above	No specific CPT code.	*Procedures logged as “ other ” will always get flagged in the CLAD report, but can be cleared by program directors if appropriate.
5.4.9	(procedure code no longer used)	N/A	
Category 6 Other Podiatric Procedures			
6.2	Excision or destruction of skin lesion (including skin biopsy and laser procedure)	- 27613 : Superficial biopsy of leg/ankle - 11104 : Punch biopsy - 11106 : Excisional biopsy - 11755 : Nail biopsy -LASER procedures are generally used with 0552T .	
6.3	Nail avulsion (partial or complete)	- 11730 : Partial or total nail avulsion	
6.4	Matrixectomy (partial or complete, by any means)	- 11750 : Matrixectomy	
6.5	Removal of hardware (internal or external fixation)	- 20680 : Hardware removal - 27704 : Removal of ankle implant - 20701, 20703, 20705 : Removal of antibiotic bead delivery into tissue, the IM canal of bone, and intra-articularly, respectively.	
6.6	Repair of simple laceration (no neurovascular, tendon, or bone/joint involvement); includes simple delayed wound closure	- 12001 : Simple repair of superficial wound on feet (<2.5cm) - 12002 : Simple repair of superficial wound on feet (2.6-7.5cm) - 12003 : Simple repair of superficial wound on feet (7.6-12.5cm)	
6.8	Extracorporeal shock wave therapy	- 28890 : High energy extracorporeal shock wave therapy with anesthesia	

6.9	Taping/padding/splinting/casting (limited to the foot and ankle)	-29550: Toe strapping -29540: Foot/ankle strapping -29515: Posterior splint -29405: Short leg cast -29445: Total contact cast -29450: Clubfoot casting with manipulation	
6.10	Orthotics/prosthetics (limited to the foot and ankle casting/scanning/impressions for foot and/or ankle orthosis)	-29799: Unlisted casting or strapping -97760: Orthotic management and training -97761: Prosthetic management and training	
6.14	Percutaneous procedures (i.e., coblation, cryosurgery, radiofrequency ablation, platelet-rich plasma, digital tenotomy)	-28010: Percutaneous tenotomy of a single toe -28011: Percutaneous tenotomies of multiple toes -28232: Percutaneous flexor tenotomy	
6.15	Foot care (nail debridement, callus paring)	-11720: Debridement of ≤ 5 nails -11721: Debridement of > 5 nails -11055: Debridement of 1 callus -11056: Debridement of 2-4 calluses -11057: Debridement of > 5 calluses	
6.16	Therapeutic/diagnostic injections (without sedation)	-20600: Small joint injection -20605: Intermediate joint injection -64450: Nerve injection	
6.17	Incision and drainage (performed outside of the operating room)	-10060: Simple I&D -10061: Complicated or multiple I&D	
6.18	Closed reduction of fracture or dislocation	Care with these is recommended as they are associated with a 90-day global period. Should likely really only be used if ORIF is not planned. -28510: Closed treatment toe fracture -28490: Closed treatment of hallux fracture -28470: Closed treatment of metatarsal fracture -28400: Closed treatment of calcaneal fracture	

		-27786: Closed treatment of fibular fracture -27808: Closed treatment of bimalleolar fracture -27818: Closed treatment of trimalleolar fracture -27860: Examination under anesthesia	
6.19	Removal of foreign body (not in the operating room)	-10120: Simple foreign body extraction -10121: Foreign body extraction requiring anesthesia and/or suturing	
6.20	Application of external fixation	-20690: Uniplanar external fixation application -20692: Multiplanar external fixation application	
Category 7 Biomechanics			
7.1	Biomechanical case; must include diagnosis, evaluation (biomechanical and gait examination), and treatment	No specific CPT code.	
Category 8 History and Physical Examination			
8.1	Comprehensive history and physical examination	<i>Might</i> be more likely to be associated with 99203, 99204, 99205 (new patients) and 99213, 99214, 99215 (established patients).	
8.2	Problem focused history and physical examination	<i>Might</i> be more likely to be associated with 99202 and 99203 (new patients), and 99212 and 99213 (established patients).	
Category 9 Surgery Specialties		N/A	
Category 10 Medicine and Medical Subspecialty Experiences		N/A	

Category 11 Lower Extremity Wound Care			
11.1	Excisional debridement of ulcer or wound (e.g. neuropathic, arterial, traumatic, venous, thermal)	-11042: Wound debridement to subcutaneous tissue -11043: Wound debridement to muscle/fascia -11044: Wound debridement to bone	
11.2	Advanced wound care modalities (e.g. negative pressure wound therapy, cellular and/or tissue-based product, total contact casting, multi-layer compression therapy/Unna boot)	-29580: Unna boot application -29445: Total contact cast application -97605: NPWT application <50cm2 -97606: NPWT application >50cm2 -15271: Skin substitute graft application <25cm2 -15272: Skin substitute graft application >25cm2	
11.3	Hyperbaric oxygen therapy	-99183: Supervision of HBOT	
Category 13 Other Clinical Experiences			
13.1	Other clinical experiences (i.e. mission trips; procedures performed outside the United States)	N/A	*These procedures will be found in clinical logs on PRR, but do not count toward MAV/Diversity requirements.