Coders’ Dictionary
Defining medical terms from a coding and reimbursement perspective

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Introduction

Congratulations on your decision to purchase the eighth edition of Coders’ Dictionary, the only medical dictionary designed exclusively for medical coders, billers, and reimbursement professionals. It was created when our own clinical editors discovered traditional medical dictionaries often did not provide answers to their coding questions. Unlike more traditional medical dictionaries, Coders’ Dictionary lays the groundwork for understanding medical terminology from a coding perspective, enhancing the ability to interpret a medical record and more accurately code a claim.

The intention of the Coders’ Dictionary is not to provide definitions for all conceivable medical terms, but instead to focus on definitions that may confound a coder or biller. Subsequently, while a certain basic level of medical terminology knowledge is presumed of a coder, the Coders’ Dictionary is continuing to include common medical abbreviations and anatomical definitions particularly with the implementation of ICD-10. The additional specificity inherent with ICD-10 places a greater emphasis on anatomy and physiology and including these terms can help ease a coder’s transition by allowing for quick and easy reference of key anatomic terms and common abbreviations frequently seen in medical documentation.

To create Coders’ Dictionary, Optum360 coding experts generated a list of ambiguous or vexing words found in the medical record or in billing and reimbursement communications, in addition to standard anatomy and physiology terminology and common medical abbreviations. The words may be acronyms, eponyms, or abbreviations, or they may represent generic or brand name medical devices or pharmaceuticals. Unusual procedural, anatomical, or epidemiological terminology from the medical record is also included. The goal of Coders’ Dictionary is to provide specific definitions and sometimes coding instructions that accommodate the narrow focus of the medical coder or biller. In some cases, the definition may direct the reader to a single, specific code. In other cases, only a general clinical definition is necessary to provide a road map to appropriate code selection.

Contents

Coders’ Dictionary is comprised of different segments, including anatomical illustrations, the main body of alphabetically ordered terms with coding information for ICD-9-CM, CPT®, and HCPCS Level II coding, and Appendixes of tables for metric conversions.

Organization

Terms and Definitions
The terms in the main body of the book are organized in numeric and alphabetic order, with numeric entries preceding the alphabetic entries. The term being defined will appear in bold, at the beginning of the entry.

Compound nouns will appear in their natural language order:

radiotherapy afterloading

rather than:

afterloading, radiotherapy

Following the bolded term will be a definition appropriate to coding and reimbursement and sometimes coding instructions. If the term being defined is an acronym, the first words of the definition will provide the acronym’s actual meaning:

TCD Transcranial Doppler. Noninvasive ultrasound technology used to evaluate blood flow in the major intracranial arteries. TCD done with contrast is performed by intravenous microbubble injection, in which the bubbles serve to enhance ultrasound signals, thereby producing better visualization. TCD procedures are reported with a CPT code from range 93886-93893.

Prefixes and Suffixes

Prefixes and suffixes used in medical terminology are incorporated alphabetically into the main body of the book. These are not complete words; only the beginning (prefix) or end (suffix) of a word appears with its meaning. Each partial word has a meaning:

-cyst- Relating to the urinary bladder or a cyst. (prefix)

-ectomy Excision, removal. (suffix)

These partial words can be put together to define a complete word:

cystectomy 1) Excision or removal of the urinary bladder. 2) Excision or removal of a cyst on any anatomical site.

Prefixes and suffixes are typically not seen in medical documentation as stand-alone words.
commonly found in the Mediterranean and around the Black and Caspian Seas, having many names depending on the geographical region.

**Associated ICD-9-CM Code(s):** 082.1

**boutonniere defect**  
Finger deformity that presents as flexion of the proximal interphalangeal joint and extension of the distal interphalangeal joint.

**Associated ICD-9-CM Code(s):** 736.21

**boutonniere deformity**  
Finger deformity with hyperextension of the distal joint and flexion of the interphalangeal joint.

**boutonniere reconstruction**  
Reconstruction of the central slip extensor tendon in the affected finger to allow extension of the proximal interphalangeal joint.

