

Clinical Indicators: Diagnostic Nasal Endoscopy

<u>Procedure</u> CPT Days¹

Nasal endoscopy, diagnostic, unilateral or bilateral (separate procedure)* 31231 000

*Note: Separate Procedure by CPT definition means the code should not be reported with other procedures of which it is a part; in this case, therapeutic nasal/sinus endoscopic procedures.

Indications

1. History (one or more required)

- a) Obstructed nasal breathing
- b) Epistaxis, anterior or posterior, either active or past history
- c) Facial pain or headache consistent with sinonasal origin
- d) Purulent nasal drainage (anterior or posterior) of more than two weeks duration or when an endoscopic-directed culture is desired (severe symptoms, immunocompromise, suspected suppurative complication of rhinosinusitis, failure to respond to treatment, etc)
- e) Sinus barotrauma (after flying or diving).
- f) Watery rhinorrhea suggestive of cerebrospinal fluid leak
- g) Persistent sinus abnormality on diagnostic imaging study
- h) History suggestive of nasal foreign body or mass
- i) Follow-up examination of known nasal, sinus, or nasopharyngeal neoplasm
- j) Anosmia or hyposmia
- k) Follow-up examination following functional endoscopic sinus surgery
- 1) Snoring and/or sleep apnea
- m) Oro -antral (oro-maxillary) fistula

2. Physical Examination (one required)

a) Anterior rhinoscopy insufficient to account for symptoms.

¹ RBRVS Global Days



b) Abnormal anterior rhinoscopy requiring more thorough nasal evaluation, including, but not limited to suspected chronic rhinosinusitis, sinonasal polyposis, neoplasm, and/or foreign body

Post-Procedure Observations

- a) Nasal bleeding.
- b) New nasal or facial pain.

Outcome Review

a) Document procedure, findings, and any complications on the day of procedure.

Associated ICD-9 Diagnostic Codes (Representative, but not all-inclusive, codes)

160.0	Carcinoma nasal cavity
160.1	Carcinoma auditory tube, middle ear, mastoid
160.2	Carcinoma maxillary sinus
160.3	Carcinoma ethmoid sinus
160.4	Carcinoma frontal sinus
160.5	Carcinoma sphenoid sinus
160.8	Carcinoma sinuses, other sites, overlapping
160.9	Carcinoma sinuses, NOS 172 Malignant melanoma
212.0	Benign neoplasm of nasal cavity and accessory sinuses
231.8	Carcinoma in-situ, nasal, sinus
349.81	Rhinorrhea, cerebrospinal (fluid)
352.0	Disorders of olfaction
461.0	Acute sinusitis, maxillary
461.1	Acute sinusitis, frontal
461.2	Acute sinusitis, ethmoidal
461.3	Acute sinusitis, spehnoidal
461.9	Acute sinusitis
470	Deviated nasal septum, acquired
471.0	Nasal polyposis
471.1	Polypoid degeneration
471.8	Polyp of sinus
472.2	Chronic rhinitis



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473.0	Chronic maxillary sinusitis
473.1	Chronic frontal sinusitis
473.2	Chronic ethmoidal sinusitis
473.3	Chronic sphenoidal sinusitis
473.8	Chronic pansinusitis
473.9	Sinusitis, chronic (may also code for specific sinus)
477.0	Allergic rhinitis due to pollen
477.1	Allergic rhinitis due to pollen
477.2	Allergic rhinitis due to food
477.8	Allergic rhinitis due to other allergen
477.9	Allergic/vasomotor rhinitis
478.0	Hypertrophy of nasal turbinates
478.1	Other diseases of nasal cavity (including obstruction and rhinorrhea)
738.0	Nasal deformity, acquired
748.0	Choanal atresia
748.1	Cleft nose
754	Deviated nasal septum, congenital
781.01	Disturbances of sensation of smell
784.0	Headache
784.7	Epistaxis
802.0	Fracture, nasal (bones), closed
802.1	Fracture, nasal (bones), open
932	Foreign body in nose
993.1	Barotrauma, sinus

Patient Information

Nasal endoscopy is done when there may be a condition or disease in the nose or sinuses that is not adequately visualized on routine examination. The nose may be sprayed with a decongestant and topical anesthetic before insertion of a rigid and/or flexible endoscope. The procedure can be performed on both adults and children, although the latter may require general anesthesia. The throat may be numb for several minutes following use of an anesthetic.



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