**Synonym(s):** Fowler procedure, Littler procedure, Matav procedure.

**Associated CPT Code(s):** 26426-26428

**Bouveret (-Hoffmann) syndrome**  
Rapid action of the heart with sudden onset and cessation.

**Associated ICD-9-CM Code(s):** 427.2

**BOW**  
Bag of waters.

**bowel distress syndrome**  
Abdominal pain, watery stools, and gas.

**Associated ICD-9-CM Code(s):** 536.9

**bowel syndrome**  
Hypoglycemia and malabsorption following surgery.

**Associated ICD-9-CM Code(s):** 579.3

**Bower’s arthroplasty**  
Joint repair of the wrist done to treat rheumatoid arthritis or trauma of the distal radioulnar joint. The articular surface of the distal radius, as well as the ulna if it is severely involved, is removed, and a prosthetic piece is interposed.

**Synonym(s):** hemi-resection interposition arthroplasty.

**Associated CPT Code(s):** 25332

**bowleg**  
Condition in which the thighs and/or legs are bowed in an outward curve with an abnormally increased space between the knees. **Synonym(s):** genu vara, tibia vara.

**Associated ICD-9-CM Code(s):** 736.42, 754.44

**bowler’s thumb**  
Irritation of the lateral side of the thumb from holding the bowling ball. Results in flexor tendon irritation.

**Associated ICD-9-CM Code(s):** 727.05
**Bowman’s membrane**  
Corneal layer just under the epithelium and above the corneal stroma.

**boxer’s elbow**  
Chip fracture (closed) on the tip of the olecranon process resulting from a fast extension of the elbow in a missed punch.  
**Associated ICD-9-CM Code(s):** 813.01

**boxer’s fracture**  
Fracture resulting from punching a hard surface, causing a break of the head of the fifth metacarpal with volar angulation.  
**Associated CPT Code(s):** 26600-26615  
**Associated ICD-9-CM Code(s):** 815.04, 815.14

**Boyd amputation**  
Removal of the foot at the ankle level with fusion of the tibia and calcaneal bones.  
**Associated CPT Code(s):** 27880-27889

**Boyer cyst**  
Cyst or enlargement within the subhyoid bursa, found in the tissue posterior to the hyoid bone in the throat.  
**Associated ICD-9-CM Code(s):** 478.79

**BP**  
1) Blood pressure  
2) Business partner. Person or organization that performs a function or activity on behalf of a covered entity but that is not part of the covered entity’s workforce. A business associate can also be a covered entity in its own right.  
**Synonym(s):** BA, business associate.

**BPD**  
1) Biliopancreatic diversion. Treatment for obesity in which three-quarters of the stomach is removed to restrict food intake and reduce acid output. The small intestine is divided, with one end attaching to the newly-reduced stomach. A biliopancreatic limb allows digestive juices to flow into the intestine for digestion.  
**Synonym(s):** Scopinaro procedure.  
2) Bronchopulmonary dysplasia. Complication seen in premature infants reported with ICD-9-CM code 770.7.  
**Associated ICD-9-CM Code(s):** 770.7

**BPF**  
Bronchopleural fistula.

**BPPV**  
Benign positional paroxysmal vertigo. Common cause of dizziness that may be idiopathic or caused by neuritis, stroke, or trauma.  
**Associated ICD-9-CM Code(s):** 386.11

**Br**  
Periodic table chemical element symbol for bromine.

**brace**  
Orthotic device that supports, in correct position, any moveable body part, and allows for limited movement. Medicare has a strict definition of a brace that includes only rigid or semirigid devices.

**brach(i)-**  
Relating to the arm.

**brachial plexus**  
Large bundle of nerves originating in the C5 to T2 spinal segments, located in the neck, axilla, and subclavicular area, and an anatomic landmark and site of administration of medication for pain management.  
**Associated CPT Code(s):** 64415-64416, 64713, 64861  
**Associated ICD-9-CM Code(s):** 353.0

**brachialis tendon**  
I-10  
Upper arm tendon, right, left.

**brachioradialis tendon**  
I-10  
Lower arm and wrist tendon, right, left.

**Brachmann-de Lange syndrome**  
Congenital disorder presenting with impaired prenatal and postnatal development, intellectual disabilities, microcephaly, and palmar crease.  
**Synonym(s):** de Lange’s syndrome.  
**Associated ICD-9-CM Code(s):** 759.89

**brachy-**  
Short.

**brachycephaly**  
Congenital deformity in which there is an abnormally broad head and a high forehead, associated with early closure of the coronal sutures. This condition is present in many syndromal abnormalities.  
**Associated ICD-9-CM Code(s):** 756.0

**brachydactyly**  
Congenital anomaly where digital underdevelopment results in short fingers. Brachydactyly can affect any component of a digit and can occur alone or with other anomalies.
reduction in self-control, foresight, creativity, spontaneity, emotional vivaciousness, and empathy.

Associated ICD-9-CM Code(s): 310.0
Associated ICD-10-CM Code(s): F07.0

Frontal Sinusotomy

- Burr makes an opening into the frontal sinus
- Catheters irrigate sinus
- Procedure drains obstructed frontal sinus

frontal sinusotomy  Surgical procedure in which the anterior wall of the frontal sinus is excised, the diseased tissue removed, and a permanent opening is created between the nasal cavity and the maxillary sinus in order to facilitate sinus drainage. Synonym(s): Killian operation.

Associated CPT Code(s): 31070-31087
Associated ICD-9-CM Vol 3 Code(s): 22.41

Frost procedure  Type of wedge excision utilizing an "L" shaped incision to remove the nail root and soft tissue usually performed on toe nails.

Associated CPT Code(s): 11765

Frost suture  Temporary sutures of the eyelid.

frostbite  Damage to skin, subcutaneous, and possibly deeper tissue caused by exposure to low temperatures, resulting in ischemia, thrombosis, even gangrene, and the loss of affected body parts.

frozen section  Thin slice of frozen tissue removed for microscopic study with a special cutting instrument, often used to confirm the nature of tissue during a procedure.

frozen tissue  Group of similar cells that have been frozen and thinly sliced according to specifications to preserve the tissue for diagnostic or histochemistry studies. Freezing methods include slow freeze or rapid freeze using sprays or carbon dioxide gas, solid carbon dioxide, or liquid nitrogen.

FSA  Flexible spending account.

FSE  Fetal scalp electrode.

FSF  Frontal sinus fracture.

Associated ICD-9-CM Code(s): 801.00-801.99, 801.01
Associated ICD-10-CM Code(s): S02.19XA-S02.19XS

FSH  Follicle stimulating hormone. Gonadotropic hormone secreted by the anterior lobe of the pituitary gland. In women, it stimulates growth and maturation of the ovum and its enclosing cells, the production of estrogen, and the endometrial changes that occur in the first phase of the menstrual cycle. In men, it stimulates the production of sperm.

ft  Foot.

FTE  Full time employee. Accounting equivalent of one full time employee that includes wages, benefits, and other costs.

FTND  1) Fagerstrom Test for Nicotine Dependence. Survey assessing a smoking patient’s dependence on nicotine. Tobacco dependence is reported with a code from ICD-10-CM subcategory F17.2. Do not report Z87.891 Personal history of nicotine dependence, if the patient still smokes. 2) Full-term normal delivery.

Associated CPT Code(s): 1000F
Associated ICD-9-CM Code(s): 305.1
Associated ICD-10-CM Code(s): F17.2

FTQ  Fagerstrom Tolerance Questionnaire. Survey assessing a smoking patient’s dependence on nicotine. Do not report personal history of nicotine dependence codes when the patient is currently smoking.

Associated CPT Code(s): 1000F
Associated ICD-9-CM Code(s): 305.1
Associated ICD-10-CM Code(s): F17.20-F17.299

FTSG  Full thickness skin graft.

FUDR  See floxuridine.

Associated HCPCS Code(s): J9200

-fuge  Drive out or expel.

Fukala’s operation  Lens is removed from the eye to treat nearsightedness.

Associated CPT Code(s): 66840

fulgurate  Destruction by electric current.

fulguration  Destruction of living tissue by using sparks from a high-frequency electric current.

full thickness  Consisting of skin and subcutaneous tissue.

full thickness skin graft  Graft consisting of skin and subcutaneous tissue. Synonym(s): FTSG.